

**This meeting will be taped**  
**Please turn off all electronic communication devices and place cell phones on vibrate**

**Ogle County Board Meeting Agenda**

**Tuesday, January 19, 2016 at 5:30 p.m.**

Call to Order:

Roll Call:

Invocation & Pledge of Allegiance: **Janes**

**Presentation** – County Engineer, Curtis D. Cook – Annual Report

**Consent Agenda Items – by Roll Call Vote**

1. Approval of December 15, 2015 County Board Meeting Minutes
2. Accept Monthly Reports – Treasurer, County Clerk & Recorder and Circuit Clerk
3. Appointments –
  - Board of Health – Dawood Harunani, DDS, MAGD – R-2016-0101
4. Resignations – none
5. Vacancies -
  - Mental Health 708 Board – 1 vacancy
  - Franklin Grove Fire Protection District – 1 vacancy

Application and Resumé deadline – Friday, January 29, 2016 at 4:30 p.m.  
in the County Clerk’s Office located at 105 S. 5<sup>th</sup> St – Suite 104, Oregon, IL

6. Ogle County Claims –
  - Department Claims – December 2015 - \$15,939.37
  - County Board Payments – January 19, 2016 – \$310,898.93
  - County Highway Fund – \$58,225.25
7. Communications –
  - ComEd Vegetation Management Notice
  - Sales Tax for September 2014 was \$24,459.68 and \$71,447.18
  - Sales Tax for September 2015 was \$29,879.76 and \$69,295.01
  - Sales Tax for October 2014 was \$44,426.96 and \$78,507.38
  - Sales Tax for October 2015 was \$30,979.88 and \$75,467.91

**Zoning – #2-15 SPECIAL USE - Byron-Oregon Sportsman & Conservation Club – O-2016-0101**

Byron-Oregon Sportsman & Conservation Club, Inc. % Oscar K. Welty III, President, 1509 E. Town Line Rd.- PO Box 742, Byron, IL for a Special Use Permit to allow a shooting range in AG-1 Agricultural District on property described as follows and owned by the petitioner: Part of the W1/2 of the NE1/4 and part of the E1/2 of NW1/4 of Section 2 Rockvale Township 24N, R10E of the 4<sup>th</sup> P.M., Ogle County, IL, 19.93 acres, more or less. P.I.N.: 09-02-126-002 –  
Common Location: 1509 E. Town Line Rd.

**Public Comment –**

## **Reports and Recommendations of Committees –**

- Executive:
  - Ogle County Safety Manual – R-2016-0102 (presented and distributed on December 15, 2015)
  - Annual Meeting Notice – R-2016-0103
- Finance & Insurance (County Clerk & Recorder and Treasurer):
  - Indemnity Fund – O-2016-0102
  - Transfer IFiber, Sheriff's Petty Cash, Bad Check Restitution and Self Insurance Reserve Fund to General Fund – R-2016-0104
  - 2016 Budget Amendment – Appropriate funds for Probation Vehicle – present & February vote
- Long Range Planning:
  - Long Range Bills – R-2016-0105
  - Project Updates –
- State's Attorney and Juvenile & Probation:
  - State's Attorney Appellate Prosecutor – R-2016-0106

## **Unfinished and New Business:**

### **Chairman Comments:**

- Multi-County Partnership
- Exelon donation to Weld Park Eagle Scout Memorial Project

### **Vice-Chairman Comments:**

### **Closed Session:**

### **Adjournment**

Motion to adjourn until Tuesday, February 16, 2016 at 5:30 p.m.

Agenda will be posted at the following locations on Friday after 4:00 p.m.

105 S. 5<sup>th</sup> Street, Oregon, IL

[www.oglecounty.org](http://www.oglecounty.org)

December 23, 2015

Ogle County Board Chairman  
Ogle County  
Ogle County Courthouse  
Oregon, IL 61061

Re: Notification Required under 220 ILCS 5/8-505.1

Dear Sir or Madam:

ComEd intends to perform vegetation management activities on a distribution circuit in Ogle, during the time period of February thru March. The vegetation management activities are a key component of ComEd's maintenance program to ensure system electrical reliability, as vegetation contact with ComEd equipment is a leading cause of outages.

In accordance with applicable statutory requirements, ComEd is required to provide each affected municipality a map or common addresses of the area affected by the vegetation management activities. This map, illustrating geographic areas where trimming may occur, is attached to the email along with this letter.

Please be aware that ComEd has notified any affected customers and property owners with (i) a statement of the vegetation management activities planned, (ii) the address of a website and a toll free telephone number at which a written disclosure of all dispute resolution opportunities and processes, rights, and remedies provided by the electric public utility may be obtained, (iii) a statement that the customer and the property owner may appeal the planned vegetation management activities through the electric public utility and the Illinois Commerce Commission, (iv) a toll-free telephone number through which communication may be had with a representative of the electric public utility regarding the vegetation management activities, and (v) the telephone number of the Consumer Affairs Officer of the Illinois Commerce Commission. The notice also stated that circuit maps or common addresses of the area to be affected by the vegetation management activities are on file with the local municipal or county office. A sample copy of this notice is also included with this letter.

We recognize that our vegetation management activities sometimes create concern by your residents because trees near our electrical wires are significantly trimmed or sometimes require removal. Qualified line-clearance workers contracted by ComEd will be performing the tree pruning work. Supervisors and General Foremen will be in close contact with the crews, ensuring that the work is performed properly. Additionally, we are strong advocates of proactive efforts to ensure that only appropriate vegetation is planted near our facilities, and our easement and leases usually specify vegetation restrictions. Trees that grow greater than 20 feet, for example maple, elm and blue spruce, should never be planted under or near distribution power lines. At full height, these trees could contact lines and cause a power outage or create a safety issue. On the other hand, trees and bushes that grow to heights less than 20 feet, for example dogwoods or crabapples, can often be planted near distribution power lines. For more information about vegetation maintenance along power lines and ComEd's "Right Tree, Right Place" program, please visit:

<http://www.comed.com/sites/customerservice/Pages/TreesPowerlines.aspx>

Please direct any resident with questions or concerns to contact us at 1 (800) Edison-1

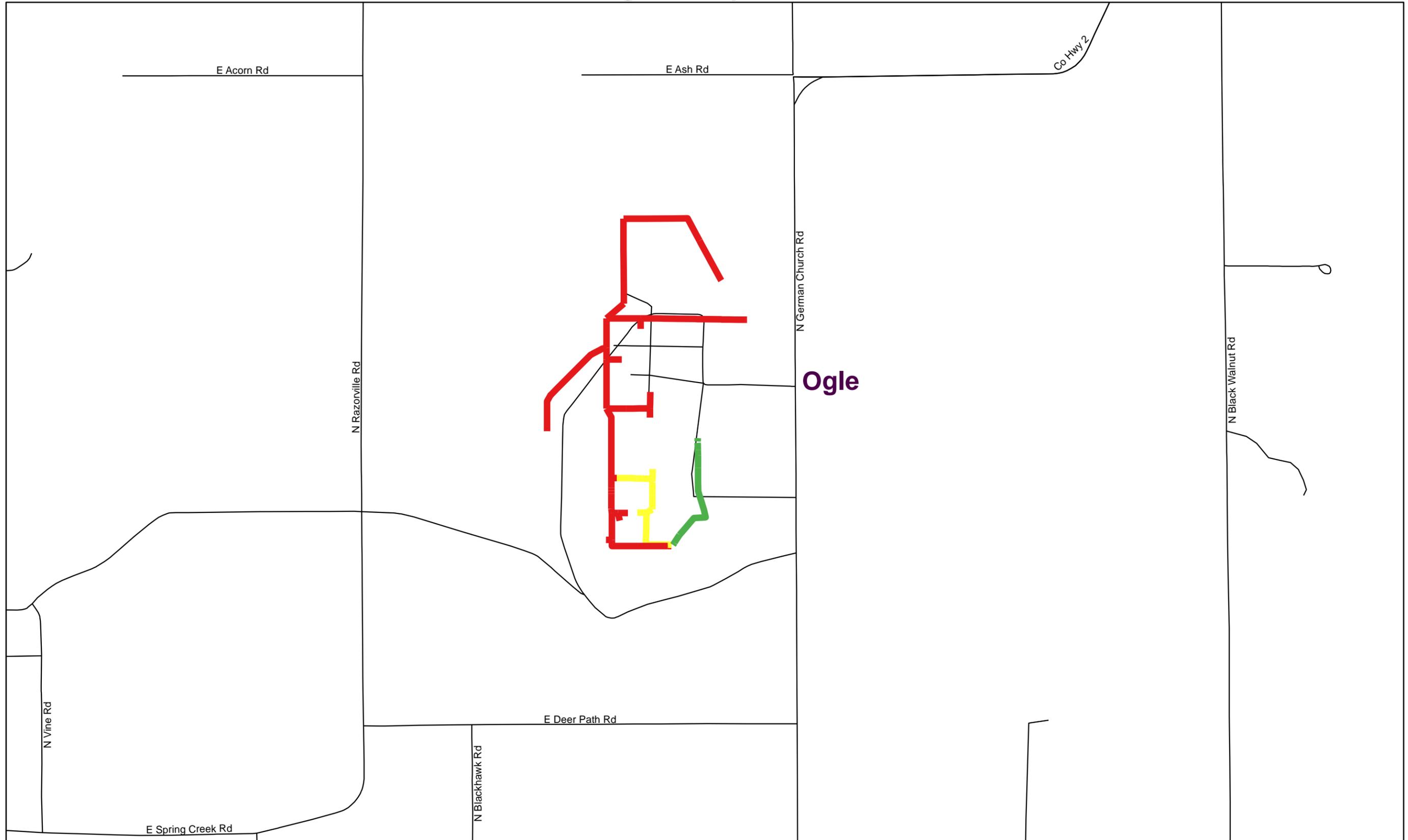
Sincerely,

Katie Runyan  
Sr. Vegetation Management Project Manager  
Vegetation Management Department

See the attached map of the following circuits with upcoming vegetation activities:



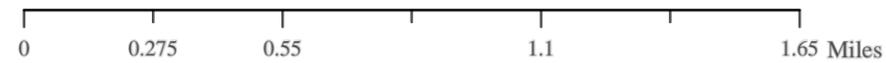
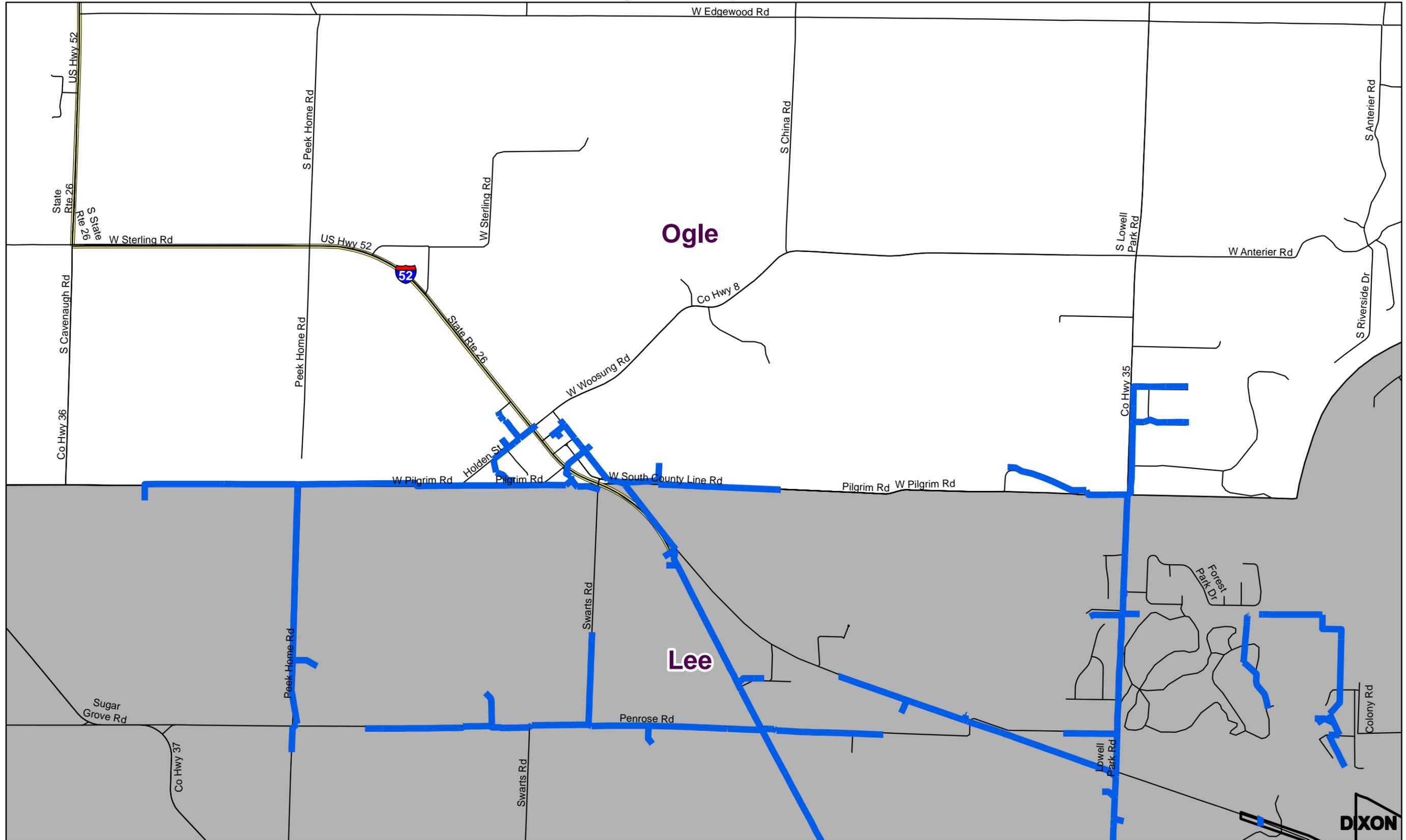
# ComEd Vegetation Management Scheduled Preventive Maintenance Circuits Ogle County



**Legend**



# ComEd Vegetation Management Scheduled Preventive Maintenance Circuits Ogle County



### Legend

 H1782

Note: This information is proprietary and confidential.

**IMPORTANT**



# TREE TRIMMING SCHEDULED IN YOUR AREA



**Arborists performing vegetation management  
for ComEd will be working in your  
neighborhood within the next 3 months.**

**This is a courtesy notification.  
No response is necessary.**

**ComEd**<sup>®</sup>  
An Exelon Company

**powering lives**

# TREE TRIMMING TO BEGIN SOON

Trees and branches that interfere with power lines can create safety hazards and cause power outages. Preventative tree maintenance helps avoid power outages.

- Within the next 3 months we will trim trees, branches and vines that interfere or have the potential to interfere with power lines.
- In some cases, tree removal may be required. The remaining tree stumps are treated with an approved herbicide to prevent future regrowth. Herbicide will be applied by state-licensed applicators.
- All work is performed by trained, qualified arborists.

## FOR MORE INFORMATION

Visit [ComEd.com/Trees](http://ComEd.com/Trees) or call us at 800-Edison-1 (800-334-7661)

## PARA MÁS INFORMACIÓN

Visite [ComEd.com/Arboles](http://ComEd.com/Arboles) o llámenos al 800-95-LUCES (800-955-8237)

If you have any questions regarding the tree trimming process, call 800-Edison-1 (800-334-7661) and ask to speak with a Vegetation Management representative, or visit our web site at [ComEd.com/Trees](http://ComEd.com/Trees). You may also request a written copy of the dispute resolution process. Property owners may appeal planned vegetation management activities through ComEd or the Illinois Commerce Commission. To contact a Consumer Affairs Officer of the Illinois Commerce Commission call 800-524-0795. Maps of the affected areas are on file at your local municipal or county office.

VMPM0214

**ComEd**<sup>®</sup>

An Exelon Company

P.O. Box 805379  
Chicago, IL 60680-5379

INDICIA

Sample A. Sample  
1234 Main Street  
Apt. 123  
Your Town, IL 12345-6789



**County Infrastructure Committee Meeting**  
**Tentative Minutes**  
**January 12, 2016**

1. Call to order: Chairman Gronewold calls meeting to order at 2:00 p.m. Committee Members present: Finfrock, Griffin, Heuer, Kenney and Typer. Others present: Colson, Colbert, Simms, Nordman, McKinney, Sheriff Brian VanVickle, IT Director Larry Callant, Jacob Kocourek and James Kocourek. Absent: Bolin.
2. Approval of Minutes: Motion by Finfrock to approve the December 8, 2015 minutes, 2<sup>nd</sup> by Kenney. Motion carries.
3. Eagle Scout Presentation: Jacob Kocourek from Troop 313 in Stillman Valley gives the committee an update on his Eagle Scout Project at Weld Park for the Catherwood Memorial Playground. He has since raised \$8,000 which includes a \$5,000 donation from Exelon. He will continue fundraising until March and then will need to turn the money over to the County, as owners of the property the County will need to write the check for the equipment. He also asks the committee if they are willing to make a donation. Motion by Kenney to donate \$1,000 out of the Buildings & Grounds repair line item toward the project, 2<sup>nd</sup> by Typer. Roll call vote: Finfrock – yes, Griffin – yes, Heuer – yes, Kenney – yes, Typer – yes and Gronewold – yes. Motion carries. Kocourek will email the Sheriff an invoice for the playground equipment by March 8<sup>th</sup>.
4. Approval of Bills:
  - ◆ Review of Credit Card Billing – none
  - ◆ Review of Department Claims - \$7,460.39. Motion by Kenney that claims have been reviewed, 2<sup>nd</sup> by Griffin. Motion carries.
  - ◆ Building and Grounds - \$37,269.08. Motion to approve bills by Kenney, 2<sup>nd</sup> by Heuer. Sheriff Brian VanVickle will review the bills from Menards and clean up the accounting. Motion carries.
  - ◆ Central Purchasing – no bills
  - ◆ IT/NITT bills - \$23,705.34. Motion by Finfrock to send bills to the Finance Committee, 2<sup>nd</sup> by Griffin. Motion carries.
5. Public Comment: Colson reports moss growing on the north side of the Judicial Center and recommends getting it cleaned up as well as the limestone base around the building. The Sheriff will get this taken care of as weather permits.
6. Infrastructure Discussion: none
7. IT/NITT Discussion and Comments: Finfrock states at this point they are just looking for a graceful way out of NITT to avoid more costs. They will meet again on January 28 and will discuss an exit plan.
8. Old Business:
  - ◆ Weld Park: VanVickle spoke to County Engineer Curtis Cook who is going to put a culvert in.
  - ◆ Judicial Center: VanVickle will look at cleaning it up in the Spring.
9. New Business: none
10. Possible closed session per 5 ILCS 120/2: none
11. Adjournment: With no further business, Chairman Gronewold adjourns the meeting at 2:39 p.m.

## COUNTY SECURITY COMMITTEE MEETING

### Tentative Minutes

January 12, 2016

1. Call to order: Chairwoman Nordman calls the meeting to order at 1:00 p.m. Committee Members Present: Gronewold, Meyers, McKinney, Colbert, Brooks and Saunders. Others: Typer, Simms, Kenney, Finrock (enters at 1:13 p.m.), Sheriff Brian VanVickle and County Coroner Lou Finch (leaves at 1:24 p.m.)
2. Approval of Minutes: Motion by Gronewold to approve minutes from December 8, 2015, 2<sup>nd</sup> by Meyers. Colbert states there is a correction to be made under Adjournment: "Chairwoman Nordman" should be Vice Chairman Gronewold adjourns the meeting. Motion carries to amend the minutes.
3. Public comment: none
4. Approval of bills:
  - Motion by McKinney that the credit card bills and department billing have been reviewed, 2<sup>nd</sup> by Meyers. Motion carries.
    - Credit Card Billing: \$22,602.50
    - Sheriff's Office: bills total \$4,662.54
    - Emergency Communications: bills total \$1,633.03
    - Corrections: bills total \$1,019.00
    - OCEMA: bills total \$60.03
  - Sheriff: Motion by Brooks to approve all bills, 2<sup>nd</sup> by McKinney. Motion carries.
    - Sheriff's Office: bills total \$29,667.74
    - Emergency Communications: bills total \$20,638.07
    - Corrections: bills total \$39,639.79
    - OCEMA: bills total \$1,351.76
  - Coroner: Motion by Gronewold to approve bills totaling \$4,051.18, 2<sup>nd</sup> by McKinney. Motion carries.
5. Coroner Discussion/Comments: County Coroner Lou Finch explains he has an indigent body in the morgue. About 3 years ago the County accepted bids from local funeral homes to cremate these bodies but it expired after 1 year. He asks the committee how they would like to handle this. Motion by Saunders to use the previous funeral home for this cremation and then have the Coroner send out letters for bids by February 1<sup>st</sup> to be renewed every 4 years, the bids will be opened by this committee next month, 2<sup>nd</sup> by Colbert. Motion carries.
6. Sheriff Discussion/Comments: Sheriff Brian VanVickle goes through the Sheriff's monthly reports and year-end totals.
7. Safety Discussion/Comments: none
8. Closed Session: none
9. New Business:
  - Resolution regarding the renaming and use of Sheriff's Petty Cash Fund – After some discussion the committee decides to table this to see what the Finance committee decides to do tonight.
10. Adjournment: With no further business, Chairwoman Nordman adjourns the meeting at 1:50 p.m.

Respectfully submitted,  
Courtney Warren

Death Updates Through January 12, 2016.....  
 (County Board Date/Jan 19th)

	Non-Hosp	Hospice
Home	3	16
Nursing Home	5	13
Hospital	1	
Homicide		
Suicide		
Other		
Cases Pending	<ol style="list-style-type: none"> <li>1. Daniel Stultz - Gunshot to Head</li> <li>2. Mark Schwartz - Found in Kitchen</li> <li>3. Kevin Holderness - Found in Chair</li> <li>4.</li> <li>5.</li> </ol>	
	Total: 41	

Total Deaths for the year of : **2015 389** (January has 14 deaths already for 2016)

2014: 429

2013: 438

2012: 414

2011: 344

2010: 330

2009: 334

2008: 307

2007: 312

2006: 320

2005: 324

2004: 321

2003: 309



R-2013-0807

Attachment B

OGLE COUNTY CREDIT CARD LOG SHEET

Tow Fund: \$1781.93  
 DUI FUND: \$1336.33  
 B&G: \$363.89  
 Sheriff: \$4062.54  
 Corr: \$1019.00

Please log the following items each time you use the credit card and submit receipts with this form each month:

BE SURE TO SPECIFY TO THE VENDOR THAT WE ARE TAX EXEMPT.

Department: OGLE COUNTYS SHERIFF'S OFFICE

Credit Card  
 Company Name: Card Service Center  
 Name on Card: Brian VanVickle Ogle County Sheriff  
 Card Account #: XXXX-XXXX-XXXX-0014  
 Billing Month: October 29 to November 27, 2015

DATE	COMPANY	ITEM(S) CHARGED and Purpose of Expense(s) <small>(if meals purchased, list purpose of meeting, location, and those attending who were provided meals)</small>	TYPE OF ORDER: I - Internet P - Phone S - Store	Budget Category or Line # (Dept. Head)	TOTAL AMOUNT	INITIALS
10/8/15	Strobes nmore	Squad Equipment (Tow Fund)	I	634.12	513.33	
10/12	Sirchie	Blood / Urine Kits (DUI FUND)	I	625.12	154.91	
10/14	Srobes nmore	Squad Equipment (TOW FUND)	I	634.12	272.61	
10/16	Sirchie	Blood / Urine Kits (DUI FUND)	I	625.12	154.91	
10/19	ITOAORG	Training for Deputy's	I	12.4420	590.00	
10/24	Rice Signs	Cautions signs	I	625.12	979.39	
10/24	Hilton	Detective Training and Parking	I	12.4420	1137.85	
10/28	Sirchie	Blood / Urine Kits (DUI FUND)	I	625.12	47.12	
10/30	Napa	Supplies for vehicle	I	12.4510	17.11	
10/30	Brownells Inc	Ammunition	I	843.35	12.4575	
11/5	Magills	Repair parts for Deputy's weapons	I	248.82	12.4574	
				<b>Total:</b>	<b>\$</b>	

Department Head's Signature

Date:







# OGLE COUNTY SHERIFF'S OFFICE

Administration Phone:(815)732-6666

Administration Fax:(815)732-7185

Corrections Phone:(815)732-2135

Corrections Fax:(815)732-7112

Communications Phone:(815)732-2136

Communications Fax:(815)732-7115

Brian E. VanVickle, Sheriff  
Danny S. White, Chief Deputy

## OGLE COUNTY JAIL December 2015

### DETAINEES BOOKED THROUGH THE JAIL:

	<u>MALE</u>	<u>FEMALE</u>	<u>TOTAL</u>
ADULT:	133	52	185
JUVENILE:	2	0	2

NUMBER OF SENTENCING ORDERS SERVED: 6

### TOTAL DAYS HELD:

SENTENCED: 123

UNSENTENCED: 3137

TOTAL: 3260

AVERAGE NUMBER OF DETAINEES PER DAY: 75.71

PERCENTAGE OF DETAINEES BOARDED FOR OTHER AGENCIES: 22.81

NUMBER OF PRISONERS TRANSPORTED: 68

NUMBER OF TRANSPORTS: 30

TOTAL MILES DRIVEN ON TRANSPORTS: 3192 Air miles: 0

ON SITE NURSING VISITS: 105 DOCTOR VISITS: 25

MEALS SERVED: 7844 AVERAGE COST PER MEAL: \$1.68

Prepared January 6th, 2016 by Lt. G. Clark, Supt. of Corrections

**Ogle County Sheriff's Office**  
**Patrol Division Activity Report**

**December 2015**

**Arrests**

<b>Traffic Arrests</b>	<u>309</u>
<b>DUI Arrests</b>	<u>7</u>
<b>Misdemeanor Arrests</b>	<u>80</u>
<b>Felony Arrests</b>	<u>6</u>
<b>Warrant Arrests</b>	<u>10</u>
<b>Total Arrests</b>	<u>412</u>

**Accidents**

<b>Property Damage Accidents</b>	<u>49</u>
<b>Personal Injury Accidents</b>	<u>3</u>
<b>Fatality Accidents</b>	<u>1</u>
<b>Total Accidents</b>	<u>53</u>

**Calls/Mileage/Fuel**

<b>Cases Solved by Follow Up</b>	<u>13</u>
<b>Civil Process Served</b>	<u>121</u>
<b>Calls For Service</b>	<u>794</u>
<b>Total Miles Patrolled</b>	<u>34504</u>
<b>Total Fuel Consumed</b>	<u>2811</u>
<b>Fleet MPG</b>	<u>12.27</u>

Ogle County Sheriff's Office

Monthly Crash Totals – Front Desk

December 2015

Total Accidents – No Injury	<u>49</u>
Total Accidents – With Injury	<u>3</u>
Total Accidents – With Fatality	<u>1</u>
Total Crash Reports	<u>53</u>
Total Desk Reports	<u>11</u>
Total Deer Reports	<u>16</u>
Total Persons Injured	<u>3</u>
Total Persons Killed	<u>1</u>

OGLE COUNTY SHERIFFS DEPT.  
PATROL ACTIVITY

	<u>NOV '15</u>	<u>+/-</u>	<u>DEC '15</u>
Traffic Arrests	<u>250</u>	<u>+59</u>	<u>309</u>
DUI arrests	<u>9</u>	<u>-2</u>	<u>7</u>
Misdemeanor arrests	<u>65</u>	<u>+15</u>	<u>80</u>
Felony arrests	<u>5</u>	<u>+1</u>	<u>6</u>
Warrant arrests	<u>11</u>	<u>-1</u>	<u>10</u>
<b>TOTAL ARRESTS</b>	<u>340</u>	<u>+72</u>	<u>412</u>
Property damage accidents	<u>78</u>	<u>-29</u>	<u>49</u>
Personal injury accidents	<u>10</u>	<u>-7</u>	<u>3</u>
Fatality accidents	<u>1</u>	<u>-</u>	<u>1</u>
<b>TOTAL ACCIDENTS</b>	<u>89</u>	<u>-36</u>	<u>53</u>
Cases solved by F/U	<u>27</u>	<u>-14</u>	<u>13</u>
Civil process served	<u>90</u>	<u>+31</u>	<u>121</u>
Calls for service	<u>789</u>	<u>+5</u>	<u>794</u>
Total miles patrolled	<u>31754</u>	<u>+2750</u>	<u>34504</u>
Total fuel consumed	<u>2612</u>	<u>+194</u>	<u>2811</u>
Fleet M.P.G.	<u>12.15</u>	<u>+0.12</u>	<u>12.27</u>

Ogle County Sheriff  
Patrol Division

December	D-20	D-21	D-22	D-23	D-24	D-25	D-26	D-27	D-28	D-29	D-30	D-31	D-32	D-33	Sup	Total
Calls for Service	46	70	25	25	53	60	27	34	24	36	54	21	35	33	251	794
Total Door Checks	0	0	0	0	292	0	44	0	0	130	505	0	0	171	386	1528
Traffic Stops	44	22	36	14	27	29	87	22	24	53	29	42	23	58	56	566
Total Traffic Arrests	39	5	13	2	19	11	24	15	20	33	11	40	13	43	21	309
Written Warnings	0	15	21	0	16	21	75	0	0	1	21	29	7	3	7	216
DUI Arrests	0	0	0	0	0	0	1	0	0	1	1	3	0	1	0	7
Misdemeanor Arrest	7	0	2	0	6	2	7	5	11	7	1	15	4	13	0	80
Felony Arrests	1	0	0	0	0	0	0	0	1	0	0	3	1	0	0	6
Accident Reports	2	6	2	4	2	3	0	6	2	2	3	3	4	3	5	47
Civil Papers Served	7	14	1	9	31	12	0	8	10	2	2	0	7	13	5	121
Warrant Arrests	1	0	1	0	2	0	1	0	0	2	0	0	2	1	0	10
Follow-ups Cleared	0	2	0	0	1	0	0	1	1	1	0	0	0	2	5	13
Total Miles	2495	2094	2092	1306	1436	2479	2770	1721	2120	1452	1728	1647	2074	2489	6601	34504
Average per Shift	106	139	160	100	119	165	213	156	141	96	132	126	159	155		n/a
Total Fuel Used	181	182	155	131	111	179	161	147	171	150	151	139	180	224	549	2811
Fleet MPG																12.2746
MPG	11.4	11.5	13.5	9.9	12.5	13.8	13.1	12	12.3	9.6	11.4	11.8	11.5	11.11		

Ogle County Sheriff  
Patrol Division

December	A-7	S-10	S-11	S-12	A-3	A-5	A-6	Total
Calls for Service	105	30	15	68	X	33	X	251
Total Door Checks	50	51	0	285	X	0	X	386
Traffic Stops	4	16	24	8	X	4	X	56
Total Traffic Arrests	0	5	13	3	X	0	X	21
Written Warnings	1	0	0	6	X	0	X	7
DUI Arrests	0	0	0	0	X	0	X	0
Misdemeanor Arrest	0	0	0	0	X	0	X	0
Felony Arrests	0	0	0	0	X	0	X	0
Accident Reports	0	2	0	0	X	3	X	5
Civil Papers Served	0	0	2	0	X	3	X	5
Warrant Arrests	0	0	0	0	X	0	X	0
Follow-ups Cleared	1	0	0	0	X	4	X	5
Total Miles	1616	1476	1557	1952	X	X	X	6601
Average per Shift	124	105	103	130	X	X	X	n/a
Total Fuel Used	129	131	142	147	X	X	X	549
Fleet MPG								12.0237
MPG	12.5	11.3	10.9	13.3	X	X	X	

# Ogle County Sheriff's Office

## Patrol Division Activity Report

### Year Totals 2015

#### Arrests

Traffic Arrests	<u>3123</u>
DUI Arrests	<u>95</u>
Misdemeanor Arrests	<u>824</u>
Felony Arrests	<u>63</u>
Warrant Arrests	<u>254</u>
<b>Total Arrests</b>	<b><u>4395</u></b>

#### Accidents

Property Damage Accidents	<u>493</u>
Personal Injury Accidents	<u>115</u>
Fatality Accidents	<u>10</u>
<b>Total Accidents</b>	<b><u>618</u></b>

#### Calls/Mileage/Fuel

Cases Solved by Follow Up	<u>184</u>
Civil Process Served	<u>1316</u>
Calls For Service	<u>8346</u>
Total Miles Patrolled	<u>362886</u>
Total Fuel Consumed	<u>30083</u>
Fleet MPG	<u>12.06</u>

# Ogle County Sheriff's Office

## Monthly Crash Totals – Front Desk

### Year Totals 2015

<b>Total Accidents – No Injury</b>	<b><u>493</u></b>
<b>Total Accidents – With Injury</b>	<b><u>115</u></b>
<b>Total Accidents – With Fatality</b>	<b><u>10</u></b>
<b>Total Crash Reports</b>	<b><u>618</u></b>
<b>Total Desk Reports</b>	<b><u>47</u></b>
<b>Total Deer Reports</b>	<b><u>136</u></b>
<b>Total Persons Injured</b>	<b><u>141</u></b>
<b>Total Persons Killed</b>	<b><u>11</u></b>





**RESOLUTION 2015-**

**RESOLUTION TO RENAME SHERIFF'S PETTY CASH FUND TO  
DOCUMENTATION FUND AND TO DEPOSIT THE SHERIFF COPY FEE  
MONEY INTO THE DOCUMENTATION FUND**

**WHEREAS**, within the Sheriff's Fund Accounts there exists a Sheriff's Petty Cash Fund - 620, wherein copy fee money from the Sheriff has been deposited;

**WHEREAS**, that the name of the Fund should to be modified to reflect the appropriate nature of the Fund to Documentation Fund;

**WHEREAS**, that all copy fee money from the Sheriff shall be deposited into the Documentation Fund and used for documentation costs;

**NOW THEREFORE, BE IT RESOLVED**, that the Ogle County Board authorizes the renaming of the Sheriff's Petty Cash Fund - 620 to Documentation Fund - 620 and can be used by the Sheriff to pay documentation costs.

Presented and Approved at the Ogle County Board Meeting on \_\_\_\_\_.

Attest:

\_\_\_\_\_  
Rebecca Huntley, County Clerk

\_\_\_\_\_  
Kim P. Gouker, Chairman

**EXECUTIVE COMMITTEE MEETING**  
**Tentative Minutes**  
**January 12, 2016**

1. Call to order: Chairman Gouker calls the meeting to order at 6:00 p.m. Committee members present: Sparrow, O'Brien, Nordman, Welty, Griffin and Finrock. Others present: Typer, Simms and IT Coordinator Larry Callant.
2. Approval of Minutes: Motion by Sparrow to approve the December 8, 2015 minutes, 2<sup>nd</sup> by Nordman. Motion carries.
3. Public Comment: none
4. Committee Reports:
  - ◆ Road & Bridge: bids from Curtis Cook
  - ◆ Judiciary and Circuit Clerk: no action
  - ◆ Assessment, Planning & Zoning: 1 special use permit
  - ◆ State's Attorney, Juvenile & Probation: no action
  - ◆ County Security – Sheriff, Coroner & Safety: no action
  - ◆ County Infrastructure: no action
  - ◆ HEW, Solid Waste & Veterans: 1 appointment to the Board of Health
  - ◆ Long Range & Strategic Planning: Bills totaling \$77,856.03 and 1 change order
  - ◆ Finance & Insurance: 1 ordinance, 2 resolutions
  - ◆ Personnel & Salary: no action
  - ◆ Agriculture: no action
  - ◆ Workplace Safety: no action
  - ◆ Requests for Board Presentations: OEMA – Tom Richter; Curtis Cook, Highway Department Annual Report
  - ◆ Other: none
5. Old Business:
  - ◆ Rochelle EOC property: Gouker reports they are still exploring uses for the building and looking for floor plans.
  - ◆ FAIRCOM organization – Exelon EAV discussions: tabled
  - ◆ Ogle County Safety Manual: none
  - ◆ Other: none
6. New Business:
  - ◆ 2016 Annual Meeting Calendar: Motion by Griffin to recommend to the full Board, 2<sup>nd</sup> by Finrock. Motion carries.
  - ◆ County Board Flex Plan program: none
  - ◆ Multi-county Economic Development alliance: Gouker explains he has been to some meetings over the past few months with the chairmen from 7 surrounding counties. They are trying to put some clout together for the purpose of attracting federal and state grants and legislative advocacy. They continue to talk about forming an alliance

and he wanted this committee to be aware of it. There is a resolution in the works that Gouker will bring to this committee when it is ready.

- ◆ Exelon donation for Weld Park Eagle Scout memorial: Exelon has donated \$5,000 to the Eagle Scout playground project at Weld Park. They need to give it to the County as owner of the property.
- ◆ Other: Gouker reports OCCCA has contacted him and would like to have a reception or open house for the County Board.

7. Closed Session – Review and possible approval of closed session minutes (5 ILCS 120/2 (c)(21) and pending, probable or imminent litigation (5 ILCS 120/2 (c)(11): none
8. Committee comments or suggestions: none
9. Department Head comments: none
10. Public comment: none
11. With no further business, Chairman Gouker adjourns the meeting at 6:42 p.m.

Respectfully submitted,  
Courtney Warren

**RESOLUTION 2016-01XX**  
**Annual Public Notice of Regular Meetings**

WHEREAS, the government of the County of Ogle, State of Illinois, has a responsibility of certain and specific duties for the good of the public welfare of its citizens, and such responsibility being vested with the County Board of the County of Ogle, to conduct its business in full public awareness, and

WHEREAS, the Open Meetings Act, has been enacted by the General Assembly of the State of Illinois, in order to ensure that the public has a right to be informed as to the official conduct of all Illinois public bodies, and

WHEREAS, Section 2.02 of the Illinois Compiled Statutes, Chapter 5 and Subhead 120 (5 ILCS 120/2.02) mandates that all public bodies, such as the Ogle County Board, and all of its committees, “shall give public notice of the schedule of regular meetings at the beginning of each calendar or fiscal year and shall state the regular dates, times, and places of such meetings”

THEREFORE BE IT RESOLVED, by the County Board of Ogle County, State of Illinois on this 19<sup>th</sup> day of January, 2016, that it adopts a Regular Meeting Schedule for the Calendar Year 2016 for the County Board and its ten regular Committees, as per the dates, times and locations as shown on the attached Appendix A.

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Kim P. Gouker  
Chairman, Ogle County Board

Attest:

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Rebecca Huntley  
Ogle County Clerk

# APPENDIX A of Resolution 2016-01XX Annual Public Notice of Regular Meetings

## MEETING DATES:

Generally, the Ogle County Board meets at 5:30 pm on the third Tuesday of each month, and the Committees meet on the second Tuesday of each month, unless such date falls on a holiday or election day, with the following specific dates established by this resolution, and adjusted for any holidays or election days.

	COMMITTEES	COUNTY BOARD
January	Tuesday, January 12, 2016	Tuesday, January 19, 2016
February	Tuesday, February 9, 2016	Tuesday, February 16, 2016
March	Tuesday, March 8, 2016	Wednesday, March 16, 2016
April	Tuesday, April 12, 2016	Tuesday, April 19, 2016
May	Tuesday, May 10, 2016	Tuesday, May 17, 2016
June	Tuesday, June 14, 2016	Tuesday, June 21, 2016
July	Tuesday, July 12, 2016	Tuesday, July 19, 2016
August	Tuesday, August 9, 2016	Tuesday, August 16, 2016
September	Tuesday, September 13, 2016	Tuesday September 20, 2016
October	Tuesday, October 11, 2016	Tuesday, October 18, 2016
		<b>Public Budget Hearing:</b>
		Monday, October 24, 2016
November	Wednesday, November 9, 2016	Tuesday, November 15, 2016
December	Tuesday, December 13, 2016	Tuesday, December 20, 2016

## MEETING TIMES:

### Committees

Road, Bridge & Mapping	7:30am	County Infrastructure	2:00pm
Judiciary & Circuit Clerk	9:00am	HEW, Solid Waste & Veterans	3:00pm
Assessment, Planning & Zoning	10:00am	Long Range & Strategic Planning	4:00pm
State's Attorney, Juvenile/Probation	11:00am	Finance & Insurance	5:00pm
County Security	1:00pm	Executive	6:00pm

**County Board** 5:30pm

## MEETING LOCATIONS:

All meetings will be held at the Ogle County Old Courthouse Building, at 105 S. Fifth Street, located at the intersection of Illinois Routes 2 and 64, in Oregon, Illinois.

Committees	Room 100 or Room 317
County Board	Room 317

Special meetings of the Ogle County Board, or its Committees, may be scheduled at a time and location specified, with at least a 48-hour public notice, as per 5 ILCS 120/2.02.

**FINANCE, REVENUE & INSURANCE COMMITTEE MEETING**  
**Tentative Minutes**  
**January 12, 2016**

1. Call to order: Chairman Sparrow calls the meeting to order at 5:02 p.m. Committee Members Present: Oltmanns, Hopkins, Welty, Nordman, Gronewold, O'Brien, Typer and Gouker. Others present: Finfrock, Simms, Griffin, County Clerk & Recorder Rebecca Huntley (leaves at 5:05 p.m.), County Treasurer John Coffman, IT Coordinator Larry Callant, Solid Waste Director Steve Rypkema, Director of Court Services Ken Burn, Greg Query of Query Insurance and Wayne Reising.
2. Approval of Minutes – December 8, 2015: Motion by Gronewold, 2<sup>nd</sup> by Gouker. Motion carries.
3. Public Comment: none
4. Approval of Bills:
  - ◆ County Clerk bills: \$9,277.48- Motion by O'Brien, 2<sup>nd</sup> by Nordman. Motion carries.
  - ◆ Treasurer bills: \$3,402.69- Motion by Hopkins, 2<sup>nd</sup> by Nordman. Motion carries.
  - ◆ Finance bills: \$29,916.54 - Motion by Oltmanns, 2<sup>nd</sup> by Gouker. Motion carries.
  - ◆ Department Claims for Finance: none
5. Insurance:
  - ◆ Health Insurance – Aggregate Report & Update: County Treasurer John Coffman briefly reviews the report.
  - ◆ Property Casualty – CIRMA Update: Sparrow reports they picked up a new county and the next meeting is Thursday.
  - ◆ Insurance Program Review & Discussion: none
  - ◆ Flex Spending – Plan Amendment: Sparrow is looking into whether or not this will be available to County Board members.
  - ◆ Open Enrollment Period – Health Insurance Plan: Coffman suggests having an Open Enrollment Period rather than having it open all the time as it is currently. Sparrow will take this to the Healthcare Planning Committee to see what they think.
6. County Clerk, Treasurer & Finance Report: none
7. Budget Review: Sparrow goes through the budget performance report.
8. Old Business:
  - ◆ Hiring Freeze: The Personnel Committee is still discussing this issue. Sparrow is in the process of meeting with Department Heads to see whether these cuts can be made. He will have more to report next month.
  - ◆ Sheriff's Copy Fees: After some discussion the committee decides no action is necessary.
9. New Business:

- ◆ Ordinance – Indemnity Fund: Motion by Oltmanns to approve, 2<sup>nd</sup> by Welty. Motion carries.
- ◆ Resolution – Fund Transfers: Motion by Typer to approve, 2<sup>nd</sup> by O’Brien. Motion carries.
- ◆ Budget Amendment – Revolving Vehicle Fund: Sparrow reports Probation is interested in borrowing from this fund for 2 vehicles which would be an extra \$40,000.00 in the appropriation. Motion by Oltmanns to approve, 2<sup>nd</sup> by Nordman. Motion carries.

10. Other Business: none

11. Closed Session for Probable/Pending Litigation per 5 ILCS 120/2 (c)(11): none

12. Adjournment: Motion by Nordman to adjourn the meeting, 2<sup>nd</sup> by O’Brien. Motion carries.  
Time: 5:35 p.m.

Respectfully submitted,  
Courtney Warren

ORDINANCE  
INDEMNITY FUND

WHEREAS, the County has established a Tax Sale Indemnity fund under 35 ILCS 200/21-295, and

WHEREAS, 35 ILCS 200/21-300 allows monies received under 35 ILCS 200/21-295 to be deposited in the general fund for general county government purposes, if the County Board provides by ordinance that the indemnity required by Section 21-295 be provided by the Tort Liability Fund, and

WHEREAS, the County has sufficient funds available in the Tort Liability Fund (Insurance Premium Levy Fund) to provide indemnity to the County for any exposure created as a result of tax sales.

THEREFORE, BE IT ORDAINED, by the County Board of Ogle County, State of Illinois, that the indemnity required by 35 ILCS 200/21-295 be provided by the Tort Liability Fund (Insurance Premium Levy Fund), and

BE IT FURTHER ORDAINED, that the balance of the Tax Sale Indemnity Fund be transferred to the General Fund, and

BE IT FURTHER ORDAINED, that all future fees collected under 35 ILCS 200/21-295 be deposited into the General Fund.

APPROVED AND ADOPTED by the Ogle County Board, State of Illinois, this 19<sup>th</sup> day of January, 2016.

\_\_\_\_\_  
Kim Gouker  
Ogle County Board Chairman

ATTEST:

\_\_\_\_\_  
Rebecca Huntley  
Ogle County Clerk

# *RESOLUTION*

*WHEREAS*, it is necessary to transfer funds from certain accounts to other accounts in order to conduct the County business in an orderly fashion,

*WHEREAS*, the County Board reviewed its finances while preparing their 2016 budget, and at that time identified certain funds that could be transferred to the General Fund for the general operation of the County.

*THEREFORE, BE IT RESOLVED*, that the entire balance of the IFiber, Sheriff's Petty Cash, and Bad Check Restitution funds be transferred to County General for operation of the County, and

*BE IT FURTHER RESOLVED*, that the sum of \$120,000.00 be transferred from the Self Insurance Reserve Fund to the County General Fund for the operation of the County.

APPROVED this 19th day of January, 2016  
*OGLE COUNTY FINANCE COMMITTEE*

\_\_\_\_\_  
Greg Sparrow, Chairman

\_\_\_\_\_  
Zachary Oltmanns

\_\_\_\_\_  
Kim Gouker

\_\_\_\_\_  
Patricia Nordman

\_\_\_\_\_  
Rich Gronewold

\_\_\_\_\_  
Martin Typer

\_\_\_\_\_  
Lyle Hopkins

\_\_\_\_\_  
Bill Welty

\_\_\_\_\_  
John O'Brien

AGGREGATE LOSS FUND SUMMARY  
 Incurred: 08-01-14 to 12-31-15  
 Paid: 08-01-15 to 12-31-15  
 ALL CONTRACTS

Page: 2  
 Prepared: 11 Jan 2016  
 14:38:22

GROUP: OGLE OGLE COUNTY  
 DIVISION: \* \* \* S U M M A R Y \* \* \*  
 CARRIER: 307 STANDARD SECURITY (THRU IHC)  
 POLICY NUMBER: 24/12  
 POLICY PERIOD: 08-01-15 to 07-31-16  
 MINIMUM ATTACHMENT: 2,429,848.00  
 CLAIM TYPES: MED

COVERAGES	NUMBER OF EMPLOYEES	FACTOR	TOTAL	CLAIM TYPE	PAID	YTD
MED 10 EMPLOYEE ONLY	87	635.3600	55,276.32	Medical	102,661.07	102,661.07
MED 20 EMPLOYEE & SPOUSE	23	1,550.3900	35,658.97	Dental	6,332.32	6,332.32
MED 40 EMPLOYEE & FAMILY	52	1,550.3900	80,620.28	Drugs	36,468.34	36,468.34
MED 30 EMP & CHLD(REN)	16	1,550.3900	24,806.24		145,461.73	145,461.73
AUGUST TOTALS	178		196,361.81	AUGUST TOTALS		
MED 10 EMPLOYEE ONLY	87	635.3600	55,276.32	Medical	62,992.67	165,653.74
MED 20 EMPLOYEE & SPOUSE	23	1,550.3900	35,658.97	Dental	10,124.24	16,456.56
MED 40 EMPLOYEE & FAMILY	49	1,550.3900	75,969.11	Drugs	65,872.13	102,340.47
MED 30 EMP & CHLD(REN)	15	1,550.3900	23,255.85		138,989.04	284,450.77
SEPTEMBER TOTALS	174		190,160.25	SEPTEMBER TOTALS		
MED 10 EMPLOYEE ONLY	87	635.3600	55,276.32	Medical	291,736.55	457,390.29
MED 20 EMPLOYEE & SPOUSE	23	1,550.3900	35,658.97	Dental	16,441.46	32,898.02
MED 40 EMPLOYEE & FAMILY	49	1,550.3900	75,969.11	Drugs	34,711.47	137,051.94
MED 30 EMP & CHLD(REN)	15	1,550.3900	23,255.85		342,889.48	627,340.25
OCTOBER TOTALS	174		190,160.25	OCTOBER TOTALS		
MED 10 EMPLOYEE ONLY	86	635.3600	54,640.96	Medical	134,809.09	592,199.38
MED 20 EMPLOYEE & SPOUSE	24	1,550.3900	37,209.36	Dental	8,408.24	41,306.26
MED 40 EMPLOYEE & FAMILY	49	1,550.3900	75,969.11	Drugs	13,034.42	150,086.36
MED 30 EMP & CHLD(REN)	15	1,550.3900	23,255.85		156,251.75	783,592.00
NOVEMBER TOTALS	174		191,075.28	NOVEMBER TOTALS		
MED 10 EMPLOYEE ONLY	88	635.3600	55,911.68	Medical	191,214.54	783,413.92
MED 20 EMPLOYEE & SPOUSE	23	1,550.3900	35,658.97	Dental	8,972.17	50,278.43
MED 40 EMPLOYEE & FAMILY	50	1,550.3900	77,519.50	Drugs	57,929.16	208,015.52
MED 30 EMP & CHLD(REN)	15	1,550.3900	23,255.85		258,115.87	1,041,707.87
DECEMBER TOTALS	176		192,346.00	DECEMBER TOTALS		

AGGREGATE LOSS FUND SUMMARY  
 Incurred: 08-01-14 to 12-31-15  
 Paid: 08-01-15 to 12-31-15  
 ALL CONTRACTS

GROUP: OGLE OGLE COUNTY  
 DIVISION: \* \* \* S U M M A R Y \* \* \*  
 CARRIER: 307 STANDARD SECURITY (THRU IHC)  
 POLICY NUMBER: 24/12  
 POLICY PERIOD: 08-01-15 to 07-31-16  
 MINIMUM ATTACHMENT: 2,429,848.00  
 CLAIM TYPES: MED

MONTHLY AGGREGATE	CLAIMS			CLAIMS OTHER AGGREGATE	SPECIFIC AMOUNT	NET CLAIMS SUBJECT TO AGGREGATE		YTD AGGREGATE	YTD CLAIMS SUBJECT TO AGGREGATE		YTD SUMMARY	LOSS RATIO
	INSIDE OF AGGREGATE	OUTSIDE OF AGGREGATE	AGGREGATE			AGGREGATE	AGGREGATE		AGGREGATE			
Aug	196361.81	101420.60	0.00	0.00	0.00	101420.60	196361.81	101420.60	94941.21	0.52		
Sep	190160.25	62992.67	0.00	0.00	0.00	62992.67	386522.06	164413.27	222108.79	0.43		
Oct	190160.25	291736.55	0.00	0.00	0.00	291736.55	576682.31	456149.82	120532.49	0.79		
Nov	191075.28	134809.09	0.00	0.00	0.00	134809.09	767757.59	590958.91	176798.68	0.77		
Dec	192346.00	191214.54	13602.60	0.00	10765.90	166846.04	960103.59	757804.95	202298.64	0.79		
	960103.59	782173.45	13602.60	0.00	10765.90	757804.95						

**H.E.W. & SOLID WASTE & VETERANS COMMITTEE MEETING**  
**Tentative Minutes**  
**January 12, 2016**

1. Call to order: Chairwoman Bowers calls the meeting to order at 3:00 p.m. Committee Members present: Colbert, McKinney, Finfrock, Griffin and Kenney. Others present: Typer, Gronewold, Nordman, Simms, Janes, Solid Waste Director Steve Rypkema Animal Control Administrator Tom Champley (enters at 3:28 p.m), Superintendent of Schools Bob Sondgeroth and Health Department Director Cindy Bauling (leaves at 3:16 p.m.). Absent: Bolin.
2. Approval of Minutes: Motion by Kenney to approve the December 8, 2015 minutes, 2<sup>nd</sup> by Colbert. Motion carries.
3. Public Comment: none
4. Regional Office of Education:
  - ◆ Bills for Approval: bills totaling \$5,573.04 – Motion by Colbert to approve, 2<sup>nd</sup> by Griffin. Motion carries.
  - ◆ Department Update:
    - Superintendent of Schools Bob Sondgeroth reports Jennifer Moreno travels to Ogle County on Tuesdays to the office on the 3<sup>rd</sup> floor of this building. She does fingerprinting by appointment only and it is working well.
    - The parking lot is finished and will be striped in the Spring.
    - Briefly explains the High School Equivalency program.
    - Reports they are getting their money from the State.
5. Health Department:
  - ◆ Health Department Director Cindy Bauling reviews the financial report.
  - ◆ It is day 195 without a State budget and \$221,000.00 is frozen. Bauling states they are certainly feeling the impact. They have had to furlough the leaders, there has been a resignation and the position will be held for now. There have been some layoffs that turned into retirements. They will need to request the \$85,000 from the County in February.
  - ◆ They will be working on the employee health screenings with the Healthcare Planning Committee in the next couple of weeks.
6. Solid Waste Department:
  - ◆ Bills for Approval: bills total \$8,033.20 – Motion by Finfrock to approve, 2<sup>nd</sup> by Griffin. Motion carries.
  - ◆ Grant Applications: Motion by Griffin to approve the Waste Reduction Recycling grant application for a water bottle refilling station at White Pines Ranch in an amount not to exceed \$1,432.00, 2<sup>nd</sup> by Kenney. Solid Waste Director Steve Rypkema found a cheaper model than they submitted so he will work with them to reduce the price. Motion carries.
  - ◆ Rypkema goes through the budget performance report.

- ◆ He hands out a schedule for the Electronics Recycling events for the year.
- ◆ The Christmas Tree Recycling pick up was this past Saturday. They can still be recycled at the drop off sites until January 18.

7. Animal Control:

- ◆ Bills for Approval:
  - Animal Control Fund – Bills totaling \$2,659.96: Motion for approval by Kenney, 2<sup>nd</sup> by Griffin. Motion carries.
  - Pet Population Fund – Bills totaling \$2,229.00: Motion for approval by McKinney, 2<sup>nd</sup> by Colbert. Motion carries.
- ◆ Department Update:
  - Animal Control Administrator Tom Champley passes out the new law regarding Animal Cruelty.
  - Champley explains they are looking for some very part time help to cover the noon hour in the office.

8. Closed Session:

- ◆ Interview for appointment per 5 ILCS 120/2 (c)(3) – Board of Health - Dawood Harunani: none
- ◆ Motion by Finfrock to go into Closed Session for applicant interviews per 5 ILCS 120/2 (c)(3), 2<sup>nd</sup> by Griffin. Roll call vote: Kenney – yes, Colbert – yes, McKinney – yes, Finfrock – yes, Griffin – yes and Bowers – yes. Motion carries. Enter Closed Session at 3:36 p.m. Return to Open Session at 3:45 p.m.
- ◆ Motion by Colbert to recommend to the full board Dawood Harunani be appointed to the Board of Health, 2<sup>nd</sup> by Griffin. Motion carries.

9. New Business: none

10. Old Business: none

11. Adjournment: With no further business, Chairwoman Bowers adjourns the meeting at 3:46 p.m.

Respectfully submitted,  
Courtney Warren

Sec. 3.01. Cruel treatment.

No person or owner may beat, cruelly treat, torment, starve, overwork or otherwise abuse any animal.

No owner may abandon any animal where it may become a public charge or may suffer injury, hunger or exposure.

No owner of a dog or cat that is a companion animal may expose the dog or cat in a manner that places the dog or cat in a life-threatening situation for a prolonged period of time in extreme heat or cold conditions that results in injury to or death of the animal.

(c) A person convicted of violating this Section is guilty of a Class A misdemeanor. A second or subsequent conviction for a violation of this Section is a Class 4 felony. In addition to any other penalty provided by law, a person who is convicted of violating subsection (a) upon a companion animal in the presence of a child, as defined in Section 12-0.1 of the Criminal Code of 2012, shall be subject to a fine of \$250 and ordered to perform community service for not less than 100 hours. In addition to any other penalty provided by law, upon conviction for violating this Section, the court may order the convicted person to undergo a psychological or psychiatric evaluation and to undergo any treatment at the convicted person's expense that the court determines to be appropriate after due consideration of the evidence. If the convicted person is a juvenile or a companion animal hoarder, the court must order the convicted person to undergo a psychological or psychiatric evaluation and to undergo treatment that the court determines to be appropriate after due consideration of the evaluation.

(Source: P.A. 99-357, eff. 1-1-16.)

As of January 1, 2012, the State of Illinois banned many electronics from landfills so that these valuable materials may be recycled.

The Ogle County Solid Waste Management Department (OCSWMD) is working with Dynamic Recycling to provide convenient electronics recycling for our residents. Therefore, as part of a this program, a drop-off site at our location will be available to Ogle County residents.

Dynamic Recycling is recognized by the Illinois EPA as an authorized collector, recycler, and re-furbisher of electronic waste (E-waste) in Illinois and is R2 and ISO 14001 certified.



OCSWMD will be hosting two Saturday events at our location on:

**April 16th and October 15th**  
**from 8:00 am—12:00 noon.**

Visit: [www.oglecounty.org](http://www.oglecounty.org) for other options.

## Items Accepted

Adding machines

Answering machines

Cameras

Camcorders

CD players

CD ROM drives

Calculators

Cellphones

Compact fluorescent bulbs (CFL's)

Computer cables

Computers desktops

Computers laptops

Computer monitors

Copy machines

Digital clocks

Disk players

DVD players

Electric typewriters

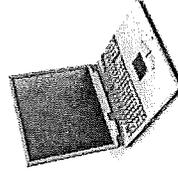
Electronic Mice

Fax machines (stand alone)

Floppy disk drives

Ink cartridges

Joysticks



## Items Accepted

Keyboards

Microwave ovens (\$5 fee)

Modems

MP3 players

Pagers

PDAs

Printers

Projectors

Radios

Rechargeable batteries

Remote controls

Scanners

Servers

Shredders

Stereo equipment

Tape drives

Telephones

Televisions

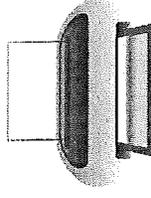
Toner cartridges

Video cassette Recorders

Video cassette players

Video game consoles

Zip Drives



**Please only bring items on this list!**

## Drop-off Instructions

- ◆ Only Ogle County residentially generated electronic items are accepted. (No business electronics taken. Businesses may contact OCSWMD at 815-732-4020 for other options.)
- ◆ **Dates:** Electronics recycling will be open on the **last Friday of the month**, unless there is a holiday: January 29th, February 26th, March 18th (week early, holiday), April 29th, May 27th, June 24th, July 29th, August 26th, September 30th, October 28th, November 18th (week early, holiday), December 30, 2016.
- ◆ **Hours:** 9:00 am – 4:00 pm on designated days.
- ◆ **Saturdays:** April 16th & October 15th  
Hours: 8:00 am—12:00 noon
- ◆ **\$5 fee per microwave oven.** Check payable to Ogle County Solid Waste Management Dept.
- ◆ Larger volumes of dismantled or de-manufactured listed items will not be accepted, per OCSWMD discretion.
- ◆ Remove any personal information on hard drives to protect your privacy.
- ◆ **DO NOT LEAVE ITEMS OUTSIDE OF THE BUILDING.**

*Thank you!*

Protect your personal data when recycling a computer or memory device

Computers often contain highly personal information. Before donating or recycling your computer or memory device, clean the hard drive. Go to our website for instructions, [www.oglecounty.org](http://www.oglecounty.org).

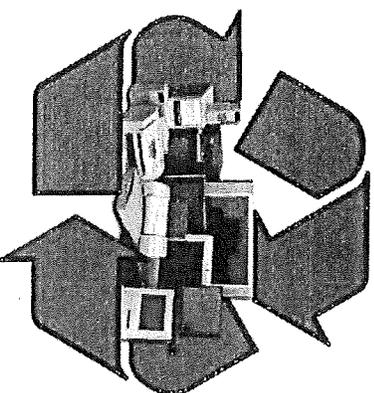
It is the duty of the user of the recycling program to ensure data erasure. The Ogle County Solid Waste Management Department and Dynamic Recycling have procedures in place for the protection of data remaining in electronic devices recycled through this program.

### 24 Hour Surveillance

**Violators who illegally dump electronics (or other items) will be prosecuted to the fullest extent of the law.**

## Ogle County Residential

### Electronics Recycling



#### *Drop-off Location:*

County Annex Building  
Ogle County Solid Waste  
Management Department  
Attached garage  
909 West Pines Road, Oregon, IL  
Ph: 815-732-4020  
[www.oglecounty.org](http://www.oglecounty.org)

**One Friday each month:  
9:00 am—4:00 pm  
Two Saturdays:  
8:00 am—12:00 noon  
See dates in brochure.**



# Illinois Public Health Association

223 South Third Street, Springfield, IL 62701-1144

Phone: 217-522-5687 FAX: 217-522-5689 E-mail: [ipha@ipha.com](mailto:ipha@ipha.com) Web Site: [www.ipha.com](http://www.ipha.com)

## Capacity of Local Health Departments at the Breaking Point

**More than 5.5 million people – two of every five Illinoisans – are served by local health departments that are struggling to serve their communities due to the budget impasse.**

Illinoisans are served by 97 local health departments. These agencies lead their communities in improving health through prevention. They also inspect restaurants, regulate private water and sewage disposal systems; investigate disease outbreaks; immunize children and adults; help pregnant women, infants and young children access health and human services; prevent child abuse and teen pregnancy; find children affected by lead poisoning; help people quit smoking, lose weight, exercise, and manage chronic diseases like diabetes; and identify women with breast cancer and people with HIV.

**Nearly half of local health departments report decreased capacity caused by the budget impasse, including lay-offs, cuts to the length of the work week, reduced hours of operation, or reduced, suspended or terminated services:**

- **More than one-third of local health departments have laid-off staff;** the most severe lay-offs have been seen in rural health departments like Southern Seven Health Department (many staff reduced to one day per week) and East Side Health District, the health department that serves four townships in St. Clair County, including East St. Louis (half of its staff). Registered Nurses are more likely to be laid-off.
- **More than one in six local health departments have reduced the length of the work week,** often by one hour per day, one-half day per week, or one day per week.
- **More than one in six local health departments have reduced their hours of operation,** often by one day per week.

**The lack of a budget for General Revenue Funds has led to service cuts:** reduced clinic hours for immunization, substance abuse prevention, Teen REACH, school health, WIC, Family Case Management, emergency preparedness, breast and cervical cancer case management, genetic screening and counseling, smoking cessation, and other services.

**The State of Illinois has under-funded its public health system for years.** Exacerbated this year through staff cuts and the exhaustion of cash reserves and lines of credit, the capacity of local health departments to respond to public health emergencies, like outbreaks of Legionnaire's Disease, Ebola, or natural disasters like the recent floods downstate is at the breaking point. More lay-offs and service cuts are expected each passing month without a budget.

**Failing to pay for prevention now means the problems get worse and cost more to treat.**

The counties currently affected are illustrated by the map on the back of this page.

# 5.5 MILLION AFFECTED

THESE LOCAL HEALTH DEPARTMENTS HAVE:  
LAID-OFF STAFF - REDUCED HOURS – OR CUT PROGRAMS



AS OF DECEMBER 2015

FINANCIAL REPORT - MONTHLY SUMMARY

Date Prepared: 1/12/2016

2016	Balance as	1-Dec
	Health:	53188.46
	TB:	35621.76
Income		
Grants		52127.81
Fees/permits		34754.95
Contracts		3742.50
TB Levy		0
Interest		0.00
County Board		0
Basic Health to TB fund		0
TOTAL		\$90,625.26
EXPENSES		
Salaries/Benefits		57443.65
Travel		319.91
Commodities		604.06
Contractural		6373.92
Equipment		0.00
Miscellaneous		266.55
TOTAL		\$65,008.09
Ending Balance		\$114,427.39
	Health Fund	\$80,868.44
	TB Fund	\$33,559.24
	Total Funds	\$114,427.68

Ogle County Health Department

December 1, 2015 through November 30, 2016

EXPENSES	Budget	Dec	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	YTD	% Spent
<b>PERSONNEL COSTS</b>															
Salaries	596077	49,461.05	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	49461.05	8.30%
Insurance	135000	7,982.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7982.60	5.91%
<b>TOTAL PERSONNEL COSTS</b>	731077	57443.65	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	57443.65	7.86%
<b>TRAVEL</b>															
Mileage	5330	50.60	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	50.60	0.95%
Lodging	1650	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%
Per Diem	525	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%
Fuel	4095	269.31	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	269.31	6.58%
Vehicle Maintenance	1530	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%
<b>TOTAL TRAVEL</b>	13130	319.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	319.91	2.44%
<b>COMMODITIES</b>															
Office supplies	8400	248.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	248.06	2.95%
Medical supplies	3740	356.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	356.00	9.52%
Pamphlets		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Printing		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
Flu HepB Pneum, Menomune		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	#DIV/0!
<b>Total Commodities</b>	12140	604.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	604.06	4.98%
<b>Contractual</b>															
Ad/Promotional	100	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%
Telecom-General	3935	314.80	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	314.80	8.00%
Telecom-Rochelle	3500	292.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	292.08	8.35%
Cellphones	1920	151.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	151.50	7.89%
Rent-Rochelle	42900	3500.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	3500.00	8.16%
Registration/training	2150	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%
Medical contracts	3580	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%
Professional contracts	26464	763.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	763.00	2.88%
Postage shipping	1940	369.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	369.06	19.02%
Repair/maintenance-Rochelle	4500	544.22	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	544.22	12.09%
Subs/Reference materials	1835	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%
Utilities/Rochelle	7000	439.26	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	439.26	6.28%
Interpreter		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	#DIV/0!
TB reimbursement to Health		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	#DIV/0!
Other															
Basic Health to TB															
<b>TOTAL CONTRACTUAL</b>	99824	6373.92	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6373.92	6.39%
<b>Equipment/Leases</b>															
Office	1875	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%
Medical	2462	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%
Vehicle	3500	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%
<b>Total Equipment</b>	7837	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00%
<b>Other Expenses</b>															
Misc *		266.55	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	266.55	
<b>Total Expenses</b>		7564.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	7564.44	
<b>Expenses &amp; Personnel</b>	864008	65008.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	65008.09	7.52%



January, 2015 Committee meeting notes from ROE

We have Jennifer Moreno working out of the office that Ogle County allowed us to use in Oregon. She is there on Tuesdays by appointment for fingerprinting and it is working out very well. She had 28 appointments in November and 25 in December.

The parking lot is paved. This spring we will get it striped and the project will be completed. We were able to get this done with having to ask the counties for any additional funds other than those already budgeted.

We have most of the responses from the districts from their school inspections. The districts are working very well with us on fixing violations as soon as they can to insure the safety of our students.

Believe it or not we are already planning our professional development offerings for next summer. We have found that teachers like to plan their summer professional development activities early so they can plan their vacations with their family.

We have principal meetings set up for January 21 and 22 at Sauk Valley Community College (SVCC). We will be covering some new laws that will take effect next school year but need to be put in place this spring and summer. One of these laws changes how suspensions and expulsions are handled. We had an administrators meeting on December 11 to have a lawyer go over the new rules. There were almost 100 administrators in attendance. We will be training one of our staff to work with the districts to make sure they have plans in place next school year that are in compliance with this new law. We will also cover this again at our Superintendents' meeting on February 4.

One of the programs run through the regional office is a youth program in conjunction with BEST, Inc. The Education Outreach Program provides youth ages 17-24, that have dropped out of school, academic instruction to attain their High School Equivalency Certificate. Classes are held in Oregon, Rochelle and Sterling and we also link the youth to adult education classes at SVCC. In addition, the Education Outreach Program provides career-readiness services, job search assistance, paid work experience, and training for in-demand occupations to help students to obtain and retain employment. Students also receive financial stipends, mileage reimbursement, training and fee assistance to eliminate any barriers which may impede their career goals.

We are getting most of the money the state has promised us but it is running 6 months behind.

## JUDICIARY & CIRCUIT CLERK COMMITTEE MEETING

### Tentative Minutes

January 12, 2016

1. Call to order: Chairwoman Simms calls the meeting to order at 9:00 a.m. Committee Members Present: Bowers, Colson, McKinney, Meyers, Saunders and Janes. Others: Typer, Judge Robert Hanson (leaves at 9:24 a.m.) and Circuit Clerk Kim Stahl.
2. Approval of Minutes: Motion by Janes to approve minutes from December 8, 2015, 2<sup>nd</sup> by Bowers. Motion carries.
3. Review and Approval of Closed Minutes per 5 ILCS 120/2 (c)(21) (if needed): none
4. Public Comment: none
5. Judiciary:
  - Approval of the bills: Motion by McKinney to approve the bills totaling \$4,722.46, 2<sup>nd</sup> by Bowers. Saunders asks about the copy overages. Judge Hanson states he will look into it more and Simms will talk to Finrock to get more information about RK Dixon. Motion carries.
  - Department update:
    - i. Judge Hanson reports they are working on the video prisoner call system. It works fine but they are trying to fine tune it.
    - ii. Hanson states he is very happy with the work place. There are good people in all the departments and it is a very pleasant place.
6. Circuit Clerk:
  - Approval of the bills: Motion by Bowers to approve the bills totaling \$1,115.92, 2<sup>nd</sup> by McKinney. Motion carries.
  - Department update:
    - i. Circuit Clerk Kim Stahl reports she is trying to move forward with the E-filing. It has to get approved through the State.
    - ii. Stahl also reports she is working with the State's Attorney looking through fees and fines for the office to make sure they are collecting everything they should be.
    - iii. The Automation and Documentation Storage cost has increased. They could increase that fee from \$10.00 to \$25.00. Everyone else in the circuit has made the increase except Ogle and Carroll counties. Stahl will bring a resolution next month for the committee to review and discuss.
7. Old Business: none
8. New Business: none
9. Adjournment: With no further business, Chairwoman Simms adjourns the meeting at 9:40 a.m.

**LONG RANGE AND STRATEGIC PLANNING COMMITTEE MEETING**  
**Tentative Minutes**  
**January 12, 2016**

1. Call to order: Chairman Griffin calls the meeting to order at 4:02 p.m. Present: Gouker, Oltmanns, Heuer, Janes and Sparrow. Others: Typer, Colbert, Simms, Gronewold, Nordman, Sheriff Brian VanVickle, IT Coordinator Larry Callant, Nick Head, Solid Waste Director Steve Rypkema and Jeff Goodale from HOK. Absent: Bolin.
2. Opening Comments: Griffin states he will be on vacation next month so Oltmanns will run the meeting if he is not back.
3. Approval of Minutes: December 8, 2015: Motion by Sparrow to approve the minutes, 2<sup>nd</sup> by Oltmanns. Motion carries.
4. Discussion and approval of possible project change orders: Griffin presents a change order for the removal of an old concrete slab at the old Sheriff's building. Motion by Sparrow to approve the change order, 2<sup>nd</sup> by Oltmanns. Motion carries.
5. Discussion and Approval of Long Range Planning Capital Improvement Invoices: Motion by Janes to approve bills totaling \$77,856.03, 2<sup>nd</sup> by Sparrow. Motion carries.
6. Public Comment: none
7. Old Business:
  - Washington Street property and Public Safety Complex update: Griffin reports the Washington Street property is completed and there are a few repairs at the Public Safety Complex but nothing significant.
  - Capital projects process and project update:
    - Griffin states the Courthouse steps project will begin in April. After that is finished they will refinish the floors.
    - The ADA door should be completed before election time.
  - Rochelle property update: Gouker reports they are still exploring possible uses for this building. They are trying to find a floor plan for the building right now.
8. New Business:
  - Strategic Planning: none
  - Jail Update Feasibility Study: Jeff Goodale from HOK gives a presentation on the Jail needs assessment in Ogle County. He presents different cost models for 200 beds, 250 beds and a juvenile detention facility co-location. He will come back with a per diem break down.
  - Board Room sound investigation: The Sheriff is looking into a solution.
9. Long Range Capital Improvements Fund: none
10. Other Business: Gouker states the landfill will be applying for an extension on their site so he and Solid Waste Director Steve Rypkema will be looking at hiring and outside attorney with some expertise on the subject.
11. Adjournment: With no further business, Chairman Griffin adjourns the meeting at 4:59 p.m.

Respectfully submitted,  
Courtney Warren

Change Order Request:

Project: Ogle County Sheriff's Building Demo  
Attn: Guy Gelhausen  
Date: 12/18/2015



dsba@ntrakgroup.com  
O-815-282-3000  
F- 815-282-3003  
5905 MATERIAL AVE.  
LOVES PARK, IL 61111

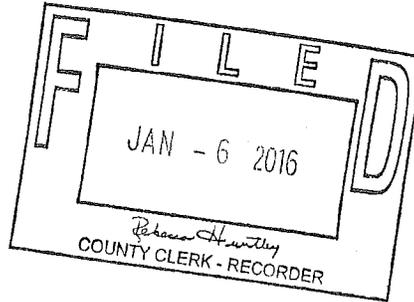
Item No.	Item Description	Qty.	Unit	Unit Price	Amount
1	Remove Concrete Slab	1		\$1,475.00	\$1,475.00

Submitted By:

Danielle Schlichting 12/23/15  
Danielle Schlichting Date

Don Dink LRR CHAIR  
Approved By:

BAA 12/23/15  
Date





ORDINANCE 2016-0102

INDEMNITY FUND

WHEREAS, the County has established a Tax Sale Indemnity fund under 35 ILCS 200/21-295, and

WHEREAS, 35 ILCS 200/21-300 allows monies received under 35 ILCS 200/21-295 to be deposited in the general fund for general county government purposes, if the County Board provides by ordinance that the indemnity required by Section 21-295 be provided by the Tort Liability Fund, and

WHEREAS, the County has sufficient funds available in the Tort Liability Fund (Insurance Premium Levy Fund) to provide indemnity to the County for any exposure created as a result of tax sales.

THEREFORE, BE IT ORDAINED, by the County Board of Ogle County, State of Illinois, that the indemnity required by 35 ILCS 200/21-295 be provided by the Tort Liability Fund (Insurance Premium Levy Fund), and

BE IT FURTHER ORDAINED, that the balance of the Tax Sale Indemnity Fund be transferred to the General Fund, and

BE IT FURTHER ORDAINED, that all future fees collected under 35 ILCS 200/21-295 be deposited into the General Fund.

APPROVED AND ADOPTED by the Ogle County Board, State of Illinois, this 19<sup>th</sup> day of January, 2016.

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Kim Gouker  
Ogle County Board Chairman

ATTEST:

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Rebecca Huntley  
Ogle County Clerk

OGLE COUNTY  
PERSONNEL AND SALARY COMMITTEE

Tentative Minutes

Dec. 8, 2015 9:01 am  
Ogle County Courthouse Room 3<sup>rd</sup> Floor Memorial Hall

1. Chm. Kenney calls the meeting to order at 9:00 am.
2. Present: Chm. Kenney, Brooks, Finfrock, Heuer, Director of Court Services Ken Burn, Ogle County Clerk Becky Huntley, County Engineer Curtis Cook  
Absent: Sheriff Brian VanVickle
3. Motion by Heuer to approve minutes of Nov. 10, 2015, second by Brooks.  
Motion carries.
4. County Holidays tabled.
5. Chm. Kenney will contact Sikich about progress of Personnel Policy Review and Revisions. He will also inquire about timing of quarterly reports and updates and report back to committee.
6. Further discussion on Hiring Freeze.
7. The committee discussed the next projects with Sikich. A wage study is being considered. It is discussed that Job Descriptions are necessary for a study. The committee will request each department to submit their department's Job Descriptions to a box at the County Clerk's office before the next Personnel and Salary Committee meeting on Jan. 12.
8. A statement for services was received from Sikich for \$6,187.50. The statement covers 100% of the annual HR Consultant fee and 50% of the Personnel Policy Review. The bill will be forwarded to the Finance Committee for payment.
9. There being no further business, the meeting was adjourned at 10:00 am.

Respectfully Submitted,  
Rebecca Huntley

**PERSONNEL AND SALARY COMMITTEE MEETING**  
**Tentative Minutes**  
January 12, 2016

1. Call to order: Chairman Kenney calls the meeting to order at 9:00 a.m. Committee Members Present: Brooks, Finfrock, Heuer, County Engineer Curtis Cook, Director of Court Services Ken Burn and County Clerk & Recorder Rebecca Huntley. Others present: Health Department Director Cindy Bauling. Absent: Sheriff Brian VanVickle.
2. Approval of minutes – December 8, 2015: Motion by Brooks, 2<sup>nd</sup> by Finfrock. Motion carries.
3. New Business:
  - Review HR Consultant changes per Sikich: Kenney explains they have a new representative from Sikich, Julie Strahl.
  - County Holidays: County Clerk & Recorder Rebecca Huntley states she would like to see the County observe Christmas Eve. She would like to trade another holiday like Lincoln’s birthday or Columbus Day. She would also like to see all departments on the same holiday schedule. Kenney will work on this for next month. Motion by Heuer to recommend to the Executive Committee to replace Christmas Eve as a day off instead of Lincoln’s Birthday, 2<sup>nd</sup> by Brooks. Motion carries.
  - Accounting of Department Job Descriptions: Huntley states she is still waiting to hear back from the Treasurer, Circuit Clerk, Judiciary, State’s Attorney and Zoning departments.
4. Old Business:
  - Potential Policy for Hiring Freeze: Kenney reports he still needs to talk to the State’s Attorney to come up with a written document to clean this up; then the committee will review it.
  - Recommendation for HR Consultant Projects for FY2016: none
5. Committee comments and suggestions: none
6. Department Head comments or suggestions: none
7. Public comment and any other business or discussion: none
8. With no further business, Chairman Kenney adjourns the meeting at 9:44 a.m.

Respectfully submitted,  
Courtney Warren

KIMBERLY A. STAHL  
CLERK OF THE CIRCUIT COURT  
FIFTEENTH JUDICIAL CIRCUIT  
OGLE COUNTY  
OREGON, IL

CIRCUIT CLERK CHECKING ACCOUNT REPORT

For the Month of: December 2015

Balance of Checking Account: \$168,708.56 (November 2015)

Receipts: \$270,912.71 (December 2015)

Interest Checking: \$61.37

Disbursements: \$191,715.43

BALANCE: \$247,967.21

NOTE: \$71,290.80 of Receipts was received through  
E-Payments.

\$8371.15 of Disbursements was Restitution paid to  
victims.



# January 19, 2016 - County Board Report

Payment Date Range 01/19/16 - 01/19/16

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
<b>Fund 100 - General Fund</b>											
Department <b>01 - County Clerk/Recorder</b>											
Account <b>4422 - Travel Expenses, Dues &amp; Seminars</b>											
1101 - BECKY BOLTHOUSE	2016-00000223	MILEAGE REIMBURSEMENT	Paid by Check # 150188		01/06/2016	01/19/2016	01/19/2016		01/19/2016	25.30	
1320 - REBECCA HUNTLEY	2016-00000208	MILEAGE REIMBURSEMENT	Paid by Check # 150234		01/06/2016	01/19/2016	01/19/2016		01/19/2016	148.10	
									Account <b>4422 - Travel Expenses, Dues &amp; Seminars</b> Totals	Invoice Transactions 2	<u>\$173.40</u>
Account <b>4510 - Office Supplies</b>											
1246 - FISCHER'S	0690952-001	SERVICE ON OFFICE PRINTERS	Paid by Check # 150217		12/30/2015	01/19/2016	01/19/2016		01/19/2016	27.49	
1246 - FISCHER'S	0690206-001	MESH BINS FOR CLOSED COMMITTEE MINUTES	Paid by Check # 150217		11/25/2015	01/19/2016	01/19/2016		01/19/2016	43.18	
1246 - FISCHER'S	0690298-001	PENS	Paid by Check # 150217		12/02/2015	01/19/2016	01/19/2016		01/19/2016	23.59	
1246 - FISCHER'S	0690467-001	TONER CARTRIDGE - COUNTER	Paid by Check # 150217		12/09/2015	01/19/2016	01/19/2016		01/19/2016	107.11	
1246 - FISCHER'S	0690868-001	ENVELOPES - 6X9	Paid by Check # 150217		12/23/2015	01/19/2016	01/19/2016		01/19/2016	11.32	
1246 - FISCHER'S	0690945-001	INDEX CARDS - 2	Paid by Check # 150217		12/30/2015	01/19/2016	01/19/2016		01/19/2016	7.98	
1503 - OGLE COUNTY NEWSPAPERS	2016-00000206	SUBSCRIPTION	Paid by Check # 150261		01/21/2016	01/19/2016	01/19/2016		01/19/2016	39.00	
									Account <b>4510 - Office Supplies</b> Totals	Invoice Transactions 7	<u>\$259.67</u>
Account <b>4714 - Software Maintenance</b>											
1199 - DEVNET, INC	2016-00000202	QUARTERLY SOFTWARE MAINTENANCE	Paid by Check # 150209		01/01/2016	01/19/2016	01/19/2016		01/19/2016	3,062.50	
1656 - STERLING CODIFIERS INC.	17308	ANNUAL COUNTY CODE ON INTERNET	Paid by Check # 150290		01/01/2016	01/19/2016	01/19/2016		01/19/2016	500.00	
									Account <b>4714 - Software Maintenance</b> Totals	Invoice Transactions 2	<u>\$3,562.50</u>
Sub-Department <b>10 - Elections</b>											
Account <b>4525 - Election Supplies</b>											
1226 - ELECTION SYSTEMS & SOFTWARE	946664	MOTHERBOARD REPLACEMENT	Paid by Check # 150216		12/15/2015	01/19/2016	01/19/2016		01/19/2016	639.91	
1246 - FISCHER'S	0690952-001	SERVICE ON OFFICE PRINTERS	Paid by Check # 150217		12/30/2015	01/19/2016	01/19/2016		01/19/2016	1,030.72	
3317 - LINDA WALTER	2016-00000205	ELECTION SUPPLIES - GENERAL PRIAMRY 3-15-16	Paid by Check # 150304		01/05/2016	01/19/2016	01/19/2016		01/19/2016	111.28	
									Account <b>4525 - Election Supplies</b> Totals	Invoice Transactions 3	<u>\$1,781.91</u>



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Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund <b>100 - General Fund</b>										
Department <b>01 - County Clerk/Recorder</b>										
Sub-Department <b>10 - Elections</b>										
Account <b>4714 - Software Maintenance</b>										
3316 - INTEGRA BUSINESS SERVICES	452	SOFTWARE USAGE AGREEMENT	Paid by Check # 150236		01/04/2016	01/19/2016	01/19/2016		01/19/2016	3,500.00
							Account <b>4714 - Software Maintenance</b> Totals	Invoice Transactions	1	<u>\$3,500.00</u>
							Sub-Department <b>10 - Elections</b> Totals	Invoice Transactions	4	<u>\$5,281.91</u>
							Department <b>01 - County Clerk/Recorder</b> Totals	Invoice Transactions	15	<u>\$9,277.48</u>



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Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
<b>Fund 100 - General Fund</b>											
Department <b>02 - Building &amp; Grounds</b>											
Account <b>4210 - Disposal Service</b>											
2810 - MORING DISPOSAL, INC.	10066281	Acct # 173009 Disposal Services	Paid by Check # 150254		12/28/2015	01/25/2016	01/19/2016		01/19/2016	714.02	
									Account <b>4210 - Disposal Service</b> Totals	Invoice Transactions 1	\$714.02
Account <b>4212 - Electricity</b>											
1156 - COMED	01-16/2271033064	Account # 2271033064	Paid by Check # 150202		12/08/2015	12/23/2015	01/19/2016		01/19/2016	177.21	
1156 - COMED	02-16/0087085050	Acct # 0087085050	Paid by Check # 150202		12/09/2015	02/08/2016	01/19/2016		01/19/2016	463.08	
1156 - COMED	01-16/2707431018	Acct # 2707431018	Paid by Check # 150202		12/09/2015	01/25/2016	01/19/2016		01/19/2016	554.50	
1156 - COMED	01-16/3125174006	Acct # 3125174006	Paid by Check # 150202		12/08/2015	01/25/2015	01/19/2016		01/19/2016	366.21	
1156 - COMED	02-16/2959724006	Acct # 2959724006	Paid by Check # 150202		12/09/2015	01/25/2016	01/19/2016		01/19/2016	4,424.61	
1156 - COMED	01-16/3903001028	Acct # 3903001028	Paid by Check # 150202		12/08/2015	02/08/2016	01/19/2016		01/19/2016	2,105.25	
1156 - COMED	01-16/2959457000	Acct # 2959457000	Paid by Check # 150202		12/09/2016	01/25/2016	01/19/2016		01/19/2016	2,862.65	
1156 - COMED	02-16/2959457000	Acct # 2959457000	Paid by Check # 150202		12/17/2015	02/01/2016	01/19/2016		01/19/2016	2,964.05	
1156 - COMED	12-15/2959457000	Acct 2959457000	Paid by Check # 150202		12/17/2016	01/19/2016	01/19/2016		01/19/2016	101.40	
1156 - COMED	02-16/2355368000	Electricity Acct 2355368000 Weld Park	Paid by Check # 150202		01/05/2016	02/22/2016	01/19/2016		01/19/2016	45.33	
4450 - DIRECT ENERGY BUSINESS	153450026153782	Account # 1295285	Paid by Check # 150210		12/11/2015	01/25/2016	01/19/2016		01/19/2016	3,341.79	
									Account <b>4212 - Electricity</b> Totals	Invoice Transactions 11	\$17,406.08
Account <b>4214 - Gas (Heating)</b>											
4717 - CONSTELLATION ENERGY SERVICES - NATURAL GAS, LLC	1619393-01	Cust # 52893-15734	Paid by Check # 150205		12/07/2015	02/05/2015	01/19/2016		01/19/2016	1,905.83	
4717 - CONSTELLATION ENERGY SERVICES - NATURAL GAS, LLC	1626949 01	Cust # 52893-15734	Paid by Check # 150205		01/08/2015	03/08/2016	01/19/2016		01/19/2016	2,636.32	
1898 - NICOR	01-16/14-91-18-2	Acct # 14-91-18-29993	Paid by Check # 150257		12/07/2015	01/22/2015	01/19/2016		01/19/2016	431.92	
1898 - NICOR	01-16/71-19-92-2	Acct # 71-19-92-20006	Paid by Check # 150257		12/07/2015	01/22/2016	01/19/2016		01/19/2016	151.13	
1898 - NICOR	01-16/30-14-28-2	Acct # 30-14-28-25337	Paid by Check # 150257		12/04/2015	12/29/2015	01/19/2016		01/19/2016	97.87	
1898 - NICOR	02-16/00-29-63-0	Acct # 00-29-63-0776-2	Paid by Check # 150257		12/04/2015	12/21/2015	01/19/2016		01/19/2016	374.89	
1898 - NICOR	01-16/665639094	Acct # 665639094	Paid by Check # 150257		01/04/2016	02/19/2016	01/19/2016		01/19/2016	498.98	



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<b>Fund 100 - General Fund</b>											
Department <b>02 - Building &amp; Grounds</b>											
Account <b>4214 - Gas (Heating)</b>											
1898 - NICOR	01-16/3943645802	Acct # 3943645802	Paid by Check # 150257		01/04/2016	02/19/2016	01/19/2016		01/19/2016	184.60	
1898 - NICOR	02-16/30-14-287	Acct # 30-14-28-25337	Paid by Check # 150257		01/06/2015	01/28/2016	01/19/2016		01/19/2016	149.64	
1898 - NICOR	02-16/14-91-18-2	Acct # 14-91-18-29993	Paid by Check # 150257		01/07/2016	02/23/2016	01/19/2016		01/19/2016	183.03	
									Account <b>4214 - Gas (Heating) Totals</b>	Invoice Transactions 10	<u>\$6,614.21</u>
Account <b>4216 - Telephone</b>											
1941 - FRONTIER	4544693	Acct # 11044525	Paid by Check # 150223		12/20/2015	01/18/2016	01/19/2016		01/19/2016	116.90	
1941 - FRONTIER	4544325	Acct # 11106704	Paid by Check # 150221		12/20/2015	01/18/2016	01/19/2016		01/19/2016	213.20	
1941 - FRONTIER	6103Z958-S-15354	Bill # 6103Z958S3	Paid by Check # 150224		12/20/2015	01/21/2016	01/19/2016		01/19/2016	253.34	
1941 - FRONTIER	01/2015B&G	Acct # 630-159-0035-072202-5	Paid by Check # 150225		12/28/2015	01/21/2016	01/19/2016		01/19/2016	2,480.31	
1941 - FRONTIER	01-16/6187140044	Annual one time Maintenance Agreement	Paid by Check # 150222		12/19/2015	01/12/2016	01/19/2016		01/19/2016	2,095.46	
1265 - VERIZON	63419665	Corp ID #VN93310379 Bill Payer ID #Y2474359	Paid by Check # 150301		01/10/2016	01/19/2016	01/19/2016		01/19/2016	427.57	
									Account <b>4216 - Telephone Totals</b>	Invoice Transactions 6	<u>\$5,586.78</u>
Account <b>4520 - Janitorial Supplies</b>											
1715 - SUPPLYWORKS	353474224	Acct # 508958	Paid by Check # 150294		12/03/2015	01/01/2016	01/19/2016		01/19/2016	2,099.80	
									Account <b>4520 - Janitorial Supplies Totals</b>	Invoice Transactions 1	<u>\$2,099.80</u>
Account <b>4540.10 - Repairs &amp; Maint - Facilities</b>											
1047 - ACE HARDWARE AND OUTDOOR CTR	01/2016	Acct # 37595	Paid by Check # 150180		12/31/2015	01/31/2016	01/19/2016		01/19/2016	142.41	
4667 - AIRGAS USA, LLC	9932841656	Acct # 2996883	Paid by Check # 150181		12/31/2015	01/30/2016	01/19/2016		01/19/2016	72.06	
1081 - BEESING WELDING, LLC	5848	Work at the jail	Paid by Check # 150185		11/21/2016	01/19/2016	01/19/2016		01/19/2016	803.40	
4445 - BIG R	01/2016	Cust # 16557	Paid by Check # 150187		12/31/2016	01/28/2016	01/19/2016		01/19/2016	12.95	
1173 - CRESCENT ELECTRIC SUPPLY CO	S501345562.001	Cust # 116775	Paid by Check # 150206		12/01/2015	01/31/2016	01/19/2016		01/19/2016	11.90	
1173 - CRESCENT ELECTRIC SUPPLY CO	S501386689.001	Cust # 116775	Paid by Check # 150206		12/09/2015	01/31/2016	01/19/2016		01/19/2016	122.05	
2050 - LAWSON PRODUCTS, INC.	9303753746	Cust # 10155168	Paid by Check # 150242		12/10/2015	01/18/2016	01/19/2016		01/19/2016	114.36	



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<b>Fund 100 - General Fund</b>										
Department <b>02 - Building &amp; Grounds</b>										
Account <b>4540.10 - Repairs &amp; Maint - Facilities</b>										
2594 - MECHANICAL INC - FREEPORT	FRE46719C	Cust # 1292	Paid by Check # 150247		12/22/2015	01/19/2016	01/19/2016		01/19/2016	1,060.90
1434 - MENARDS	14161	Acct # 30420269	Paid by Check # 150249		12/04/2015	01/18/2016	01/19/2016		01/19/2016	98.76
1434 - MENARDS	14889	Acct # 30420269	Paid by Check # 150249		12/14/2015	01/19/2016	01/19/2016		01/19/2016	11.84
1434 - MENARDS	17818	Acct # 32720251	Paid by Check # 150248		12/22/2015	01/19/2016	01/19/2016		01/19/2016	9.99
1434 - MENARDS	16710	Acct # 32720251	Paid by Check # 150248		12/11/2015	01/19/2016	01/19/2016		01/19/2016	49.98
1434 - MENARDS	18292	Acct # 3270251	Paid by Check # 150248		12/30/2015	01/19/2016	01/19/2016		01/19/2016	47.95
1434 - MENARDS	16208	Acct # 30420269	Paid by Check # 150249		01/04/2015	01/19/2016	01/19/2016		01/19/2016	53.36
1434 - MENARDS	16499	Acct # 30420269	Paid by Check # 150249		01/08/2016	02/05/2016	01/19/2016		01/19/2016	34.26
1683 - R & D DO-IT-BEST	01/2016	Acct # 7538	Paid by Check # 150273		12/27/2015	01/10/2016	01/19/2016		01/19/2016	2.99
1629 - SECURITY LOCK INC.	445946	10/28/15 Sgt Keys Just getting invoice	Paid by Check # 150285		10/28/2015	11/27/2015	01/19/2016		01/19/2016	25.00
1629 - SECURITY LOCK INC.	445926	10 padlocks; received invoice on 12/23	Paid by Check # 150285		10/21/2015	11/20/2015	01/19/2016		01/19/2016	30.00
3449 - STEINER ELECTRIC COMPANY	S005249965.00	Acct # 42498	Paid by Check # 150288		12/18/2015	01/15/2016	01/19/2016		01/19/2016	71.10
3449 - STEINER ELECTRIC COMPANY	S005248234.00	Acct # 42498	Paid by Check # 150288		12/17/2015	01/12/2016	01/19/2016		01/19/2016	333.40
3449 - STEINER ELECTRIC COMPANY	S005248234	Acct # 42498	Paid by Check # 150288		12/31/2015	01/21/2015	01/19/2016		01/19/2016	27.40
3901 - VFW POST #8739	01/2016	POW flag for Court house lawn	Paid by Check # 150303		01/05/2016	01/19/2016	01/19/2016		01/19/2016	28.00
								Account <b>4540.10 - Repairs &amp; Maint - Facilities</b> Totals	Invoice Transactions 22	<u>\$3,164.06</u>
Account <b>4545.10 - Petroleum Products - Gasoline</b>										
3105 - CONSERV FS INC	01/2016B&G	ACCT #1896103	Paid by Check # 150204		12/31/2016	01/25/2016	01/19/2016		01/19/2016	357.33
								Account <b>4545.10 - Petroleum Products - Gasoline</b> Totals	Invoice Transactions 1	<u>\$357.33</u>
Account <b>4585 - Vehicle Maintenance</b>										
3764 - OGLE COUNTY CAR CARE INC.	15877	Cust ID# 1625/Blue Truck	Paid by Check # 150258		12/15/2015	01/19/2016	01/19/2016		01/19/2016	46.50
3764 - OGLE COUNTY CAR CARE INC.	15884	Cust ID# 1625/White Truck	Paid by Check # 150258		12/16/2015	01/19/2016	01/19/2016		01/19/2016	40.20
3764 - OGLE COUNTY CAR CARE INC.	Inv # 15887	Cust ID# 1625/Red Truck	Paid by Check # 150258		12/16/2015	01/19/2016	01/19/2016		01/19/2016	40.20
								Account <b>4585 - Vehicle Maintenance</b> Totals	Invoice Transactions 3	<u>\$126.90</u>



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Fund <b>100 - General Fund</b>										
Department <b>02 - Building &amp; Grounds</b>										
Account <b>4710 - Computer Hardware &amp; Software</b>										
1116 - BURR PEST CONTROL SERVICES	1723496	Acct # 40062286 Every other Month Service	Paid by Check # 150191		12/11/2015	01/08/2016	01/19/2016		01/19/2016	166.00
1206 - DIXON OTTAWA COMMUNICATIONS	442040	Cust # 71281 Ogle Tower Contract # 1346 -04	Paid by Check # 150212		01/04/2016	02/03/2016	01/19/2016		01/19/2016	486.95
							Account <b>4710 - Computer Hardware &amp; Software</b> Totals		Invoice Transactions 2	<u>\$652.95</u>
							Department <b>02 - Building &amp; Grounds</b> Totals		Invoice Transactions 57	<u>\$36,722.13</u>



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<b>Fund 100 - General Fund</b>											
Department <b>03 - Treasurer</b>											
Account <b>4412 - Official Publications</b>											
1615 - SAUK VALLEY MEDIA	334511	Delinquent Tax Publication - Trustee Parcels	Paid by Check # 150283		01/11/2016	01/19/2016	01/19/2016		01/19/2016	280.80	
								Account <b>4412 - Official Publications</b> Totals		Invoice Transactions 1	<u>\$280.80</u>
Account <b>4510 - Office Supplies</b>											
1246 - FISCHER'S	2016-00000221	Various Office Supplies	Paid by Check # 150217		01/11/2016	01/19/2016	01/19/2016		01/19/2016	59.39	
								Account <b>4510 - Office Supplies</b> Totals		Invoice Transactions 1	<u>\$59.39</u>
Account <b>4714 - Software Maintenance</b>											
1199 - DEVNET, INC	0711.4197T	Devnet Tax Software	Paid by Check # 150209		01/11/2016	01/19/2016	01/19/2016		01/19/2016	3,062.50	
								Account <b>4714 - Software Maintenance</b> Totals		Invoice Transactions 1	<u>\$3,062.50</u>
								Department <b>03 - Treasurer</b> Totals		Invoice Transactions 3	<u>\$3,402.69</u>



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<b>Fund 100 - General Fund</b>										
Department <b>04 - HEW</b>										
Account <b>4250.40 - Agency Allotments Soil &amp; Water Conservation</b>										
1506 - OGLE COUNTY SOIL & WATER CONSERVATION DISTRICT	2016-00000199	ANNUAL ALLOCATION -2016	Paid by Check # 150262		12/15/2015	01/19/2016	01/19/2016	12/18/2015	01/19/2016	85,000.00
							Account <b>4250.40 - Agency Allotments Soil &amp; Water Conservation</b> Totals		Invoice Transactions 1	<u>85,000.00</u>
Sub-Department <b>20 - Regional Supt of Schools</b>										
Account <b>4314 - Contractual Services</b>										
1400 - REGIONAL OFFICE OF EDUCATION #47	12-2015	DECEMBER 2015 REIMBURSEMENTS	Paid by Check # 150274		01/19/2016	01/19/2016	01/19/2016		01/19/2016	479.80
							Account <b>4314 - Contractual Services</b> Totals		Invoice Transactions 1	<u>\$479.80</u>
Account <b>4422 - Travel Expenses, Dues &amp; Seminars</b>										
1400 - REGIONAL OFFICE OF EDUCATION #47	12-2015	DECEMBER 2015 REIMBURSEMENTS	Paid by Check # 150274		01/19/2016	01/19/2016	01/19/2016		01/19/2016	93.24
							Account <b>4422 - Travel Expenses, Dues &amp; Seminars</b> Totals		Invoice Transactions 1	<u>\$93.24</u>
Account <b>4724 - Office Equipment Maintenance</b>										
1400 - REGIONAL OFFICE OF EDUCATION #47	12-2015	DECEMBER 2015 REIMBURSEMENTS	Paid by Check # 150274		01/19/2016	01/19/2016	01/19/2016		01/19/2016	5,000.00
							Account <b>4724 - Office Equipment Maintenance</b> Totals		Invoice Transactions 1	<u>\$5,000.00</u>
							Sub-Department <b>20 - Regional Supt of Schools</b> Totals		Invoice Transactions 3	<u>\$5,573.04</u>
							Department <b>04 - HEW</b> Totals		Invoice Transactions 4	<u>\$90,573.04</u>



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<b>Fund 100 - General Fund</b>										
Department <b>06 - Judiciary &amp; Jury</b>										
Account <b>4345 - Interpreter</b>										
3646 - CENTER FOR SIGHT AND HEARING	4597	Sign Language Interpreting on 12/15/15 (Wills) & 12/18/15 (Cook)	Paid by Check # 150197		01/11/2016	01/19/2016	01/19/2016		01/19/2016	531.25
1944 - LANGUAGE LINE SERVICES	3726852	Language Line Services (November, 2015)	Paid by Check # 150241		01/11/2016	01/19/2016	01/19/2016		01/19/2016	14.21
4721 - JAVIER SAAVEDRA	2015-20	Interpreting Fees- Dec.9,14,16,23,28,30/2 015 & 1/6/2016	Paid by Check # 150281		01/11/2016	01/19/2016	01/19/2016		01/19/2016	650.00
4721 - JAVIER SAAVEDRA	2015-20b	Mileage	Paid by Check # 150281		01/11/2016	01/19/2016	01/19/2016		01/19/2016	216.00
								Account <b>4345 - Interpreter</b> Totals	Invoice Transactions 4	<u>\$1,411.46</u>
Account <b>4442 - Counseling/ Psychiatric Services</b>										
2327 - BRADEN COUNSELING CENTER	15CF98	Psychological Evaluation (Kmiec/15CF98)	Paid by Check # 150189		01/11/2016	01/19/2016	01/19/2016		01/19/2016	900.00
1386 - KSB	11957990	Mandatory Medical Testing (14CF254)	Paid by Check # 150238		01/11/2016	01/19/2016	01/19/2016		01/19/2016	760.00
4883 - TERRANCE G. LICHTENWALD, PHD	15CM113	Fitness Evaluation (McQuality/15CM113)	Paid by Check # 150245		01/11/2016	01/19/2016	01/19/2016		01/19/2016	700.00
								Account <b>4442 - Counseling/ Psychiatric Services</b> Totals	Invoice Transactions 3	<u>\$2,360.00</u>
Account <b>4510 - Office Supplies</b>										
1246 - FISCHER'S	0690306	2016 Calendar	Paid by Check # 150217		01/11/2016	01/19/2016	01/19/2016		01/19/2016	24.95
1246 - FISCHER'S	0691002	Additional Office Supplies	Paid by Check # 150217		01/11/2016	01/19/2016	01/19/2016		01/19/2016	50.95
								Account <b>4510 - Office Supplies</b> Totals	Invoice Transactions 2	<u>\$75.90</u>
Account <b>4720 - Office Equipment</b>										
1568 - RK DIXON	1372421	Lease Agreement & Overages/Copiers (9/15/15 thru 10/14/15)	Paid by Check # 150275		01/11/2016	01/19/2016	01/19/2016		01/19/2016	233.32
1568 - RK DIXON	1381754	Lease Agreement/Copiers (11/15/15 through 12/14/15)	Paid by Check # 150275		01/11/2016	01/19/2016	01/19/2016		01/19/2016	184.38
1568 - RK DIXON	1413847	Lease Agreement & Overages/Copiers (12/15/15 thru 1/14/16)	Paid by Check # 150275		01/11/2016	01/19/2016	01/19/2016		01/19/2016	273.02





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<b>Fund 100 - General Fund</b>										
Department <b>07 - Circuit Clerk</b>										
Account <b>4412 - Official Publications</b>										
1503 - OGLE COUNTY NEWSPAPERS	2016-00000191	Yearly Subscription Renewal	Paid by Check # 150261		01/08/2016	01/19/2016	01/19/2016		01/19/2016	39.00
							Account <b>4412 - Official Publications</b> Totals		Invoice Transactions 1	<u>\$39.00</u>
Account <b>4422 - Travel Expenses, Dues &amp; Seminars</b>										
1214 - DIANA LEWIS	2016-00000190	Mileage Rochelle Court 12/11/2015	Paid by Check # 150243		01/08/2016	01/19/2016	01/19/2016		01/19/2016	23.00
1684 - LAURIE TODD	2016-00000189	Mileage Rochelle Court 12/18/15	Paid by Check # 150298		01/08/2016	01/19/2016	01/19/2016		01/19/2016	23.00
							Account <b>4422 - Travel Expenses, Dues &amp; Seminars</b> Totals		Invoice Transactions 2	<u>\$46.00</u>
Account <b>4509 - Jury Supplies</b>										
4479 - HINCKLEY SPRINGS	2016-00000187	Water Supply	Paid by Check # 150232		01/08/2016	01/19/2016	01/19/2016		01/19/2016	150.00
							Account <b>4509 - Jury Supplies</b> Totals		Invoice Transactions 1	<u>\$150.00</u>
Account <b>4510 - Office Supplies</b>										
1246 - FISCHER'S	2016-00000185	Office Supplies	Paid by Check # 150218		01/08/2016	01/19/2016	01/19/2016		01/19/2016	880.92
							Account <b>4510 - Office Supplies</b> Totals		Invoice Transactions 1	<u>\$880.92</u>
							Department <b>07 - Circuit Clerk</b> Totals		Invoice Transactions 5	<u>\$1,115.92</u>



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Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
<b>Fund 100 - General Fund</b>											
Department <b>09 - Focus House</b>											
Account <b>4212 - Electricity</b>											
1849 - ROCHELLE MUNICIPAL UTILITIES	12/21/15	Utility Bill for 3279 Hwy 251	Paid by Check # 150279		01/19/2016	01/19/2016	01/19/2016		01/19/2016	1,885.75	
1849 - ROCHELLE MUNICIPAL UTILITIES	01212016	Utilities at 3279 N. Hwy 251	Paid by Check # 150279		01/19/2016	01/19/2016	01/19/2016		01/19/2016	2,036.86	
									Account <b>4212 - Electricity</b> Totals	Invoice Transactions 2	<u>\$3,922.61</u>
Account <b>4214 - Gas (Heating)</b>											
1898 - NICOR	02152016	gas bill for 322 N 9th and 920 4th Ave.	Paid by Check # 150257		01/19/2016	01/19/2016	01/19/2016		01/19/2016	326.53	
									Account <b>4214 - Gas (Heating)</b> Totals	Invoice Transactions 1	<u>\$326.53</u>
Account <b>4216 - Telephone</b>											
1941 - FRONTIER	01/21/15	Three phone bills	Paid by Check # 150226		01/19/2016	01/19/2016	01/19/2016		01/19/2016	1,079.69	
									Account <b>4216 - Telephone</b> Totals	Invoice Transactions 1	<u>\$1,079.69</u>
Account <b>4219 - Cable TV</b>											
1983 - COMCAST CABLE	12/25/2015	Cable @ 322 N 9th Street	Paid by Check # 150200		01/19/2016	01/19/2016	01/19/2016		01/19/2016	32.24	
1983 - COMCAST CABLE	1222016	Cable for 920 4th Ave & 322 N 9th	Paid by Check # 150200		01/19/2016	01/19/2016	01/19/2016		01/19/2016	124.80	
1978 - DISH NETWORK	01/04/16	Cable bill	Paid by Check # 150211		01/19/2016	01/19/2016	01/19/2016		01/19/2016	74.99	
									Account <b>4219 - Cable TV</b> Totals	Invoice Transactions 3	<u>\$232.03</u>
Account <b>4220 - Rent</b>											
4181 - PAC-VAN, INC.	PSI-2103382	January Rent for Reporting Center	Paid by Check # 150267		01/19/2016	01/19/2016	01/19/2016		01/19/2016	690.00	
									Account <b>4220 - Rent</b> Totals	Invoice Transactions 1	<u>\$690.00</u>
Account <b>4326 - Medical Contracts</b>											
3035 - NANCY WILLIAMS	01/2016	January, 2016 medical contract	Paid by Check # 150306		01/19/2016	01/19/2016	01/19/2016		01/19/2016	500.00	
									Account <b>4326 - Medical Contracts</b> Totals	Invoice Transactions 1	<u>\$500.00</u>
Account <b>4435 - Transportation of Detainees</b>											
1427 - MASTERBEND	42651	wiper blades (3)	Paid by Check # 150246		01/19/2016	01/19/2016	01/19/2016		01/19/2016	35.97	
4550 - PREVENTATIVE MAINTENANCE SYSTEMS, INC.	29.00	safety test on truck	Paid by Check # 150271		01/19/2016	01/19/2016	01/19/2016		01/19/2016	29.00	
4550 - PREVENTATIVE MAINTENANCE SYSTEMS, INC.	5046	Van Testing	Paid by Check # 150271		01/19/2016	01/19/2016	01/19/2016		01/19/2016	29.00	
3390 - WEX BANK	01/22/16	December fuel for vehicles	Paid by Check # 150305		01/19/2016	01/19/2016	01/19/2016		01/19/2016	339.31	
									Account <b>4435 - Transportation of Detainees</b> Totals	Invoice Transactions 4	<u>\$433.28</u>
Account <b>4441 - Sex Offender/ Polygraph Service</b>											
2659 - CHARLES B. HOLM	12/07/15	two polygraphs	Paid by Check # 150233		01/19/2016	01/19/2016	01/19/2016		01/19/2016	600.00	



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Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
<b>Fund 100 - General Fund</b>											
Department <b>09 - Focus House</b>											
Account <b>4441 - Sex Offender/ Polygraph Service</b>											
1667 - JEFFREY B SUNDBERG, LCSW	December	FH group and counseling	Paid by Check # 150292		01/19/2016	01/19/2016	01/19/2016		01/19/2016	1,280.00	
									Account <b>4441 - Sex Offender/ Polygraph Service</b> Totals	Invoice Transactions 2	<u>\$1,880.00</u>
Account <b>4444 - Medical Expense</b>											
1895 - OGLE COUNTY HEALTH DEPARTMENT	3245	HPV Vaccine for minor	Paid by Check # 150260		01/19/2016	01/19/2016	01/19/2016		01/19/2016	23.50	
4050 - ROCHELLE COMMUNITY HOSPITAL	24056C3298	new employee drug screens	Paid by Check # 150276		01/19/2016	01/19/2016	01/19/2016		01/19/2016	100.00	
									Account <b>4444 - Medical Expense</b> Totals	Invoice Transactions 2	<u>\$123.50</u>
Account <b>4510 - Office Supplies</b>											
1249 - FOCUS HOUSE	2016-00000134	Reimburse Petty Cash for Office Supplies	Paid by Check # 150219		01/19/2016	01/19/2016	01/19/2016		01/19/2016	10.16	
1249 - FOCUS HOUSE	2016-00000136	Reimburse FH general checking	Paid by Check # 150219		01/19/2016	01/19/2016	01/19/2016		01/19/2016	147.00	
									Account <b>4510 - Office Supplies</b> Totals	Invoice Transactions 2	<u>\$157.16</u>
Account <b>4520 - Janitorial Supplies</b>											
1013 - ROCHELLE JANITORIAL SUPPLY	2072	Janitorial supplies	Paid by Check # 150277		01/19/2016	01/19/2016	01/19/2016		01/19/2016	204.10	
1013 - ROCHELLE JANITORIAL SUPPLY	2007	Janitorial Supplies	Paid by Check # 150277		01/19/2016	01/19/2016	01/19/2016		01/19/2016	8.68	
									Account <b>4520 - Janitorial Supplies</b> Totals	Invoice Transactions 2	<u>\$212.78</u>
Account <b>4540 - Repairs &amp; Maint - Facilities</b>											
1984 - B & W APPLIANCE CENTER, INC.	9871	Dryer Repair at 322 N. 9th Street	Paid by Check # 150183		01/19/2016	01/19/2016	01/19/2016		01/19/2016	83.00	
1984 - B & W APPLIANCE CENTER, INC.	9898	Dryer repair at 4th Avenue	Paid by Check # 150183		01/19/2016	01/19/2016	01/19/2016		01/19/2016	132.00	
1985 - BERG - JOHNSON ELECTRICAL CONTRACTORS	11936	Replace lights in parking lot	Paid by Check # 150186		01/19/2016	01/19/2016	01/19/2016		01/19/2016	510.00	
2889 - BRUNS CONSTRUCTION INC.	6112	snow removal	Paid by Check # 150190		01/19/2016	01/19/2016	01/19/2016		01/19/2016	160.00	
1434 - MENARDS	8039	Latch for exterior door	Paid by Check # 150250		01/19/2016	01/19/2016	01/19/2016		01/19/2016	29.91	
2148 - OMEGA PEST CONTROL	33878	Pest Control	Paid by Check # 150263		01/19/2016	01/19/2016	01/19/2016		01/19/2016	125.00	
1683 - R & D DO-IT-BEST	2016-00000135	December Maintenance items	Paid by Check # 150273		01/19/2016	01/19/2016	01/19/2016		01/19/2016	240.98	
1683 - R & D DO-IT-BEST	November	November maintenance items	Paid by Check # 150273		01/19/2016	01/19/2016	01/19/2016		01/19/2016	86.22	
									Account <b>4540 - Repairs &amp; Maint - Facilities</b> Totals	Invoice Transactions 8	<u>\$1,367.11</u>



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Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 100 - General Fund</b>										
Department <b>09 - Focus House</b>										
Account <b>4550 - Food for County Prisoners</b>										
4492 - GORDON FOOD SERVICE, INC.	167373576	Food	Paid by Check # 150228		01/19/2016	01/19/2016	01/19/2016		01/19/2016	123.80
4492 - GORDON FOOD SERVICE, INC.	167373571	Food	Paid by Check # 150228		01/19/2016	01/19/2016	01/19/2016		01/19/2016	43.29
4492 - GORDON FOOD SERVICE, INC.	167373577	Food	Paid by Check # 150228		01/19/2016	01/19/2016	01/19/2016		01/19/2016	729.36
4492 - GORDON FOOD SERVICE, INC.	167273195	Food	Paid by Check # 150228		01/19/2016	01/19/2016	01/19/2016		01/19/2016	433.89
4492 - GORDON FOOD SERVICE, INC.	166978731	Food for residents	Paid by Check # 150228		01/19/2016	01/19/2016	01/19/2016		01/19/2016	383.28
4492 - GORDON FOOD SERVICE, INC.	166978734	Food for Residents	Paid by Check # 150228		01/19/2016	01/19/2016	01/19/2016		01/19/2016	801.36
4492 - GORDON FOOD SERVICE, INC.	167127946	Food for Residents	Paid by Check # 150228		01/19/2016	01/19/2016	01/19/2016		01/19/2016	35.45
4492 - GORDON FOOD SERVICE, INC.	167127949	Food for Residents	Paid by Check # 150228		01/19/2016	01/19/2016	01/19/2016		01/19/2016	111.77
4492 - GORDON FOOD SERVICE, INC.	167127948	Food for Residents	Paid by Check # 150228		01/19/2016	01/19/2016	01/19/2016		01/19/2016	226.95
4492 - GORDON FOOD SERVICE, INC.	167127943	Food for Residents	Paid by Check # 150228		01/19/2016	01/19/2016	01/19/2016		01/19/2016	29.78
4492 - GORDON FOOD SERVICE, INC.	167127951	Food for Residents	Paid by Check # 150228		01/19/2016	01/19/2016	01/19/2016		01/19/2016	406.68
4492 - GORDON FOOD SERVICE, INC.	166978729	Food for Residents	Paid by Check # 150228		01/19/2016	01/19/2016	01/19/2016		01/19/2016	378.19
4492 - GORDON FOOD SERVICE, INC.	167495101	Food for residents	Paid by Check # 150228		01/19/2016	01/19/2016	01/19/2016		01/19/2016	157.67
4492 - GORDON FOOD SERVICE, INC.	167495096	Food for Residents	Paid by Check # 150228		01/19/2016	01/19/2016	01/19/2016		01/19/2016	217.56
4492 - GORDON FOOD SERVICE, INC.	167495098	Food for Residents	Paid by Check # 150228		01/19/2016	01/19/2016	01/19/2016		01/19/2016	88.52
2265 - SULLIVAN'S FOODS	2016-00000137	November Food Purchases	Paid by Check # 150291		01/19/2016	01/19/2016	01/19/2016		01/19/2016	48.41
2265 - SULLIVAN'S FOODS	December 2015	Food for Residwnts - December	Paid by Check # 150291		01/19/2016	01/19/2016	01/19/2016		01/19/2016	255.35
							Account <b>4550 - Food for County Prisoners</b> Totals		Invoice Transactions 17	\$4,471.31
							Department <b>09 - Focus House</b> Totals		Invoice Transactions 46	\$15,396.00



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Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
<b>Fund 100 - General Fund</b>											
Department <b>10 - Assessment</b>											
Account <b>4510 - Office Supplies</b>											
1177 - CULLIGAN	2016-00000152	water	Paid by Check # 150207		01/08/2016	01/19/2016	01/19/2016		01/19/2016	12.50	
1246 - FISCHER'S	2016-00000154	misc office supplies	Paid by Check # 150217		01/08/2016	01/19/2016	01/19/2016		01/19/2016	28.10	
									Account <b>4510 - Office Supplies</b> Totals	Invoice Transactions 2	<u>\$40.60</u>
Account <b>4714 - Software Maintenance</b>											
1199 - DEVNET, INC	7114197	software license	Paid by Check # 150209		01/08/2016	01/19/2016	01/19/2016		01/19/2016	3,062.50	
									Account <b>4714 - Software Maintenance</b> Totals	Invoice Transactions 1	<u>\$3,062.50</u>
Account <b>4720 - Office Equipment</b>											
1568 - RK DIXON	1419839	copier, printers	Paid by Check # 150275		01/08/2016	01/19/2016	01/19/2016		01/19/2016	205.69	
									Account <b>4720 - Office Equipment</b> Totals	Invoice Transactions 1	<u>\$205.69</u>
									Department <b>10 - Assessment</b> Totals	Invoice Transactions 4	<u>\$3,308.79</u>



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<b>Fund 100 - General Fund</b>										
Department <b>11 - Zoning</b>										
Account <b>4510 - Office Supplies</b>										
1246 - FISCHER'S	690943	December 2016 Statement	Paid by Check # 150217		01/05/2016	01/19/2016	01/19/2016		01/19/2016	25.49
1895 - OGLE COUNTY HEALTH DEPARTMENT	3093	December 2015 statement	Paid by Check # 150260		12/31/2015	01/19/2016	01/19/2016		01/19/2016	102.75
								Account <b>4510 - Office Supplies</b> Totals	Invoice Transactions 2	<u>\$128.24</u>
Account <b>4585 - Vehicle Maintenance</b>										
3105 - CONSERV FS INC	3094	December 2015 Statement (18.1 gal. @ 1.52)	Paid by Check # 150204		01/06/2016	01/19/2016	01/19/2016		01/19/2016	27.51
								Account <b>4585 - Vehicle Maintenance</b> Totals	Invoice Transactions 1	<u>\$27.51</u>
Account <b>4724 - Office Equipment Maintenance</b>										
1568 - RK DIXON	1419835z	Service Contract 1/15/16 to 2/14/16	Paid by Check # 150275		12/15/2015	01/19/2016	01/19/2016		01/19/2016	127.89
								Account <b>4724 - Office Equipment Maintenance</b> Totals	Invoice Transactions 1	<u>\$127.89</u>
								Department <b>11 - Zoning</b> Totals	Invoice Transactions 4	<u>\$283.64</u>



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<b>Fund 100 - General Fund</b>										
Department <b>12 - Sheriff</b>										
Account <b>4510 - Office Supplies</b>										
3480 - BATTERIES PLUS OF ROCKFORD	284-363304	Acct # 8157326666	Paid by Check # 150184		01/03/2016	02/01/2016	01/19/2016		01/19/2016	91.90
1246 - FISCHER'S	01/2016	Acct # OCSHERIFF	Paid by Check # 150217		01/05/2016	02/09/2016	01/19/2016		01/19/2016	112.90
4479 - HINCKLEY SPRINGS	14566507	Cust # 120415	Paid by Check # 150232		12/04/2015	12/27/2015	01/19/2016		01/19/2016	44.51
4479 - HINCKLEY SPRINGS	14566507	Cust # 010116	Paid by Check # 150232		01/01/2016	01/24/2016	01/19/2016		01/19/2016	50.56
								Account <b>4510 - Office Supplies</b> Totals	Invoice Transactions 4	<b>\$299.87</b>
Account <b>4545.10 - Petroleum Products - Gasoline</b>										
1125 - CARROLL SERVICE CO	01/2016	Acct # 2631504	Paid by Check # 150196		12/31/2016	01/28/2016	01/19/2016		01/19/2016	903.05
3105 - CONSERV FS INC	01/2016	ACCT #1896103	Paid by Check # 150204		12/31/2015	01/25/2016	01/19/2016		01/19/2016	8,066.77
3390 - WEX BANK	01/2016	Acct # 0414-00-630179	Paid by Check # 150305		12/31/2015	01/26/2016	01/19/2016		01/19/2016	43.38
								Account <b>4545.10 - Petroleum Products - Gasoline</b> Totals	Invoice Transactions 3	<b>\$9,013.20</b>
Account <b>4570 - Uniforms</b>										
1135 - CHIEF SUPPLY	416569	Acct # 230486	Paid by Check # 150199		12/03/2015	12/31/2015	01/19/2016		01/19/2016	120.06
1135 - CHIEF SUPPLY	414636	Acct # 230486	Paid by Check # 150199		12/01/2015	12/30/2015	01/19/2016		01/19/2016	254.94
1135 - CHIEF SUPPLY	421607	Acct # 230486	Paid by Check # 150199		12/10/2015	01/07/2016	01/19/2016		01/19/2016	107.07
3225 - GREENACRE CLEANERS	01/2016	Activity from 12/1/15 to 1/1/16	Paid by Check # 150230		01/01/2016	01/29/2016	01/19/2016		01/19/2016	30.80
4206 - SANITARY CLEANERS	01/2016	Activity from 12/1/15 to 12/31/15	Paid by Check # 150282		01/04/2016	01/19/2016	01/19/2016		01/19/2016	806.74
3354 - UNIFORM DEN EAST, INC.	43335	Cust Code OGLECOSD	Paid by Check # 150299		12/29/2015	01/28/2016	01/19/2016		01/19/2016	30.99
								Account <b>4570 - Uniforms</b> Totals	Invoice Transactions 6	<b>\$1,350.60</b>
Account <b>4585 - Vehicle Maintenance</b>										
3836 - BUTITTA BROTHERS AUTOMOTIVE SERVICES INC	RO# 0032811	Ogle Co Sheriff - Vehicle Maintenance	Paid by Check # 150192		12/04/2015	01/19/2016	01/19/2016		01/19/2016	38.03
1121 - BYRON QUICK LUBE	RO# 21989	OCS- Vehicle Maintenance	Paid by Check # 150193		11/25/2015	01/19/2016	01/19/2016		01/19/2016	39.87
1121 - BYRON QUICK LUBE	RO# 2044	OCS - Vehicle Maintenance	Paid by Check # 150193		11/17/2015	01/19/2016	01/19/2016		01/19/2016	53.71
1121 - BYRON QUICK LUBE	Inv # 2760	OCS Vehicle Maintenance	Paid by Check # 150193		01/06/2016	01/19/2016	01/19/2016		01/19/2016	20.75
1181 - D & W GARAGE, INC.	Estimate # 1838	OCS - Vehicle Maintenance	Paid by Check # 150208		12/12/2015	01/19/2016	01/19/2016		01/19/2016	40.00



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<b>Fund 100 - General Fund</b>										
Department <b>12 - Sheriff</b>										
Account <b>4585 - Vehicle Maintenance</b>										
1218 - DYER'S AUTOMOTIVE	01/2016	OCS Vehicle Maintenance	Paid by Check # 150213		12/31/2016	01/19/2016	01/19/2016		01/19/2016	161.24
1218 - DYER'S AUTOMOTIVE	12/2015	OCS - Vehicle Maintenance	Paid by Check # 150213		11/30/2015	12/15/2015	01/19/2016		01/19/2016	1,929.94
2961 - KRAHENBUHL CHRYSLER JEEP, INC.	01/2016	OCS Vehicle Maintenance	Paid by Check # 150237		11/25/2015	01/19/2016	01/19/2016		01/19/2016	999.57
2961 - KRAHENBUHL CHRYSLER JEEP, INC.	RO# 76483	OCS Vehicle Maintenance	Paid by Check # 150237		12/28/2015	01/25/2016	01/19/2016		01/19/2016	84.86
4816 - KUNES COUNTRY AUTO GROUP	Invoice # 9083	OGLE135742	Paid by Check # 150239		11/10/2015	01/19/2016	01/19/2016		01/19/2016	1,296.90
4816 - KUNES COUNTRY AUTO GROUP	Invoice # 9953	OGL748990	Paid by Check # 150239		12/14/2015	01/11/2016	01/19/2016		01/19/2016	34.76
4816 - KUNES COUNTRY AUTO GROUP	Inv # 9969	OGL153439	Paid by Check # 150239		12/14/2015	01/11/2016	01/19/2016		01/19/2016	220.17
4816 - KUNES COUNTRY AUTO GROUP	Invoice 10226	OCS Vehicle Maintenance	Paid by Check # 150239		12/28/2016	01/25/2016	01/19/2016		01/19/2016	58.30
4816 - KUNES COUNTRY AUTO GROUP	Inv# 10155	OCS Vehicle Maintenance	Paid by Check # 150239		12/23/2015	01/20/2016	01/19/2016		01/19/2016	359.93
4816 - KUNES COUNTRY AUTO GROUP	Inv # 10265	OCS Vehicle Maintenance	Paid by Check # 150239		01/02/2016	01/25/2016	01/19/2016		01/19/2016	112.50
4816 - KUNES COUNTRY AUTO GROUP	Inv # 10232	OCS Vehicle Maintenance	Paid by Check # 150239		12/31/2015	01/28/2016	01/19/2016		01/19/2016	337.50
4816 - KUNES COUNTRY AUTO GROUP	Inv # 10007	OCS Vehicle Maintenance	Paid by Check # 150239		12/16/2015	01/13/2016	01/19/2016		01/19/2016	225.66
4732 - LACE USED CARS INC.	Inv# 902	OCS - Vehicle Maintenance	Paid by Check # 150240		12/11/2015	01/08/2016	01/19/2016		01/19/2016	280.77
4554 - MOBILE ELECTRONICS INC.	10452	Cust ID #oglesheriff	Paid by Check # 150253		01/02/2016	02/01/2016	01/19/2016		01/19/2016	11.34
3797 - SUPER-LUBE	404-0019234	OCS Vehicle Maintenance	Paid by Check # 150293		12/21/2015	01/19/2016	01/19/2016		01/19/2016	39.49
<b>Account 4585 - Vehicle Maintenance Totals</b>								Invoice Transactions	20	<b>\$6,345.29</b>
<b>Account 4715 - Computer Maintenance</b>										
3388 - COMPUTER INFORMATION SYSTEMS, INC.	234972	Annual Maintenance and License Renewal 3/3/16 - 3/2/17	Paid by Check # 150203		03/01/2016	03/03/2016	01/19/2016		01/19/2016	12,113.70
1042 - LEXISNEXIS RISK SOLUTIONS	11767140-2015123	Acct # 1176710 Criminal History Search	Paid by Check # 150244		12/31/2015	01/30/2016	01/19/2016		01/19/2016	74.75
<b>Account 4715 - Computer Maintenance Totals</b>								Invoice Transactions	2	<b>\$12,188.45</b>
<b>Account 4724 - Office Equipment Maintenance</b>										
1568 - RK DIXON	1419833	Acct # OC07 for 1/15/16 to 02/14/16	Paid by Check # 150275		12/15/2015	01/14/2016	01/19/2016		01/19/2016	470.33
<b>Account 4724 - Office Equipment Maintenance Totals</b>								Invoice Transactions	1	<b>\$470.33</b>



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<b>Fund 100 - General Fund</b>											
Department <b>12 - Sheriff</b>											
Sub-Department <b>60 - OEMA</b>											
Account <b>4216 - Telephone</b>											
1941 - FRONTIER	01-16/OEMA	Acct # 630-159-0035-072202-5	Paid by Check # 150225		12/28/2015	01/21/2016	01/19/2016		01/19/2016	1,128.48	
									Account <b>4216 - Telephone</b> Totals	Invoice Transactions 1	<u>1,128.48</u>
Account <b>4216.30 - Telephone Cell Phones &amp; Pagers</b>											
1265 - VERIZON	01/2016OEMA	Acct #686542129-00001 Emergency Lines	Paid by Check # 150300		12/23/2015	01/18/2016	01/19/2016		01/19/2016	3.28	
									Account <b>4216.30 - Telephone Cell Phones &amp; Pagers</b> Totals	Invoice Transactions 1	<u>3.28</u>
Account <b>4510 - Office Supplies</b>											
2265 - SULLIVAN'S FOODS	01/2016OEMA	Cust # 267130	Paid by Check # 150291		12/31/2015	01/28/2016	01/19/2016		01/19/2016	19.97	
									Account <b>4510 - Office Supplies</b> Totals	Invoice Transactions 1	<u>19.97</u>
Account <b>4545.10 - Petroleum Products - Gasoline</b>											
3105 - CONSERV FS INC	01/2016Oema	ACCT #1896103	Paid by Check # 150204		12/31/2015	01/25/2016	01/19/2016		01/19/2016	114.30	
3390 - WEX BANK	01/2016OEMA	Acct # 0414-00-630179	Paid by Check # 150305		12/31/2015	01/26/2015	01/19/2016		01/19/2016	39.86	
									Account <b>4545.10 - Petroleum Products - Gasoline</b> Totals	Invoice Transactions 2	<u>154.16</u>
Account <b>4724 - Office Equipment Maintenance</b>											
4622 - GREAT AMERICAN FINANCIAL SERVICES	18078754	Agreement # 015-0916533-000	Paid by Check # 150229		12/30/2015	01/28/2016	01/19/2016		01/19/2016	45.87	
									Account <b>4724 - Office Equipment Maintenance</b> Totals	Invoice Transactions 1	<u>45.87</u>
									Sub-Department <b>60 - OEMA</b> Totals	Invoice Transactions 6	<u>1,351.76</u>
Sub-Department <b>62 - Emergency Communications</b>											
Account <b>4500 - Supplies</b>											
4479 - HINCKLEY SPRINGS	14566521	Cust # 120415 651877114566521	Paid by Check # 150232		12/04/2015	12/27/2015	01/19/2016		01/19/2016	44.45	
4479 - HINCKLEY SPRINGS	14566521	Cust # 010116 651877114566521	Paid by Check # 150232		01/01/2016	01/24/2016	01/19/2016		01/19/2016	56.55	
									Account <b>4500 - Supplies</b> Totals	Invoice Transactions 2	<u>101.00</u>
Account <b>4710 - Computer Hardware &amp; Software</b>											
2130 - A&R SHARED SERVICES CENTER	T1617912	Acct #T8880130 Communication Charges	Paid by Check # 150179		12/14/2015	01/19/2016	01/19/2016		01/19/2016	86.60	
									Account <b>4710 - Computer Hardware &amp; Software</b> Totals	Invoice Transactions 1	<u>86.60</u>
Account <b>4715 - Computer Maintenance</b>											
3388 - COMPUTER INFORMATION SYSTEMS, INC.	234972/Ecom	Annual Maintenance and License Renewal 3/3/16 - 3/2/17	Paid by Check # 150203		03/01/2016	03/03/2016	01/19/2016		01/19/2016	9,085.27	
									Account <b>4715 - Computer Maintenance</b> Totals	Invoice Transactions 1	<u>9,085.27</u>



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Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 100 - General Fund</b>										
Department <b>12 - Sheriff</b>										
Sub-Department <b>62 - Emergency Communications</b>										
Account <b>4737 - Maintenance of Radios</b>										
1206 - DIXON OTTAWA COMMUNICATIONS	442041	Ogle County MDT Service- Annual billing Feb 2016 to Jan 2017	Paid by Check # 150212		01/04/2016	02/03/2016	01/19/2016		01/19/2016	6,181.20
1452 - MOTOROLA	16297112614	Cust #6006AD PSIC Radios 12/01/2015 - 11/30/2013	Paid by Check # 150255		12/01/2015	01/01/2016	01/19/2016		01/19/2016	5,184.00
							Account <b>4737 - Maintenance of Radios</b> Totals		Invoice Transactions 2	<u>\$11,365.20</u>
							Sub-Department <b>62 - Emergency Communications</b> Totals		Invoice Transactions 6	<u>\$20,638.07</u>
							Department <b>12 - Sheriff</b> Totals		Invoice Transactions 48	<u>\$51,657.57</u>



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Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
<b>Fund 100 - General Fund</b>											
Department <b>13 - Coroner</b>											
Account <b>4355 - Autopsy Fees</b>											
2666 - MARK PETERS, MD S.C.	12/15/15	Autopsies for Newby and Stultz	Paid by Check # 150269		01/12/2016	01/19/2016	01/11/2016	01/19/2016	01/19/2016	1,400.00	
1109 - STERICYCLE, INC.	4006017343	waste pickup for morgue	Paid by Check # 150289		01/12/2016	01/19/2016	01/11/2016	01/19/2016	01/19/2016	107.95	
									Account <b>4355 - Autopsy Fees</b> Totals	Invoice Transactions 2	<u>\$1,507.95</u>
Account <b>4458 - Coroner Lab Fees</b>											
3349 - AIT LABORATORIES	11404123115	cornel, heller, walsh, berg, huskins, powell	Paid by Check # 150182		01/12/2016	01/19/2016	01/11/2016	01/19/2016	01/19/2016	1,575.00	
4050 - ROCHELLE COMMUNITY HOSPITAL	12/27/15	x-rays for Stultz - gunshot	Paid by Check # 150276		01/12/2016	01/19/2016	01/11/2016	01/19/2016	01/19/2016	320.00	
4050 - ROCHELLE COMMUNITY HOSPITAL	12-31-2015	X-rays for Conderman - Fire in car	Paid by Check # 150276		01/12/2016	01/19/2016	01/11/2016	01/19/2016	01/19/2016	593.00	
									Account <b>4458 - Coroner Lab Fees</b> Totals	Invoice Transactions 3	<u>\$2,488.00</u>
Account <b>4545.10 - Petroleum Products - Gasoline</b>											
3105 - CONSERV FS INC	01/06/16	12/02/15 to 01/04/16	Paid by Check # 150204		01/12/2016	01/19/2016	01/11/2016	01/19/2016	01/19/2016	55.23	
									Account <b>4545.10 - Petroleum Products - Gasoline</b> Totals	Invoice Transactions 1	<u>\$55.23</u>
									Department <b>13 - Coroner</b> Totals	Invoice Transactions 6	<u>\$4,051.18</u>



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Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
<b>Fund 100 - General Fund</b>											
Department <b>14 - State's Attorney</b>											
Account <b>4340 - IL Appellate Prosecutor</b>											
1651 - STATE'S ATTORNEY APPELLATE PROSECUTOR	2016-00000211	Appellate Prosecution Fund	Paid by Check # 150287		01/19/2016	01/19/2016	01/19/2016		01/19/2016	18,000.00	
								Account <b>4340 - IL Appellate Prosecutor</b> Totals		Invoice Transactions 1	<u>18,000.00</u>
Account <b>4422 - Travel Expenses, Dues &amp; Seminars</b>											
4634 - JOSH VERSLUYS	2016-00000177	CAC - Dixon 12/8, 12/9 12/18	Paid by Check # 150302		01/19/2016	01/19/2016	01/19/2016		01/19/2016	55.20	
								Account <b>4422 - Travel Expenses, Dues &amp; Seminars</b> Totals		Invoice Transactions 1	<u>55.20</u>
Account <b>4510 - Office Supplies</b>											
1177 - CULLIGAN	2016-00000176	water	Paid by Check # 150207		01/19/2016	01/19/2016	01/19/2016		01/19/2016	62.00	
1246 - FISCHER'S	0690301-001	Alpha Index Tabs	Paid by Check # 150217		01/19/2016	01/19/2016	01/19/2016		01/19/2016	3.73	
1246 - FISCHER'S	0690740-001	Fax Machine Cleaning/Parts	Paid by Check # 150217		01/19/2016	01/19/2016	01/19/2016		01/19/2016	27.49	
1363 - IN TOTIDEM VERBIS, LLC	15DH74	Court Reporter for 9/23/15 Grand Jury	Paid by Check # 150235		01/19/2016	01/19/2016	01/19/2016		01/19/2016	170.00	
1568 - RK DIXON	2016-00000178	Copier Contract 1/15/16 - 2/14/16	Paid by Check # 150275		01/19/2016	01/19/2016	01/19/2016		01/19/2016	389.58	
								Account <b>4510 - Office Supplies</b> Totals		Invoice Transactions 5	<u>\$652.80</u>
Account <b>4538 - Legal Materials &amp; Books</b>											
1728 - THOMSON REUTERS - WEST	2016-00000179	Westlaw charges for Nov. 2015	Paid by Check # 150297		01/19/2016	01/19/2016	01/19/2016		01/19/2016	1,037.85	
1728 - THOMSON REUTERS - WEST	2016-00000210	West Law for 12/1 - 12/31/15	Paid by Check # 150297		01/19/2016	01/19/2016	01/19/2016		01/19/2016	1,037.85	
								Account <b>4538 - Legal Materials &amp; Books</b> Totals		Invoice Transactions 2	<u>\$2,075.70</u>
								Department <b>14 - State's Attorney</b> Totals		Invoice Transactions 9	<u>\$20,783.70</u>



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Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 100 - General Fund</b>										
Department <b>16 - Finance</b>										
Account <b>4312 - Auditing</b>										
3369 - SIKICH LLP	2016-00000213	Progress Billing - Audit	Paid by Check # 150286		01/11/2016	01/19/2016	01/19/2016		01/19/2016	4,000.00
								Account <b>4312 - Auditing</b> Totals	Invoice Transactions 1	<u>\$4,000.00</u>
Account <b>4490 - Contingencies</b>										
4609 - HESSE MARTONE, PC	68746F	LR Health	Paid by Check # 150231		01/11/2016	01/19/2016	01/19/2016		01/19/2016	912.50
								Account <b>4490 - Contingencies</b> Totals	Invoice Transactions 1	<u>\$912.50</u>
Account <b>4510 - Office Supplies</b>										
4622 - GREAT AMERICAN FINANCIAL SERVICES	18078755	Chairman's Printer 003-0916533-001 Xerox Phaser 6600DN	Paid by Check # 150229		01/11/2016	01/19/2016	01/19/2016		01/19/2016	15.83
1436 - MERLIN'S GREENHOUSE & FLOWERS	2016-00000215	Flowers - Snodgrass	Paid by Check # 150252		01/11/2016	01/19/2016	01/19/2016		01/19/2016	50.00
								Account <b>4510 - Office Supplies</b> Totals	Invoice Transactions 2	<u>\$65.83</u>
Account <b>4740 - Postage Meter &amp; Rental</b>										
1544 - PITNEY BOWES INC.	2016-00000214	Postage Machine Contract	Paid by Check # 150270		01/11/2016	01/19/2016	01/19/2016		01/19/2016	702.00
								Account <b>4740 - Postage Meter &amp; Rental</b> Totals	Invoice Transactions 1	<u>\$702.00</u>
Sub-Department <b>35 - Information Technology</b>										
Account <b>4142 - IT/ Network Administration</b>										
1246 - FISCHER'S	2016-00000222	File Folders	Paid by Check # 150217		01/11/2016	01/19/2016	01/19/2016		01/19/2016	8.99
1434 - MENARDS	17598	Cable	Paid by Check # 150248		01/11/2016	01/19/2016	01/19/2016		01/19/2016	150.00
4740 - SYNDEO NETWORKS, INC.	4194	System Update	Paid by Check # 150295		01/11/2016	01/19/2016	01/19/2016		01/19/2016	220.00
								Account <b>4142 - IT/ Network Administration</b> Totals	Invoice Transactions 3	<u>\$378.99</u>
Account <b>4211 - Internet Service</b>										
1983 - COMCAST CABLE	2016-00000219	Internet Service	Paid by Check # 150201		01/11/2016	01/19/2016	01/19/2016		01/19/2016	240.20
1849 - ROCHELLE MUNICIPAL UTILITIES	2016-00000220	Internet Service	Paid by Check # 150278		01/11/2016	01/19/2016	01/19/2016		01/19/2016	700.00
								Account <b>4211 - Internet Service</b> Totals	Invoice Transactions 2	<u>\$940.20</u>
Account <b>4710 - Computer Hardware &amp; Software</b>										
3991 - CARD SERVICE CENTER	2016-00000216	Cable	Paid by Check # 150195		01/11/2016	01/19/2016	01/19/2016		01/19/2016	17.96
3991 - CARD SERVICE CENTER	2016-00000217	Patch Cables	Paid by Check # 150195		01/11/2016	01/19/2016	01/19/2016		01/19/2016	21.19
3991 - CARD SERVICE CENTER	2016-00000218	Synergy Software	Paid by Check # 150195		01/11/2016	01/19/2016	01/19/2016		01/19/2016	72.00
1434 - MENARDS	17035	Step Stool	Paid by Check # 150248		01/11/2016	01/19/2016	01/19/2016		01/19/2016	29.94



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Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 100 - General Fund</b>										
Department <b>16 - Finance</b>										
Sub-Department <b>35 - Information Technology</b>										
Account <b>4710 - Computer Hardware &amp; Software</b>										
1434 - MENARDS	17031	Various Hardware	Paid by Check # 150248		01/11/2016	01/19/2016	01/19/2016		01/19/2016	46.32
1434 - MENARDS	17267	Various Hardware	Paid by Check # 150248		01/11/2016	01/19/2016	01/19/2016		01/19/2016	31.00
1434 - MENARDS	15344	Various Hardware	Paid by Check # 150251		01/11/2016	01/19/2016	01/19/2016		01/19/2016	55.00
1434 - MENARDS	15456	Cable & Hardware	Paid by Check # 150251		01/11/2016	01/19/2016	01/19/2016		01/19/2016	127.92
1434 - MENARDS	16269	Cable & Hardware	Paid by Check # 150251		01/11/2016	01/19/2016	01/19/2016		01/19/2016	84.69
1477 - NEW WORLD SYSTEMS	46608	Annual Maintenance Agreement	Paid by Check # 150256		01/11/2016	01/19/2016	01/19/2016		01/19/2016	22,425.00
							Account <b>4710 - Computer Hardware &amp; Software</b> Totals		Invoice Transactions 10	<u>\$22,911.02</u>
							Sub-Department <b>35 - Information Technology</b> Totals		Invoice Transactions 15	<u>\$24,230.21</u>
							Department <b>16 - Finance</b> Totals		Invoice Transactions 20	<u>\$29,910.54</u>



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Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
<b>Fund 100 - General Fund</b>											
Department <b>22 - Corrections</b>											
Account <b>4424 - Out-of-State Travel</b>											
2510 - PTS OF AMERICA, LLC	103047	Cust # 176 Prisoner Transport - Out of State- Taylor Ergman	Paid by Check # 150272		12/16/2015	01/19/2016	01/19/2016		01/19/2016	350.00	
									Account <b>4424 - Out-of-State Travel</b> Totals	Invoice Transactions 1	<u>350.00</u>
Account <b>4444 - Medical Expense</b>											
4134 - GAFFEY HEALTH SERVICE INC	P28726	LPN Care 11/30--12/04/15	Paid by Check # 150227		12/10/2015	01/19/2016	01/19/2016		01/19/2016	1,440.00	
1386 - KSB	11956679	12/2015	Paid by Check # 150238		12/31/2016	01/19/2016	01/19/2016		01/19/2016	1,162.20	
1386 - KSB	11952348	Acct #8700	Paid by Check # 150238		12/31/2015	01/19/2016	01/19/2016		01/19/2016	1,075.33	
4639 - OREGON FIRE PROTECTION DISTRICT	15-324357	Ogle County Jail	Paid by Check # 150264		11/16/2015	01/19/2016	01/19/2016		01/19/2016	352.70	
4639 - OREGON FIRE PROTECTION DISTRICT	Run # 15-468467	Run # 15-468467	Paid by Check # 150264		12/30/2015	01/19/2016	01/19/2016		01/19/2016	206.50	
1513 - OREGON HEALTHCARE PHARMACY	01/2016	#GRP-OCJ #OCJ9999999	Paid by Check # 150265		01/01/2016	01/31/2016	01/19/2016		01/19/2016	3,460.44	
4050 - ROCHELLE COMMUNITY HOSPITAL	341723919	Insured Unique ID # 341723919	Paid by Check # 150276		12/02/2015	01/18/2016	01/19/2016		01/19/2016	121.50	
4050 - ROCHELLE COMMUNITY HOSPITAL	542290161	Insured's Unique ID 542290161	Paid by Check # 150276		12/03/2015	01/19/2016	01/19/2016		01/19/2016	109.50	
4905 - ROCKFORD ORTHOPEDIC ASSOCIATES, LTD	1552695	Ogle County Jail	Paid by Check # 150280		12/16/2015	01/19/2016	01/19/2016		01/19/2016	164.50	
									Account <b>4444 - Medical Expense</b> Totals	Invoice Transactions 9	<u>\$8,092.67</u>
Account <b>4510 - Office Supplies</b>											
4910 - CENTRAL RESTAURANT PRODUCTS	80043271	Customer # 108300	Paid by Check # 150198		12/29/2015	01/26/2016	01/19/2016		01/19/2016	421.88	
4277 - ECOLAB	0388240	Acct # 010046544 Dishwasher Rental	Paid by Check # 150214		12/13/2015	01/19/2016	01/19/2016		01/19/2016	59.00	
1222 - ECOWATER SYSTEMS	01/2016	Acct # 67116	Paid by Check # 150215		01/02/2016	01/18/2016	01/19/2016		01/19/2016	315.80	
3182 - FOX RIVER FOODS INC	01/2016	Acct # 18694400	Paid by Check # 150220		12/31/2015	01/28/2016	01/19/2016		01/19/2016	178.07	
4479 - HINCKLEY SPRINGS	14501182	Cust # 649350114501182	Paid by Check # 150232		12/04/2015	12/27/2015	01/19/2016		01/19/2016	52.34	
4479 - HINCKLEY SPRINGS	14346368	Cust #471764914346368	Paid by Check # 150232		12/04/2015	12/27/2015	01/19/2016		01/19/2016	40.48	
1627 - SECRETARY OF STATE	01/2016Juan	Notary Application/Juan Carreno	Paid by Check # 150284		01/18/2015	01/19/2016	01/19/2016		01/19/2016	10.00	
1890 - SYSCO FOODS OF BARABOO LLC	01/2016	Acct # 266726	Paid by Check # 150296		01/01/2016	01/20/2016	01/19/2016		01/19/2016	2,349.17	
									Account <b>4510 - Office Supplies</b> Totals	Invoice Transactions 8	<u>\$3,426.74</u>



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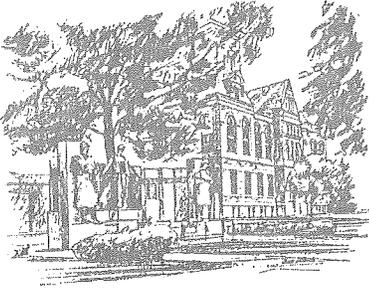
Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
<b>Fund 100 - General Fund</b>											
Department <b>22 - Corrections</b>											
Account <b>4545.10 - Petroleum Products - Gasoline</b>											
3105 - CONSERV FS INC	01/2016Corr	ACCT #1896103	Paid by Check # 150204		01/18/2015	01/19/2016	01/19/2016		01/19/2016	159.95	
									Account <b>4545.10 - Petroleum Products - Gasoline</b> Totals	Invoice Transactions 1	<u>\$159.95</u>
Account <b>4550 - Food for County Prisoners</b>											
3182 - FOX RIVER FOODS INC	01/2016	Acct # 18694400	Paid by Check # 150220		12/31/2015	01/28/2016	01/19/2016		01/19/2016	10,369.63	
1518 - OREGON SUPER VALU	01/2016	Acct #040000000129	Paid by Check # 150266		01/02/2016	01/25/2016	01/19/2016		01/19/2016	23.73	
4587 - PAN-O-GOLD BAKING CO.	730937	23777	Paid by Check # 150268		12/05/2015	01/19/2016	01/19/2016		01/19/2016	50.30	
4587 - PAN-O-GOLD BAKING CO.	735305	Acct # 23777	Paid by Check # 150268		12/12/2015	01/04/2016	01/19/2016		01/19/2016	97.38	
4587 - PAN-O-GOLD BAKING CO.	742597	Acct # 23777	Paid by Check # 150268		12/19/2015	01/11/2016	01/19/2016		01/19/2016	78.38	
4587 - PAN-O-GOLD BAKING CO.	748550	Acct # 23777	Paid by Check # 150268		12/26/2015	01/18/2016	01/19/2016		01/19/2016	131.54	
1890 - SYSCO FOODS OF BARABOO LLC	01/2016	Acct # 266726	Paid by Check # 150296		01/01/2016	01/20/2016	01/19/2016		01/19/2016	6,853.55	
									Account <b>4550 - Food for County Prisoners</b> Totals	Invoice Transactions 7	<u>\$17,604.51</u>
Account <b>4570 - Uniforms</b>											
3225 - GREENACRE CLEANERS	01/2016Corr	Activity from 12/1/15 to 1/1/16	Paid by Check # 150230		01/01/2016	01/30/2016	01/19/2016		01/19/2016	92.15	
4206 - SANITARY CLEANERS	01/2016Corr	Activity from 12/1/15 to 12/31/15	Paid by Check # 150282		01/04/2016	02/01/2016	01/19/2016		01/19/2016	451.25	
									Account <b>4570 - Uniforms</b> Totals	Invoice Transactions 2	<u>\$543.40</u>
Account <b>4585 - Vehicle Maintenance</b>											
4911 - CANTRELL'S BODY SHOP & GARAGE, INC	01/05/2016	Service call for the Transport van replace tire on Van	Paid by Check # 150194		01/18/2015	01/19/2016	01/19/2016		01/19/2016	75.00	
									Account <b>4585 - Vehicle Maintenance</b> Totals	Invoice Transactions 1	<u>\$75.00</u>
Account <b>4715 - Computer Maintenance</b>											
3388 - COMPUTER INFORMATION SYSTEMS, INC.	234972/Corr	Annual Maintenance and License Renewal 3/3/16 - 3/2/17	Paid by Check # 150203		03/01/2016	03/03/2016	01/19/2016		01/19/2016	9,085.27	
									Account <b>4715 - Computer Maintenance</b> Totals	Invoice Transactions 1	<u>\$9,085.27</u>
Account <b>4724 - Office Equipment Maintenance</b>											
1568 - RK DIXON	1429059	Contract base rate charge 1/15/16 to 2/14/16	Paid by Check # 150275		12/31/2015	01/30/2016	01/19/2016		01/19/2016	356.25	
									Account <b>4724 - Office Equipment Maintenance</b> Totals	Invoice Transactions 1	<u>\$356.25</u>



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Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 100 - General Fund</b>										
							Department <b>22 - Corrections</b> Totals	Invoice Transactions 31		<u>\$39,693.79</u>
							Fund <b>100 - General Fund</b> Totals	Invoice Transactions 265		<u>\$310,898.93</u>
							Grand Totals	Invoice Transactions 265		<u>\$310,898.93</u>



*Rebecca Huntley*  
Ogle County Clerk & Recorder

January 7, 2016

Cash Balance on Hand 12/01/2015	County Clerk Cash	224,811.13
	Recorder Cash	50.00
Receipts for December		154,976.18
Disbursements for December		226,261.67
		<hr/>
		\$ 153,525.64
Certified Mail	159.78	
County License	50.00	
GIS Fee Fund	8,274.00	
GIS Map Booklet	0.00	
Highway Maps	10.00	
Liquor License	62.50	
Married Families DV Fund / Marriage	70.00	
Plat Books	0.00	
Recorder's Automation Fund	2,075.50	
Recorder's GIS Fees	593.00	
RHSPS - Recorder	272.50	
RHSPS - State	4,905.00	
State Death Srchg. Fund	24.00	
Tax Redemptions	97,050.71	
Video Gaming Licenses	0.00	
Vital Records Auto Fund	184.00	
		<hr/>
	\$ 113,730.99	
<hr/>		
Revenue Stamp Account Balance	16,507.50	
October Earnings Turned Over To Treasurer		\$ 23,637.73

*Rebecca Huntley*

Rebecca Huntley  
Ogle County Clerk



# December 1 - December 14, 2015 - Department Claims

Payment Date Range 12/01/15 - 12/14/15

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 100 - General Fund</b>										
Department <b>02 - Building &amp; Grounds</b>										
Account <b>4540.10 - Repairs &amp; Maint - Facilities</b>										
3991 - CARD SERVICE CENTER	12/2015B&G	Acct# XXXX XXXX XXXX 0014	Paid by Check # 150168		11/27/2015	12/23/2015	12/09/2015		12/11/2015	363.89
							Account <b>4540.10 - Repairs &amp; Maint - Facilities</b> Totals		Invoice Transactions 1	\$363.89
Account <b>4570 - Uniforms</b>										
3343 - KIM BAUER	FY2015-2016	Uniform Allowance - Janitorial	Paid by Check # 150062		12/01/2015	12/01/2015	12/01/2015		12/03/2015	300.00
4620 - PENNY LEE	FY2015-2016	Uniform Allowance - Janitorial	Paid by Check # 150064		12/01/2015	12/01/2015	12/01/2015		12/03/2015	300.00
3553 - STEVEN MEYERS	FY2015-2016	Uniform Allowance - Janitorial	Paid by Check # 150065		12/01/2015	12/01/2015	12/01/2015		12/03/2015	300.00
3178 - TIMOTHY L MITCHUSSON	FY2015-2016	Uniform Allowance - Janitorial	Paid by Check # 150066		12/01/2015	12/01/2015	12/01/2015		12/03/2015	300.00
3789 - JESSICA REED	FY2015-2016	Uniform Allowance - Janitorial	Paid by Check # 150067		12/01/2015	12/01/2015	12/01/2015		12/03/2015	300.00
3341 - GARY SCHNORR	FY2015-2016	Uniform Allowance - Janitorial	Paid by Check # 150068		12/01/2015	12/01/2015	12/01/2015		12/03/2015	300.00
							Account <b>4570 - Uniforms</b> Totals		Invoice Transactions 6	\$1,800.00
							Department <b>02 - Building &amp; Grounds</b> Totals		Invoice Transactions 7	\$2,163.89
Department <b>12 - Sheriff</b>										
Account <b>4420 - Training Expenses</b>										
3991 - CARD SERVICE CENTER	12/2015Sheriff	Ammunition / Squad / Supplies	Paid by Check # 150168		11/27/2015	12/23/2015	12/10/2015		12/11/2015	1,727.85
							Account <b>4420 - Training Expenses</b> Totals		Invoice Transactions 1	\$1,727.85
Account <b>4510 - Office Supplies</b>										
3991 - CARD SERVICE CENTER	12/2015Sheriff	Ammunition / Squad / Supplies	Paid by Check # 150168		11/27/2015	12/23/2015	12/10/2015		12/11/2015	167.57
							Account <b>4510 - Office Supplies</b> Totals		Invoice Transactions 1	\$167.57
Account <b>4570 - Uniforms</b>										
4902 - EMILY ENGELBARTS	FY2015-2016	Uniform Allowance - Clerical	Paid by Check # 150063		12/01/2015	12/01/2015	12/01/2015		12/03/2015	300.00
3185 - WANDA SMICE	FY2015-2016	Uniform Allowance - Clerical	Paid by Check # 150069		12/01/2015	12/01/2015	12/01/2015		12/03/2015	300.00
							Account <b>4570 - Uniforms</b> Totals		Invoice Transactions 2	\$600.00
Account <b>4575 - Weapons &amp; Ammunition</b>										
3991 - CARD SERVICE CENTER	12/2015Sheriff	Ammunition / Squad / Supplies	Paid by Check # 150168		11/27/2015	12/23/2015	12/10/2015		12/11/2015	2,150.12
							Account <b>4575 - Weapons &amp; Ammunition</b> Totals		Invoice Transactions 1	\$2,150.12
Account <b>4585 - Vehicle Maintenance</b>										
3991 - CARD SERVICE CENTER	12/2015Sheriff	Ammunition / Squad / Supplies	Paid by Check # 150168		11/27/2015	12/23/2015	12/10/2015		12/11/2015	17.00
							Account <b>4585 - Vehicle Maintenance</b> Totals		Invoice Transactions 1	\$17.00
							Department <b>12 - Sheriff</b> Totals		Invoice Transactions 6	\$4,662.54



# December 1 - December 14, 2015 - Department Claims

Payment Date Range 12/01/15 - 12/14/15

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 100 - General Fund</b>										
Department <b>13 - Coroner</b>										
Account <b>4458 - Coroner Lab Fees</b>										
3349 - AIT LABORATORIES	11404083115	Labs for Koroma, Terronez	Paid by Check # 150167		12/09/2015	12/09/2015	12/09/2015		12/11/2015	500.00
							Account <b>4458 - Coroner Lab Fees</b> Totals	Invoice Transactions 1		<u>\$500.00</u>
							Department <b>13 - Coroner</b> Totals	Invoice Transactions 1		<u>\$500.00</u>
Department <b>22 - Corrections</b>										
Account <b>4585 - Vehicle Maintenance</b>										
3991 - CARD SERVICE CENTER	12/2015Corr	Acct# XXXX XXXX XXXX 0014	Paid by Check # 150168		11/27/2015	12/23/2015	12/09/2015		12/11/2015	1,019.00
							Account <b>4585 - Vehicle Maintenance</b> Totals	Invoice Transactions 1		<u>\$1,019.00</u>
							Department <b>22 - Corrections</b> Totals	Invoice Transactions 1		<u>\$1,019.00</u>
							Fund <b>100 - General Fund</b> Totals	Invoice Transactions 15		<u>\$8,345.43</u>
							Grand Totals	Invoice Transactions 15		<u>\$8,345.43</u>



# December 16 - December 31, 2015 - Department Claims

G/L Date Range 12/16/15 - 12/31/15

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 100 - General Fund</b>										
Department <b>02 - Building &amp; Grounds</b>										
Account <b>4212 - Electricity</b>										
1849 - ROCHELLE MUNICIPAL UTILITIES	01/2015	Account # 53352	Paid by Check # 150175		12/09/2015	01/13/2016	12/23/2015		01/04/2016	23.24
							Account <b>4212 - Electricity</b> Totals		Invoice Transactions 1	\$23.24
Account <b>4216 - Telephone</b>										
1941 - FRONTIER	01-16/8155610024	Acct # 815-561-0024-101813-5	Paid by Check # 150174		12/16/2015	01/11/2016	12/23/2015		01/04/2016	194.34
1265 - VERIZON	62487833	Corp ID #VN93310379 Bill Payer ID #Y2474359	Paid by Check # 150177		12/10/2015	12/23/2015	12/23/2015		01/04/2016	422.91
							Account <b>4216 - Telephone</b> Totals		Invoice Transactions 2	\$617.25
Account <b>4216.30 - Telephone Cell Phones &amp; Pagers</b>										
1265 - VERIZON	9757443382	Acct # 880295765-00001	Paid by Check # 150176		12/18/2015	01/13/2015	12/23/2015		01/04/2016	1,500.34
							Account <b>4216.30 - Telephone Cell Phones &amp; Pagers</b> Totals		Invoice Transactions 1	\$1,500.34
Account <b>4218 - Water</b>										
1140 - CITY OF OREGON	01/2016	Service for 11/2/15 to 12/1/15	Paid by Check # 150173		12/01/2015	01/11/2016	12/23/2015		01/04/2016	3,205.67
							Account <b>4218 - Water</b> Totals		Invoice Transactions 1	\$3,205.67
							Department <b>02 - Building &amp; Grounds</b> Totals		Invoice Transactions 5	\$5,346.50
Department <b>09 - Focus House</b>										
Account <b>4212 - Electricity</b>										
1849 - ROCHELLE MUNICIPAL UTILITIES	2016-00000092	UTILITIES	Paid by Check # 150172		12/07/2015	12/17/2015	12/17/2015		12/17/2015	735.70
							Account <b>4212 - Electricity</b> Totals		Invoice Transactions 1	\$735.70
Account <b>4444 - Medical Expense</b>										
1249 - FOCUS HOUSE	2016-00000091	REIMBURSEMENT MEDICAL EXPENSES	Paid by Check # 150171		12/17/2015	12/17/2015	12/17/2015		12/17/2015	39.96
							Account <b>4444 - Medical Expense</b> Totals		Invoice Transactions 1	\$39.96
Account <b>4540 - Repairs &amp; Maint - Facilities</b>										
2615 - ANDERSON PLUMBING & HEATING	74212	REPAIR WATER HEATER	Paid by Check # 150170		12/03/2015	12/17/2015	12/17/2015		12/17/2015	302.72
							Account <b>4540 - Repairs &amp; Maint - Facilities</b> Totals		Invoice Transactions 1	\$302.72
							Department <b>09 - Focus House</b> Totals		Invoice Transactions 3	\$1,078.38
Department <b>11 - Zoning</b>										
Account <b>4510 - Office Supplies</b>										
1516 - OREGON POSTMASTER	3092	Mail tablet to Army Corp	Paid by Check # 150169		12/16/2015	12/16/2015	12/16/2015		12/16/2015	6.70
							Account <b>4510 - Office Supplies</b> Totals		Invoice Transactions 1	\$6.70
							Department <b>11 - Zoning</b> Totals		Invoice Transactions 1	\$6.70

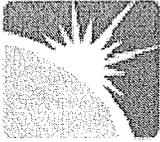


# December 16 - December 31, 2015 - Department Claims

G/L Date Range 12/16/15 - 12/31/15

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 100 - General Fund</b>										
Department <b>12 - Sheriff</b>										
Sub-Department <b>60 - OEMA</b>										
Account <b>4216.30 - Telephone Cell Phones &amp; Pagers</b>										
1265 - VERIZON	9757443382/OE MA	Acct # 880295765- 00001	Paid by Check # 150176		12/18/2015	01/13/2016	12/23/2015		01/04/2016	60.03
							Account <b>4216.30 - Telephone Cell Phones &amp; Pagers</b> Totals	Invoice Transactions 1		\$60.03
							Sub-Department <b>60 - OEMA</b> Totals	Invoice Transactions 1		\$60.03
Sub-Department <b>62 - Emergency Communications</b>										
Account <b>4710 - Computer Hardware &amp; Software</b>										
1265 - VERIZON	9757443382/Ec om	Acct # 880295765- 00001	Paid by Check # 150176		12/18/2015	01/13/2016	12/23/2015		01/04/2016	1,102.33
							Account <b>4710 - Computer Hardware &amp; Software</b> Totals	Invoice Transactions 1		\$1,102.33
							Sub-Department <b>62 - Emergency Communications</b> Totals	Invoice Transactions 1		\$1,102.33
							Department <b>12 - Sheriff</b> Totals	Invoice Transactions 2		\$1,162.36
							Fund <b>100 - General Fund</b> Totals	Invoice Transactions 11		\$7,593.94
							Grand Totals	Invoice Transactions 11		\$7,593.94

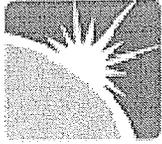




# General Fund Budget Performance

Fiscal Year to Date 12/31/15  
Exclude Rollup Account

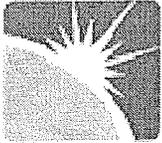
Account	Account Description	Adopted Budget	Current Month Transactions	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year YTD
<b>Fund 100 - General Fund</b>							
REVENUE							
Department <b>00 - Non-Departmental</b>							
3098	Estimated Beginning Balance	250,000.00	.00	.00	250,000.00	0	.00
3110	State Income Tax	2,420,000.00	236,408.97	236,408.97	2,183,591.03	10	219,739.77
3120.10	Sales Tax \$.0025 Portion	845,000.00	69,295.01	69,295.01	775,704.99	8	71,447.18
3120.20	Sales Tax 1% Portion	430,000.00	29,879.76	29,879.76	400,120.24	7	24,459.68
3120.30	Sales Tax Local Use Tax	510,000.00	127,607.34	127,607.34	382,392.66	25	43,934.42
3125	Property Tax	4,040,000.00	.00	.00	4,040,000.00	0	.00
3126	Mobile Home Tax	5,000.00	.00	.00	5,000.00	0	.00
3129	Video Gambling Tax	7,500.00	4,105.23	4,105.23	3,394.77	55	374.85
3330	Cable TV Franchise Fees	90,000.00	.00	.00	90,000.00	0	.00
3372	Administrative Court Fee	5,500.00	350.00	350.00	5,150.00	6	.00
3380	Restitution	1,500.00	.00	.00	1,500.00	0	.00
3900	Interfund Transfer In	610,000.00	.00	.00	610,000.00	0	.00
3900.140	Interfund Transfer In County Officers	1,145,000.00	750,000.00	750,000.00	395,000.00	66	.00
3900.180	Interfund Transfer In Long Range Capital Improvement	138,000.00	.00	.00	138,000.00	0	.00
3900.905	Interfund Transfer In Personal Property	441,000.00	.00	.00	441,000.00	0	.00
3999	Other Revenue	10,000.00	3,000.00	3,000.00	7,000.00	30	6,082.50
Department <b>00 - Non-Departmental</b> Totals		\$10,948,500.00	\$1,220,646.31	\$1,220,646.31	\$9,727,853.69	11%	\$366,038.40
Department <b>01 - County Clerk/Recorder</b>							
3129	Video Gambling Tax	1,200.00	.00	.00	1,200.00	0	.00
3530	Liquor License	20,000.00	62.50	62.50	19,937.50	0	187.50
3542	County Licenses	2,750.00	.00	.00	2,750.00	0	.00
Department <b>01 - County Clerk/Recorder</b> Totals		\$23,950.00	\$62.50	\$62.50	\$23,887.50	0%	\$187.50
Department <b>03 - Treasurer</b>							
3310	Copies	4,500.00	.00	.00	4,500.00	0	.00
Department <b>03 - Treasurer</b> Totals		\$4,500.00	\$0.00	\$0.00	\$4,500.00	0%	\$0.00
Department <b>06 - Judiciary &amp; Jury</b>							
3218	Public Defender Reimbursement	37,500.00	.00	.00	37,500.00	0	6,126.50
Department <b>06 - Judiciary &amp; Jury</b> Totals		\$37,500.00	\$0.00	\$0.00	\$37,500.00	0%	\$6,126.50
Department <b>07 - Circuit Clerk</b>							
3357	Bailiff Fee	105,000.00	6,116.45	6,116.45	98,883.55	6	7,542.20
3362	Police Vehicle Fee	8,000.00	572.00	572.00	7,428.00	7	485.00
3375	Public Defender	500.00	.00	.00	500.00	0	.00



# General Fund Budget Performance

Fiscal Year to Date 12/31/15  
Exclude Rollup Account

Account	Account Description	Adopted Budget	Current Month Transactions	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year YTD
3385	Street Value Drugs	4,000.00	390.53	390.53	3,609.47	10	513.87
3390	Criminal Fines	100,000.00	5,802.32	5,802.32	94,197.68	6	7,760.46
3395	Traffic Fines	350,000.00	25,153.18	25,153.18	324,846.82	7	25,573.73
3396	County Fee -(Traffic)	150,000.00	8,794.47	8,794.47	141,205.53	6	11,347.89
3900.550	Interfund Transfer In Document Storage	25,000.00	.00	.00	25,000.00	0	.00
3900.555	Interfund Transfer In County Automation - Circuit Cler	25,000.00	.00	.00	25,000.00	0	.00
Department <b>07 - Circuit Clerk</b> Totals		\$767,500.00	\$46,828.95	\$46,828.95	\$720,671.05	6%	\$53,223.15
Department <b>08 - Probation</b>							
3215	Probation Salary Reimbursements	540,000.00	.00	.00	540,000.00	0	.00
Department <b>08 - Probation</b> Totals		\$540,000.00	\$0.00	\$0.00	\$540,000.00	0%	\$0.00
Department <b>09 - Focus House</b>							
3473	Illinois Juvenile Contract	85,000.00	.00	.00	85,000.00	0	.00
3900.560	Interfund Transfer In Dependant Children	475,000.00	.00	.00	475,000.00	0	.00
Department <b>09 - Focus House</b> Totals		\$560,000.00	\$0.00	\$0.00	\$560,000.00	0%	\$0.00
Department <b>10 - Assessment</b>							
3220	Assessor's Salary Reimbursement	36,000.00	.00	.00	36,000.00	0	2,911.25
3310	Copies	5,000.00	611.65	611.65	4,388.35	12	142.42
Department <b>10 - Assessment</b> Totals		\$41,000.00	\$611.65	\$611.65	\$40,388.35	1%	\$3,053.67
Department <b>11 - Zoning</b>							
3599	Other Licenses & Permits	40,000.00	1,445.88	1,445.88	38,554.12	4	1,258.87
Department <b>11 - Zoning</b> Totals		\$40,000.00	\$1,445.88	\$1,445.88	\$38,554.12	4%	\$1,258.87
Department <b>12 - Sheriff</b>							
3230	Sheriff's Department Reimbursements	60,000.00	.00	.00	60,000.00	0	142.36
3410	Computer Rent	6,000.00	.00	.00	6,000.00	0	.00
3415	Fingerprinting	600.00	.00	.00	600.00	0	.00
3425	Jail Boarding	650,000.00	41,625.00	41,625.00	608,375.00	6	89,175.00
3428	Police Agreement -Municipality	78,000.00	.00	.00	78,000.00	0	.00
3435	Take Bond Fee	15,000.00	1,170.00	1,170.00	13,830.00	8	1,110.00
3440	Tower Rent	17,500.00	1,483.34	1,483.34	16,016.66	8	2,733.34
3445	Work Release	17,500.00	486.00	486.00	17,014.00	3	.00
3608	Sold Property	25,000.00	(31,828.38)	(31,828.38)	56,828.38	-127	.00
Sub-Department <b>60 - OEMA</b>							
3900.610	Interfund Transfer In OEMA	40,000.00	.00	.00	40,000.00	0	.00
Sub-Department <b>60 - OEMA</b> Totals		\$40,000.00	\$0.00	\$0.00	\$40,000.00	0%	\$0.00
Sub-Department <b>62 - Emergency Communications</b>							



# General Fund Budget Performance

Fiscal Year to Date 12/31/15

Exclude Rollup Account

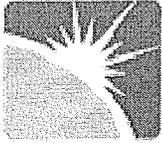
Account	Account Description	Adopted Budget	Current Month Transactions	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year YTD
3900.640	Interfund Transfer In 911 Emergency	130,000.00	.00	.00	130,000.00	0	.00
	Sub-Department <b>62 - Emergency Communications</b> Totals	\$130,000.00	\$0.00	\$0.00	\$130,000.00	0%	\$0.00
	Department <b>12 - Sheriff</b> Totals	\$1,039,600.00	\$12,935.96	\$12,935.96	\$1,026,664.04	1%	\$93,160.70
	Department <b>14 - State's Attorney</b>						
3205	State's Attorney Salary Reimbursement	145,000.00	.00	.00	145,000.00	0	12,056.42
3210	Victim Witness Advocate Reimbursement	30,000.00	11,075.00	11,075.00	18,925.00	37	.00
	Department <b>14 - State's Attorney</b> Totals	\$175,000.00	\$11,075.00	\$11,075.00	\$163,925.00	6%	\$12,056.42
	REVENUE TOTALS	\$14,177,550.00	\$1,293,606.25	\$1,293,606.25	\$12,883,943.75	9%	\$535,105.21
	EXPENSE						
	Department <b>01 - County Clerk/Recorder</b>						
4100	Salaries- Departmental	324,286.00	26,960.26	26,960.26	297,325.74	8	27,148.80
4120	Part Time/ Extra Time	8,000.00	.00	.00	8,000.00	0	.00
4422	Travel Expenses, Dues & Seminars	4,000.00	.00	.00	4,000.00	0	.00
4510	Office Supplies	10,000.00	314.93	314.93	9,685.07	3	902.91
4714	Software Maintenance	15,050.00	.00	.00	15,050.00	0	.00
	Sub-Department <b>10 - Elections</b>						
4100	Salaries- Departmental	60,000.00	.00	.00	60,000.00	0	.00
4412	Official Publications	14,000.00	.00	.00	14,000.00	0	.00
4525	Election Supplies	52,600.00	.00	.00	52,600.00	0	.00
4528	Voter Registration Supplies	10,000.00	25.00	25.00	9,975.00	0	.00
4714	Software Maintenance	34,100.00	29,692.58	29,692.58	4,407.42	87	29,845.74
	Sub-Department <b>10 - Elections</b> Totals	\$170,700.00	\$29,717.58	\$29,717.58	\$140,982.42	17%	\$29,845.74
	Department <b>01 - County Clerk/Recorder</b> Totals	\$532,036.00	\$56,992.77	\$56,992.77	\$475,043.23	11%	\$57,897.45
	Department <b>02 - Building &amp; Grounds</b>						
4100	Salaries- Departmental	322,861.00	24,265.23	24,265.23	298,595.77	8	19,664.00
4120	Part Time/ Extra Time	.00	.00	.00	.00	+++	615.13
4130	Overtime	3,500.00	1,136.24	1,136.24	2,363.76	32	.00
4210	Disposal Service	8,000.00	714.02	714.02	7,285.98	9	714.02
4212	Electricity	160,000.00	7,449.91	7,449.91	152,550.09	5	10,388.61
4214	Gas (Heating)	55,000.00	603.76	603.76	54,396.24	1	3,269.39
4216	Telephone	50,000.00	4,090.20	4,090.20	45,909.80	8	3,393.59
4216.30	Telephone Cell Phones & Pagers	20,000.00	1,500.34	1,500.34	18,499.66	8	.00
4218	Water	45,000.00	3,205.67	3,205.67	41,794.33	7	4,059.85
4512	Copy Paper	10,000.00	.00	.00	10,000.00	0	.00
4520	Janitorial Supplies	19,000.00	1,936.30	1,936.30	17,063.70	10	1,774.49

# General Fund Budget Performance

Fiscal Year to Date 12/31/15

Exclude Rollup Account

Account	Account Description	Adopted Budget	Current Month Transactions	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year YTD
4540.10	Repairs & Maint - Facilities	50,000.00	3,226.26	3,226.26	46,773.74	6	3,694.19
4540.20	Repairs & Maint - Facilities Planned	.00	.00	.00	.00	+++	4,800.00
4540.30	Repairs & Maint - Facilities Weld Park	6,500.00	.00	.00	6,500.00	0	6,500.00
4545.10	Petroleum Products - Gasoline	5,000.00	310.61	310.61	4,689.39	6	503.89
4570	Uniforms	2,000.00	1,800.00	1,800.00	200.00	90	1,500.00
4585	Vehicle Maintenance	2,500.00	116.28	116.28	2,383.72	5	.00
4710	Computer Hardware & Software	90,000.00	2,974.45	2,974.45	87,025.55	3	472.77
4715	Computer Maintenance	5,000.00	.00	.00	5,000.00	0	.00
4730	Equipment - New & Used	3,000.00	.00	.00	3,000.00	0	.00
Department <b>02 - Building &amp; Grounds</b> Totals		\$857,361.00	\$53,329.27	\$53,329.27	\$804,031.73	6%	\$61,349.93
Department <b>03 - Treasurer</b>							
4100	Salaries- Departmental	121,750.00	10,145.84	10,145.84	111,604.16	8	9,895.84
4120	Part Time/ Extra Time	36,250.00	2,181.08	2,181.08	34,068.92	6	2,376.38
4412	Official Publications	1,050.00	.00	.00	1,050.00	0	.00
4422	Travel Expenses, Dues & Seminars	1,750.00	.00	.00	1,750.00	0	.00
4510	Office Supplies	21,000.00	438.00	438.00	20,562.00	2	438.00
4714	Software Maintenance	15,370.00	.00	.00	15,370.00	0	.00
4724	Office Equipment Maintenance	780.00	109.64	109.64	670.36	14	40.30
Department <b>03 - Treasurer</b> Totals		\$197,950.00	\$12,874.56	\$12,874.56	\$185,075.44	7%	\$12,750.52
Department <b>04 - HEW</b>							
4250.20	Agency Allotments Board of Health	85,000.00	.00	.00	85,000.00	0	.00
4250.40	Agency Allotments Soil & Water Conservation	50,000.00	.00	.00	50,000.00	0	.00
Sub-Department <b>20 - Regional Supt of Schools</b>							
4100	Salaries- Departmental	26,528.00	2,276.94	2,276.94	24,251.06	9	2,439.58
4220	Rent	10,500.00	.00	.00	10,500.00	0	.00
4314	Contractual Services	9,118.00	.00	.00	9,118.00	0	831.96
4422	Travel Expenses, Dues & Seminars	7,500.00	.00	.00	7,500.00	0	163.52
4510	Office Supplies	975.00	.00	.00	975.00	0	.00
4724	Office Equipment Maintenance	5,500.00	.00	.00	5,500.00	0	.00
Sub-Department <b>20 - Regional Supt of Schools</b> Totals		\$60,121.00	\$2,276.94	\$2,276.94	\$57,844.06	4%	\$3,435.06
Department <b>04 - HEW</b> Totals		\$195,121.00	\$2,276.94	\$2,276.94	\$192,844.06	1%	\$3,435.06
Department <b>06 - Judiciary &amp; Jury</b>							
4100	Salaries- Departmental	42,314.00	3,526.16	3,526.16	38,787.84	8	3,423.50
4106	Salaries- Public Defenders	173,803.00	14,483.52	14,483.52	159,319.48	8	14,061.78
4112	Judges State Reimbursement	2,400.00	.00	.00	2,400.00	0	.00

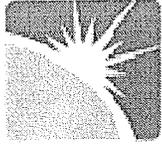


# General Fund Budget Performance

Fiscal Year to Date 12/31/15

Exclude Rollup Account

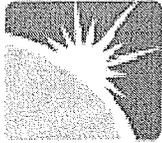
Account	Account Description	Adopted Budget	Current Month Transactions	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year YTD
4324	Appointed Attorneys	39,604.00	5,187.55	5,187.55	34,416.45	13	13,144.00
4335	Expert Witnesses	8,000.00	.00	.00	8,000.00	0	1,050.00
4345	Interpreter	16,000.00	774.05	774.05	15,225.95	5	1,622.10
4422	Travel Expenses, Dues & Seminars	4,000.00	.00	.00	4,000.00	0	.00
4442	Counseling/ Psychiatric Services	8,000.00	900.00	900.00	7,100.00	11	3,300.00
4465	Jurors - Circuit Court	17,604.00	.00	.00	17,604.00	0	1,472.40
4510	Office Supplies	3,000.00	84.60	84.60	2,915.40	3	87.73
4720	Office Equipment	3,500.00	.00	.00	3,500.00	0	257.60
4724	Office Equipment Maintenance	3,500.00	.00	.00	3,500.00	0	.00
Department <b>06 - Judiciary &amp; Jury Totals</b>		\$321,725.00	\$24,955.88	\$24,955.88	\$296,769.12	8%	\$38,419.11
Department <b>07 - Circuit Clerk</b>							
4100	Salaries- Departmental	561,500.00	46,958.54	46,958.54	514,541.46	8	45,242.72
4412	Official Publications	1,000.00	.00	.00	1,000.00	0	30.15
4422	Travel Expenses, Dues & Seminars	1,500.00	41.75	41.75	1,458.25	3	67.80
4509	Jury Supplies	4,371.00	200.00	200.00	4,171.00	5	250.00
4510	Office Supplies	4,000.00	.00	.00	4,000.00	0	68.74
4516	Postage	4,000.00	.00	.00	4,000.00	0	.00
Department <b>07 - Circuit Clerk Totals</b>		\$576,371.00	\$47,200.29	\$47,200.29	\$529,170.71	8%	\$45,659.41
Department <b>08 - Probation</b>							
4100	Salaries- Departmental	650,000.00	57,566.41	57,566.41	592,433.59	9	50,489.14
4120	Part Time/ Extra Time	25,000.00	1,141.81	1,141.81	23,858.19	5	.00
4438	Juvenile Detention Fees	28,000.00	3,520.00	3,520.00	24,480.00	13	1,125.00
Department <b>08 - Probation Totals</b>		\$703,000.00	\$62,228.22	\$62,228.22	\$640,771.78	9%	\$51,614.14
Department <b>09 - Focus House</b>							
4100	Salaries- Departmental	935,000.00	72,652.80	72,652.80	862,347.20	8	76,862.36
4120	Part Time/ Extra Time	258,000.00	21,173.60	21,173.60	236,826.40	8	22,748.91
4130	Overtime	17,000.00	1,304.55	1,304.55	15,695.45	8	1,705.48
4140	Holiday Pay	16,500.00	1,477.11	1,477.11	15,022.89	9	2,160.03
4212	Electricity	44,000.00	735.70	735.70	43,264.30	2	.00
4214	Gas (Heating)	9,000.00	.00	.00	9,000.00	0	.00
4216	Telephone	12,500.00	1,062.80	1,062.80	11,437.20	9	1,004.56
4219	Cable TV	3,000.00	80.90	80.90	2,919.10	3	.00
4220	Rent	8,500.00	690.00	690.00	7,810.00	8	.00
4274	CASA	12,500.00	.00	.00	12,500.00	0	.00
4326	Medical Contracts	6,000.00	500.00	500.00	5,500.00	8	.00



# General Fund Budget Performance

Fiscal Year to Date 12/31/15  
Exclude Rollup Account

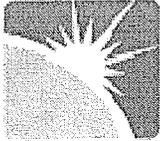
Account	Account Description	Adopted Budget	Current Month Transactions	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year YTD
4420	Training Expenses	9,000.00	.00	.00	9,000.00	0	.00
4435	Transportation of Detainees	12,000.00	820.45	820.45	11,179.55	7	548.84
4440	Personal Care & Hygiene	1,500.00	.00	.00	1,500.00	0	.00
4441	Sex Offender/ Polygraph Service	28,000.00	2,240.00	2,240.00	25,760.00	8	.00
4442	Counseling/ Psychiatric Services	10,000.00	.00	.00	10,000.00	0	.00
4444	Medical Expense	5,000.00	637.65	637.65	4,362.35	13	249.26
4508	Kitchen Supplies	2,000.00	.00	.00	2,000.00	0	.00
4510	Office Supplies	7,000.00	153.18	153.18	6,846.82	2	120.51
4520	Janitorial Supplies	6,500.00	.00	.00	6,500.00	0	.00
4540	Repairs & Maint - Facilities	22,000.00	302.72	302.72	21,697.28	1	.00
4550	Food for County Prisoners	70,000.00	545.13	545.13	69,454.87	1	.00
Department <b>09 - Focus House</b> Totals		\$1,495,000.00	\$104,376.59	\$104,376.59	\$1,390,623.41	7%	\$105,399.95
Department <b>10 - Assessment</b>							
4100	Salaries- Departmental	210,845.00	17,570.36	17,570.36	193,274.64	8	17,058.62
4412	Official Publications	4,000.00	.00	.00	4,000.00	0	.00
4420	Training Expenses	400.00	.00	.00	400.00	0	.00
4422	Travel Expenses, Dues & Seminars	750.00	.00	.00	750.00	0	.00
4510	Office Supplies	4,500.00	787.13	787.13	3,712.87	17	54.70
4530	Mapping	3,000.00	.00	.00	3,000.00	0	.00
4714	Software Maintenance	12,250.00	.00	.00	12,250.00	0	.00
4720	Office Equipment	2,600.00	.00	.00	2,600.00	0	205.69
4724	Office Equipment Maintenance	250.00	.00	.00	250.00	0	.00
Sub-Department <b>40 - Board of Review</b>							
4100	Salaries- Departmental	10,815.00	.00	.00	10,815.00	0	.00
4412	Official Publications	300.00	.00	.00	300.00	0	.00
4510	Office Supplies	3,000.00	.00	.00	3,000.00	0	.00
Sub-Department <b>40 - Board of Review</b> Totals		\$14,115.00	\$0.00	\$0.00	\$14,115.00	0%	\$0.00
Department <b>10 - Assessment</b> Totals		\$252,710.00	\$18,357.49	\$18,357.49	\$234,352.51	7%	\$17,319.01
Department <b>11 - Zoning</b>							
4100	Salaries- Departmental	145,370.00	12,002.52	12,002.52	133,367.48	8	11,840.37
4145	Board of Appeals	4,200.00	180.00	180.00	4,020.00	4	225.00
4146	Regional Planning Commission	.00	.00	.00	.00	+++	315.00
4412	Official Publications	1,000.00	.00	.00	1,000.00	0	.00
4422	Travel Expenses, Dues & Seminars	6,000.00	78.79	78.79	5,921.21	1	556.05
4510	Office Supplies	4,500.00	191.43	191.43	4,308.57	4	130.82



# General Fund Budget Performance

Fiscal Year to Date 12/31/15  
Exclude Rollup Account

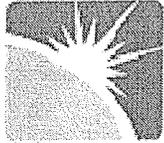
Account	Account Description	Adopted Budget	Current Month Transactions	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year YTD
4585	Vehicle Maintenance	1,500.00	76.18	76.18	1,423.82	5	73.98
4720	Office Equipment	1,000.00	.00	.00	1,000.00	0	.00
4724	Office Equipment Maintenance	2,000.00	127.89	127.89	1,872.11	6	152.72
4755	Vehicle Purchase	4,150.00	.00	.00	4,150.00	0	.00
Department <b>11 - Zoning</b> Totals		\$169,720.00	\$12,656.81	\$12,656.81	\$157,063.19	7%	\$13,293.94
Department <b>12 - Sheriff</b>							
4100	Salaries- Departmental	2,102,900.00	173,897.72	173,897.72	1,929,002.28	8	157,142.55
4108	Salaries- Bailiffs	239,185.00	29,549.71	29,549.71	209,635.29	12	21,018.68
4111	Salaries- Merit Commission	2,500.00	.00	.00	2,500.00	0	.00
4130	Overtime	105,000.00	7,085.78	7,085.78	97,914.22	7	3,646.42
4140	Holiday Pay	80,000.00	12,350.66	12,350.66	67,649.34	15	12,848.02
4420	Training Expenses	15,000.00	1,834.75	1,834.75	13,165.25	12	.00
4490	Contingencies	22,500.00	.00	.00	22,500.00	0	.00
4510	Office Supplies	20,000.00	787.95	787.95	19,212.05	4	674.00
4545.10	Petroleum Products - Gasoline	95,000.00	494.98	494.98	94,505.02	1	1,079.71
4570	Uniforms	18,000.00	1,611.26	1,611.26	16,388.74	9	3,119.85
4575	Weapons & Ammunition	8,000.00	2,150.12	2,150.12	5,849.88	27	600.00
4585	Vehicle Maintenance	35,000.00	3,970.00	3,970.00	31,030.00	11	1,877.58
4710	Computer Hardware & Software	1,000.00	.00	.00	1,000.00	0	.00
4715	Computer Maintenance	24,000.00	73.00	73.00	23,927.00	0	12.50
4720	Office Equipment	2,000.00	.00	.00	2,000.00	0	.00
4724	Office Equipment Maintenance	7,000.00	470.33	470.33	6,529.67	7	420.33
4730.30	Equipment - New & Used Radio Equipment	50,000.00	.00	.00	50,000.00	0	.00
4737	Maintenance of Radios	2,500.00	.00	.00	2,500.00	0	.00
4755	Vehicle Purchase	108,999.00	.00	.00	108,999.00	0	.00
Sub-Department <b>60 - OEMA</b>							
4100	Salaries- Departmental	55,000.00	2,759.87	2,759.87	52,240.13	5	4,250.00
4120	Part Time/ Extra Time	.00	90.00	90.00	(90.00)	+++	.00
4216	Telephone	12,250.00	1,128.48	1,128.48	11,121.52	9	922.60
4216.30	Telephone Cell Phones & Pagers	1,800.00	60.03	60.03	1,739.97	3	98.22
4422	Travel Expenses, Dues & Seminars	500.00	.00	.00	500.00	0	140.87
4510	Office Supplies	800.00	108.39	108.39	691.61	14	184.12
4545.10	Petroleum Products - Gasoline	3,250.00	106.98	106.98	3,143.02	3	187.42
4570	Uniforms	500.00	54.99	54.99	445.01	11	.00
4585	Vehicle Maintenance	800.00	23.14	23.14	776.86	3	983.68



# General Fund Budget Performance

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Exclude Rollup Account

Account	Account Description	Adopted Budget	Current Month Transactions	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year YTD
4710	Computer Hardware & Software	7,765.00	.00	.00	7,765.00	0	.00
4720	Office Equipment	500.00	.00	.00	500.00	0	.00
4724	Office Equipment Maintenance	1,500.00	45.87	45.87	1,454.13	3	95.87
4737	Maintainence of Radios	2,000.00	.00	.00	2,000.00	0	.00
4755	Vehicle Purchase	6,000.00	.00	.00	6,000.00	0	.00
Sub-Department 60 - OEMA Totals		\$92,665.00	\$4,377.75	\$4,377.75	\$88,287.25	5%	\$6,862.78
<b>Sub-Department 62 - Emergency Communications</b>							
4100	Salaries- Departmental	522,017.00	42,998.96	42,998.96	479,018.04	8	39,545.62
4120	Part Time/ Extra Time	15,000.00	336.25	336.25	14,663.75	2	984.20
4130	Overtime	35,000.00	2,981.82	2,981.82	32,018.18	9	1,117.30
4140	Holiday Pay	34,057.00	3,563.63	3,563.63	30,493.37	10	3,772.21
4420	Training Expenses	1,115.00	.00	.00	1,115.00	0	.00
4500	Supplies	2,000.00	38.43	38.43	1,961.57	2	.00
4570	Uniforms	1,300.00	.00	.00	1,300.00	0	.00
4710	Computer Hardware & Software	35,000.00	1,188.93	1,188.93	33,811.07	3	1,989.44
4715	Computer Maintenance	15,000.00	.00	.00	15,000.00	0	.00
4737	Maintainence of Radios	50,000.00	.00	.00	50,000.00	0	5,184.00
Sub-Department 62 - Emergency Communications Totals		\$710,489.00	\$51,108.02	\$51,108.02	\$659,380.98	7%	\$52,592.77
Department 12 - Sheriff Totals		\$3,741,738.00	\$289,762.03	\$289,762.03	\$3,451,975.97	8%	\$261,895.19
<b>Department 13 - Coroner</b>							
4100	Salaries- Departmental	158,555.00	13,212.94	13,212.94	145,342.06	8	12,852.38
4355	Autopsy Fees	28,084.00	5,151.90	5,151.90	22,932.10	18	799.36
4458	Coroner Lab Fees	6,180.00	500.00	500.00	5,680.00	8	360.00
4545.10	Petroleum Products - Gasoline	1,800.00	85.44	85.44	1,714.56	5	140.56
4755	Vehicle Purchase	3,936.00	.00	.00	3,936.00	0	.00
Department 13 - Coroner Totals		\$198,555.00	\$18,950.28	\$18,950.28	\$179,604.72	10%	\$14,152.30
<b>Department 14 - State's Attorney</b>							
4100	Salaries- Departmental	578,500.00	47,629.37	47,629.37	530,870.63	8	47,554.55
4107	Salaries-Victim Witness Advocate	39,000.00	3,175.00	3,175.00	35,825.00	8	3,154.84
4335	Expert Witnesses	1,000.00	.00	.00	1,000.00	0	.00
4340	IL Appellate Prosecutor	18,000.00	.00	.00	18,000.00	0	18,000.00
4415.10	Printing Appeals & Transcripts	1,500.00	.00	.00	1,500.00	0	.00
4422	Travel Expenses, Dues & Seminars	5,500.00	.00	.00	5,500.00	0	1,231.92
4510	Office Supplies	12,500.00	942.79	942.79	11,557.21	8	663.22
4538	Legal Materials & Books	14,500.00	.00	.00	14,500.00	0	.00

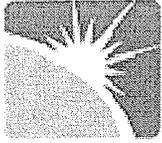


# General Fund Budget Performance

Fiscal Year to Date 12/31/15

Exclude Rollup Account

Account	Account Description	Adopted Budget	Current Month Transactions	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year YTD
4724	Office Equipment Maintenance	500.00	.00	.00	500.00	0	.00
Department 14 - State's Attorney Totals		\$671,000.00	\$51,747.16	\$51,747.16	\$619,252.84	8%	\$70,604.53
Department 15 - Insurance							
4155	Health Insurance	1,775,000.00	135,300.00	135,300.00	1,639,700.00	8	125,712.00
Department 15 - Insurance Totals		\$1,775,000.00	\$135,300.00	\$135,300.00	\$1,639,700.00	8%	\$125,712.00
Department 16 - Finance							
4100	Salaries- Departmental	85,000.00	7,581.28	7,581.28	77,418.72	9	7,223.08
4148	Administrative Hearing Officer	1,000.00	.00	.00	1,000.00	0	.00
4250.30	Agency Allotments Economic Development Dist. Dues	14,317.00	.00	.00	14,317.00	0	.00
4250.60	Agency Allotments NW IL Criminal Justice	3,000.00	.00	.00	3,000.00	0	.00
4312	Auditing	50,000.00	.00	.00	50,000.00	0	.00
4412	Official Publications	100.00	.00	.00	100.00	0	.00
4422	Travel Expenses, Dues & Seminars	25,000.00	3,549.49	3,549.49	21,450.51	14	3,168.12
4490	Contingencies	140,000.00	6,187.50	6,187.50	133,812.50	4	5,925.00
4510	Office Supplies	2,500.00	15.83	15.83	2,484.17	1	15.83
4740	Postage Meter & Rental	3,000.00	.00	.00	3,000.00	0	.00
4770.20	Capital Improvements - Ogle County Fair Assn	3,000.00	.00	.00	3,000.00	0	.00
Sub-Department 35 - Information Technology							
4100	Salaries- Departmental	60,000.00	5,147.57	5,147.57	54,852.43	9	4,434.20
4140	Holiday Pay	.00	58.63	58.63	(58.63)	+++	.00
4142	IT/ Network Administration	36,000.00	.00	.00	36,000.00	0	798.02
4155	Health Insurance	.00	1,518.00	1,518.00	(1,518.00)	+++	78.30
4211	Internet Service	.00	827.85	827.85	(827.85)	+++	.00
4710	Computer Hardware & Software	88,000.00	88.32	88.32	87,911.68	0	22.76
Sub-Department 35 - Information Technology Totals		\$184,000.00	\$7,640.37	\$7,640.37	\$176,359.63	4%	\$5,333.28
Department 16 - Finance Totals		\$510,917.00	\$24,974.47	\$24,974.47	\$485,942.53	5%	\$21,665.31
Department 22 - Corrections							
4100	Salaries- Departmental	1,355,336.00	108,639.22	108,639.22	1,246,696.78	8	106,317.67
4120	Part Time/ Extra Time	60,000.00	6,126.48	6,126.48	53,873.52	10	4,264.86
4130	Overtime	95,000.00	9,018.93	9,018.93	85,981.07	9	5,627.09
4140	Holiday Pay	45,000.00	7,421.07	7,421.07	37,578.93	16	7,969.59
4420	Training Expenses	10,000.00	.00	.00	10,000.00	0	.00
4424	Out-of-State Travel	5,500.00	403.20	403.20	5,096.80	7	.00
4444	Medical Expense	112,300.00	8,194.77	8,194.77	104,105.23	7	12,441.98
4446	Prisoner Mental Health	15,000.00	15,000.00	15,000.00	.00	100	15,000.00



# General Fund Budget Performance

Fiscal Year to Date 12/31/15

Exclude Rollup Account

Account	Account Description	Adopted Budget	Current Month Transactions	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year YTD
4510	Office Supplies	32,500.00	2,434.89	2,434.89	30,065.11	7	2,259.64
4545.10	Petroleum Products - Gasoline	4,000.00	348.64	348.64	3,651.36	9	245.50
4550	Food for County Prisoners	200,000.00	19,935.40	19,935.40	180,064.60	10	16,366.12
4570	Uniforms	7,000.00	707.75	707.75	6,292.25	10	386.95
4575	Weapons & Ammunition	1,200.00	.00	.00	1,200.00	0	.00
4585	Vehicle Maintenance	2,000.00	1,019.00	1,019.00	981.00	51	.00
4710	Computer Hardware & Software	1,000.00	.00	.00	1,000.00	0	.00
4715	Computer Maintenance	19,000.00	.00	.00	19,000.00	0	.00
4724	Office Equipment Maintenance	5,000.00	.00	.00	5,000.00	0	356.25
4737	Maintainence of Radios	500.00	.00	.00	500.00	0	.00
Department <b>22 - Corrections</b> Totals		\$1,970,336.00	\$179,249.35	\$179,249.35	\$1,791,086.65	9%	\$171,235.65
EXPENSE TOTALS		\$14,168,540.00	\$1,095,232.11	\$1,095,232.11	\$13,073,307.89	8%	\$1,072,403.50
Fund <b>100 - General Fund</b> Totals							
REVENUE TOTALS		14,177,550.00	1,293,606.25	1,293,606.25	12,883,943.75	9	535,105.21
EXPENSE TOTALS		14,168,540.00	1,095,232.11	1,095,232.11	13,073,307.89	8	1,072,403.50
Fund <b>100 - General Fund</b> Totals		\$9,010.00	\$198,374.14	\$198,374.14	(\$189,364.14)		(\$537,298.29)

**Bank Balances**

From Date: 12/1/2015 - To Date: 12/31/2015

Summary Listing, Report By Account - Fund

Account	Account Description	Beginning Balance	Total Debits	Total Credits	Ending Balance
1000.002	Cash AB - Solid Waste	\$1,253,066.05	\$29.75	\$1,222,436.84	\$30,658.96
1000.004	Cash AB - County Highway	\$829,784.90	\$241,270.81	\$160,705.09	\$910,350.62
1000.006	Cash AB - Treasurer	\$0.00	\$0.00	\$0.00	\$0.00
1000.010	Cash BB - Insurance Reserve	\$168,135.43	\$1,220.03	\$0.00	\$169,355.46
1000.011	Cash BB - Bond Fund	\$0.00	\$0.00	\$0.00	\$0.00
1000.012	Cash BB - Probation Service Fee	\$203,275.89	\$15,594.51	\$4,456.33	\$214,414.07
1000.014	Cash BB - County Bridge	\$539,386.01	\$83.71	\$42,252.94	\$497,216.78
1000.016	Cash BB - Document Storage	\$237,270.49	\$3,600.66	\$0.00	\$240,871.15
1000.018	Cash BB - Long Range Planning	\$2,900,267.66	\$484.69	\$67,000.04	\$2,833,752.31
1000.019	Cash BB - Vehicle Purchase	\$272,235.14	\$44.12	\$0.00	\$272,279.26
1000.020	Cash FSB - TB Checking	\$0.00	\$0.00	\$0.00	\$0.00
1000.022	Cash FSB - TB Money Market	\$0.00	\$0.00	\$0.00	\$0.00
1000.024	Cash FSB - 911	\$525,370.29	\$597,816.66	\$504,439.83	\$618,747.12
1000.030	Cash HSB - Federal Aid Matching	\$862,442.37	\$148,245.73	\$710,921.63	\$299,766.47
1000.034	Cash HSB - Solid Waste	\$0.00	\$0.00	\$0.00	\$0.00
1000.038	Cash Illinois Funds - Treasurer	\$8,707.58	\$0.79	\$0.00	\$8,708.37
1000.040	Cash NBR - Treasurer	\$2,955,731.16	\$1,847,033.86	\$2,599,521.93	\$2,203,243.09
1000.042	Cash NBR - Township MFT	\$554,283.64	\$527,873.74	\$2,375.69	\$1,079,781.69
1000.044	Cash NBR - Engineering	\$55,218.32	\$4.23	\$0.00	\$55,222.55
1000.046	Cash NBR - Vital Records	\$61,302.71	\$878.08	\$0.00	\$62,180.79
1000.048	Cash NBR - GIS Fee Fund	\$37,825.37	\$7,650.73	\$6,550.91	\$38,925.19
1000.050	Cash NBR - Marriage Fund	\$3,357.94	\$70.57	\$0.00	\$3,428.51
1000.055	Cash Polo - Dependent Children's	\$135,717.69	\$36,645.17	\$4,056.11	\$168,306.75
1000.057	Cash GermanAmer - Solid Waste	\$502,549.53	\$145.55	\$400,000.00	\$102,695.08
1000.058	Cash GermanAmer-Highway	\$151,437.31	\$45.02	\$0.00	\$151,482.33
1000.060	Cash RRB - Animal Control	\$217,204.30	\$17,258.60	\$14,333.42	\$220,129.48

**Bank Balances**

From Date: 12/1/2015 - To Date: 12/31/2015

Summary Listing, Report By Account - Fund

Account	Account Description	Beginning Balance	Total Debits	Total Credits	Ending Balance
1000.062	Cash RRB - Public Health	\$88,810.22	\$90,625.26	\$65,257.79	\$114,177.69
1000.064	Cash RRB - Payroll Clearing	\$0.00	\$1,374,790.63	\$1,374,790.63	\$0.00
1000.066	Cash RRB - County MFT	\$194,724.21	\$400,098.82	\$387,073.97	\$207,749.06
1000.067	Cash RRB - Child Support & Maint	\$18,471.86	\$0.00	\$0.00	\$18,471.86
1000.068	Cash RRB - GIS Committee Fund	\$184,157.29	\$7,927.50	\$10,677.56	\$181,407.23
1000.069	Cash RRB - Circuit Clerk Ops & Admin	\$16,285.31	\$601.75	\$947.23	\$15,939.83
1000.070	Cash RRB - County Orders	\$0.00	\$1,088,723.25	\$1,088,723.25	\$0.00
1000.072	Cash RRB - A/P Clearing	\$0.00	\$1,764,227.07	\$1,764,227.07	\$0.00
1000.074	Cash RRB - County Indemnity	\$25,616.31	\$133,672.80	\$0.00	\$159,289.11
1000.076	Cash RRB - Social Security	\$575,880.54	\$117.45	\$67,479.10	\$508,518.89
1000.077	Cash RRB - IFiber	\$111,230.52	\$21.73	\$0.00	\$111,252.25
1000.078	Cash RRB - Treasurer	\$458,631.28	\$12,274.76	\$394.10	\$470,511.94
1000.080	Cash SV - Mental Health	\$455,169.77	\$52.05	\$61,289.68	\$393,932.14
1000.082	Cash SV - Township Bridge	\$224,851.01	\$13.36	\$0.00	\$224,864.37
1000.084	Cash SV - IMRF	\$1,102,353.11	\$208,656.77	\$748,724.43	\$562,285.45
1000.086	Cash SV - County Automation	\$195,156.73	\$4,008.42	\$1,882.74	\$197,282.41
1000.088	Cash SV - Recorder's Resolution	\$140,122.00	\$2,289.04	\$127.85	\$142,283.19
1000.090	Cash SV- Health Claims	\$0.00	\$299,545.88	\$299,545.88	\$0.00
1000.091	Cash SV - Flex Spending	\$6,145.26	\$3,210.67	\$1,324.68	\$8,031.25
1000.099	Cash Treasurer's Cash	\$1,909.63	\$0.00	\$0.00	\$1,909.63
1002.002	Investments RRB Insurance Reserve	\$0.00	\$0.00	\$0.00	\$0.00
1002.004	Investments Insurance Reserve	\$0.00	\$0.00	\$0.00	\$0.00
1002.006	Investments RRB County MFT	\$0.00	\$0.00	\$0.00	\$0.00
1002.007	Investments SV Township Bridge	\$0.00	\$0.00	\$0.00	\$0.00
1002.008	Investments HSB -FAM	\$180,000.00	\$250,000.00	\$180,000.00	\$250,000.00
1002.009	Investments BB -Thorpe Road Overpass	\$369,363.51	\$0.00	\$0.00	\$369,363.51

**Bank Balances**

From Date: 12/1/2015 - To Date: 12/31/2015

Summary Listing, Report By Account - Fund

Account	Account Description	Beginning Balance	Total Debits	Total Credits	Ending Balance
1002.010	Investments NBR Township MFT	\$0.00	\$0.00	\$0.00	\$0.00
1002.012	Investments NBR Engineering	\$0.00	\$0.00	\$0.00	\$0.00
1002.013	Investments RRB- GIS Committee	\$300,000.00	\$0.00	\$0.00	\$300,000.00
1002.014	Investments Storm Water Management	\$61,247.14	\$92.12	\$0.00	\$61,339.26
1002.015	Investments NBR - FAM	\$0.00	\$0.00	\$0.00	\$0.00
1002.016	Investments FSB -911	\$0.00	\$0.00	\$0.00	\$0.00
1002.017	Investments Polo - 911	\$0.00	\$0.00	\$0.00	\$0.00
1002.018	Investments RRB -911	\$1,166,769.85	\$0.00	\$0.00	\$1,166,769.85
1002.019	Investments SV- 911	\$1,441,068.79	\$0.00	\$0.00	\$1,441,068.79
1002.020	Investments RRB Indemnity	\$298,145.76	\$0.00	\$127,116.48	\$171,029.28
1002.021	Investments FSB-Solid Waste	\$0.00	\$0.00	\$0.00	\$0.00
1002.022	Investments HSB Solid Waste	\$0.00	\$0.00	\$0.00	\$0.00
1002.024	Investments LSB Solid Waste	\$1,243,974.52	\$0.00	\$0.00	\$1,243,974.52
1002.026	Investments NBB Solid Waste	\$928,793.34	\$0.00	\$0.00	\$928,793.34
1002.027	Investments Polo - Solid Waste	\$0.00	\$0.00	\$0.00	\$0.00
1002.028	Investments HSB Long Range Capital Imp	\$0.00	\$0.00	\$0.00	\$0.00
1002.029	Investments FSB - Long Range Capital Improve	\$0.00	\$0.00	\$0.00	\$0.00
1002.030	Investments Long Range Capital Imp	\$0.00	\$0.00	\$0.00	\$0.00
1002.031	Investments NBR County General	\$0.00	\$0.00	\$0.00	\$0.00
1002.032	Investments BB Long Range Capital Imp	\$0.00	\$0.00	\$0.00	\$0.00
1002.033	Investments SV - Long Range Capital	\$0.00	\$0.00	\$0.00	\$0.00
1002.034	Investments TB	\$0.00	\$0.00	\$0.00	\$0.00
1002.036	Investments Public Health	\$0.00	\$0.00	\$0.00	\$0.00
1002.038	Investments FSB Treasurer	\$0.00	\$0.00	\$0.00	\$0.00
1002.040	Investments Polo Treasurer	\$0.00	\$0.00	\$0.00	\$0.00
1002.042	Investments HSB - Treasurer	\$0.00	\$0.00	\$0.00	\$0.00

# Bank Balances

From Date: 12/1/2015 - To Date: 12/31/2015

Summary Listing, Report By Account - Fund

Account	Account Description	Beginning Balance	Total Debits	Total Credits	Ending Balance
1002.043	Investments RRB - Treasurer	\$0.00	\$0.00	\$0.00	\$0.00
1002.049	Investments SF- GIS Committee	\$0.00	\$0.00	\$0.00	\$0.00
1002.068	Investments Polo - Long Range Capital	\$0.00	\$0.00	\$0.00	\$0.00
1002.069	Investments NBR- Long Range Capital	\$0.00	\$0.00	\$0.00	\$0.00
1002.079	Investments BB- Bond Fund	\$0.00	\$0.00	\$0.00	\$0.00
1004	Postage	\$4,708.95	\$5,000.00	\$0.00	\$9,708.95
1010	Municipal Bond	\$0.00	\$0.00	\$0.00	\$0.00
1100	Accounts Receivable	\$0.00	\$0.00	\$0.00	\$0.00
1101	Due From	\$0.00	\$3,138,789.46	\$3,138,789.46	\$0.00
Grand Total: 87 Accounts		\$22,268,156.69	\$12,230,735.80	\$15,057,422.66	\$19,441,469.83

**Fund Balances**

From Date: 12/1/2015 - To Date: 12/31/2015

Summary Listing, Report By Fund - Account

Fund	Description	Paying Fund	Paying Fund Description	Beginning Balance	Total Debits	Total Credits	Ending Balance
100	General Fund	100	General Fund	\$242,903.13	\$2,419,157.88	\$2,212,070.22	\$449,990.79
120	AP Clearing	120	AP Clearing	\$0.00	\$3,528,454.14	\$3,528,454.14	\$0.00
130	County Payroll Clearing	130	County Payroll Clearing	\$0.00	\$2,749,353.02	\$2,749,353.02	\$0.00
140	County OfficersFund	120	AP Clearing	\$738,034.39	\$206,444.85	\$750,000.00	\$194,479.24
150	Social Security	120	AP Clearing	\$575,880.54	\$117.45	\$67,479.10	\$508,518.89
160	IMRF	120	AP Clearing	\$1,102,353.11	\$208,656.77	\$748,724.43	\$562,285.45
170	Capital Improvement Fund	120	AP Clearing	\$0.00	\$0.00	\$0.00	\$0.00
180	Long Range Capital Improvemnt	120	AP Clearing	\$2,908,975.24	\$485.48	\$67,000.04	\$2,842,460.68
181	IFiber	120	AP Clearing	\$111,230.52	\$21.73	\$0.00	\$111,252.25
184	Revolving Vehicle Purchase Fund	120	AP Clearing	\$272,235.14	\$44.12	\$0.00	\$272,279.26
185	Bond Fund	120	AP Clearing	\$0.00	\$0.00	\$0.00	\$0.00
200	County Highway	120	AP Clearing	\$981,222.21	\$241,315.83	\$160,705.09	\$1,061,832.95
210	County Bridge Fund	120	AP Clearing	\$539,386.01	\$83.71	\$42,252.94	\$497,216.78
212	Thorpe Road Overpass	120	AP Clearing	\$369,363.51	\$0.00	\$0.00	\$369,363.51
220	County Motor Fuel Tax Fund	120	AP Clearing	\$194,724.21	\$400,098.82	\$387,073.97	\$207,749.06
230	County Highway Engineering	120	AP Clearing	\$55,218.32	\$4.23	\$0.00	\$55,222.55
240	Federal Aid Matching	120	AP Clearing	\$1,042,442.37	\$398,245.73	\$890,921.63	\$549,766.47
250	Township Roads - Motor Fuel Tax	120	AP Clearing	\$554,283.64	\$527,873.74	\$2,375.69	\$1,079,781.69
260	Township Bridge Fund	120	AP Clearing	\$224,851.01	\$13.36	\$0.00	\$224,864.37
270	GIS Committee Fund	120	AP Clearing	\$484,157.29	\$7,927.50	\$10,677.56	\$481,407.23
280	Storm Water Management	120	AP Clearing	\$61,247.14	\$92.12	\$0.00	\$61,339.26
300	Insurance - Hospital & Medical	120	AP Clearing	\$1,035,258.75	\$564,012.76	\$602,259.00	\$997,012.51
310	Insurance Premium Levy	120	AP Clearing	\$806,261.90	\$0.00	\$319,092.04	\$487,169.86
320	Self Insurance Reserve	120	AP Clearing	\$168,135.43	\$1,220.03	\$0.00	\$169,355.46
350	County Ordinance	120	AP Clearing	\$27,523.85	\$2,730.00	\$4,393.98	\$25,859.87
360	Marriage Fund	120	AP Clearing	\$3,357.94	\$70.57	\$0.00	\$3,428.51

**Fund Balances**

From Date: 12/1/2015 - To Date: 12/31/2015

Summary Listing, Report By Fund - Account

Fund	Description	Paying Fund	Paying Fund Description	Beginning Balance	Total Debits	Total Credits	Ending Balance
370	Law Library	120	AP Clearing	\$3,486.29	\$1,656.00	\$2,537.00	\$2,605.29
400	Public Health	120	AP Clearing	\$53,188.46	\$90,915.46	\$63,485.47	\$80,618.45
410	TB Fund	120	AP Clearing	\$35,621.76	\$103.90	\$2,166.42	\$33,559.24
420	Animal Control	120	AP Clearing	\$212,908.96	\$15,112.60	\$13,426.92	\$214,594.64
425	Pet Population Control	120	AP Clearing	\$4,295.34	\$2,146.00	\$906.50	\$5,534.84
430	Solid Waste	120	AP Clearing	\$3,928,383.44	\$175.30	\$1,622,436.84	\$2,306,121.90
450	Inheritance Tax Fund	120	AP Clearing	\$0.00	\$0.00	\$0.00	\$0.00
455	Trust Deposits	120	AP Clearing	\$10,051.46	\$1,286.55	\$0.00	\$11,338.01
460	Condemnation Fund	120	AP Clearing	\$82,000.00	\$0.00	\$82,000.00	\$0.00
465	Hotel/ MotelTax	120	AP Clearing	\$11,722.10	\$2,824.16	\$0.00	\$14,546.26
470	Cooperative Extension Service	120	AP Clearing	\$139,020.83	\$0.00	\$0.00	\$139,020.83
475	Mental Health	120	AP Clearing	\$455,169.77	\$52.05	\$61,289.68	\$393,932.14
480	Senior Social Services	120	AP Clearing	\$1,524.65	\$0.00	\$0.00	\$1,524.65
485	War Veterans Assisstance	120	AP Clearing	\$0.00	\$0.00	\$0.00	\$0.00
500	Recorder's Automation	120	AP Clearing	\$140,122.00	\$2,289.04	\$127.85	\$142,283.19
510	GIS Fee Fund	120	AP Clearing	\$37,825.37	\$7,650.73	\$6,550.91	\$38,925.19
520	Recorder's GIS Fund	120	AP Clearing	\$57,597.63	\$557.00	\$0.00	\$58,154.63
530	Vital Records	120	AP Clearing	\$3,705.08	\$321.08	\$0.00	\$4,026.16
550	Document Storage Fee Fund	120	AP Clearing	\$237,270.49	\$3,600.66	\$0.00	\$240,871.15
552	Child Support & Maint	120	AP Clearing	\$18,471.86	\$0.00	\$0.00	\$18,471.86
553	E - Citiation Circuit Clerk	120	AP Clearing	\$12,946.20	\$406.80	\$0.00	\$13,353.00
554	Circuit Clerk Ops & Admin	120	AP Clearing	\$16,285.31	\$601.75	\$947.23	\$15,939.83
555	County Automation -Circuit Clerk	120	AP Clearing	\$182,210.53	\$3,601.62	\$1,882.74	\$183,929.41
560	Dependent Children	120	AP Clearing	\$125,731.80	\$36,064.72	\$4,056.11	\$157,740.41
565	Dependant Children Medicaid	120	AP Clearing	\$0.00	\$0.00	\$0.00	\$0.00
570	Probation Services	120	AP Clearing	\$190,993.10	\$14,889.66	\$4,456.33	\$201,426.43

**Fund Balances**

From Date: 12/1/2015 - To Date: 12/31/2015

Summary Listing, Report By Fund - Account

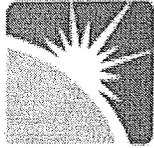
Fund	Description	Paying Fund	Paying Fund Description	Beginning Balance	Total Debits	Total Credits	Ending Balance
571	Drug Court	120	AP Clearing	\$17,819.28	\$704.85	\$0.00	\$18,524.13
572	Victim Impact	120	AP Clearing	\$1,264.89	\$270.00	\$0.00	\$1,534.89
575	Juvenile Restitution Fund	120	AP Clearing	\$0.00	\$0.00	\$0.00	\$0.00
580	Alts to Detention IPCSA/IJJ	120	AP Clearing	\$0.00	\$0.00	\$0.00	\$0.00
590	ICJIC Probation Grant 500053	120	AP Clearing	\$0.00	\$0.00	\$0.00	\$0.00
595	Juvenile Diversion	120	AP Clearing	\$9,985.89	\$580.45	\$0.00	\$10,566.34
600	Drug Assistance Forfeiture	120	AP Clearing	\$33,926.78	\$0.00	\$0.00	\$33,926.78
602	State's Attorney Automation	120	AP Clearing	\$7,615.00	\$235.00	\$0.00	\$7,850.00
605	Bad Check Restitution	120	AP Clearing	\$6,380.57	\$0.00	\$0.00	\$6,380.57
610	OEMA	120	AP Clearing	\$62,141.59	\$8,863.65	\$831.68	\$70,173.56
611	EOC	120	AP Clearing	\$8,298.37	\$0.00	\$5.97	\$8,292.40
612	E - Citation Sheriff	120	AP Clearing	\$3,668.60	\$109.20	\$0.00	\$3,777.80
615	Take Bond Fee	120	AP Clearing	\$0.00	\$0.00	\$0.00	\$0.00
620	Sheriff's Petty Cash	120	AP Clearing	\$27,316.76	\$0.00	\$0.00	\$27,316.76
625	DUI Equipment	120	AP Clearing	\$19,007.22	\$1,435.00	\$1,336.33	\$19,105.89
630	Arrestee's Medical Cost	120	AP Clearing	\$40,688.67	\$628.52	\$0.00	\$41,317.19
632	Sex Offender Registration	120	AP Clearing	\$9,908.39	\$600.00	\$455.00	\$10,053.39
634	Administrative Tow Fund	120	AP Clearing	\$41,278.46	\$38,828.38	\$13,742.28	\$66,364.56
635	Drug Traffic Prevention	120	AP Clearing	\$26,984.07	\$97.50	\$0.00	\$27,081.57
640	911 Emergency	120	AP Clearing	\$1,217,323.32	\$597,816.66	\$48,504.48	\$1,766,635.50
644	911 Next Generation	120	AP Clearing	\$1,003,816.81	\$0.00	\$69,979.42	\$933,837.39
645	911 Wireless	120	AP Clearing	\$912,068.80	\$0.00	\$385,955.93	\$526,112.87
650	Out of County Medical	120	AP Clearing	\$6,345.80	\$0.00	\$0.00	\$6,345.80
660	Federal/ State Grants	120	AP Clearing	\$5,606.23	\$270.00	\$0.00	\$5,876.23
665	Fed/State Reimb/Overtime	120	AP Clearing	\$0.00	\$1,106.87	\$0.00	\$1,106.87
700	Tax Sale Automation	120	AP Clearing	\$18,586.93	\$4,438.00	\$0.00	\$23,024.93

# Fund Balances

From Date: 12/1/2015 - To Date: 12/31/2015

Summary Listing, Report By Fund - Account

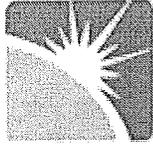
Fund	Description	Paying Fund	Paying Fund Description	Beginning Balance	Total Debits	Total Credits	Ending Balance
710	Indemnity Cost Fund	120	AP Clearing	\$323,762.07	\$133,672.80	\$127,116.48	\$330,318.39
725	Coroner's Fee Fund	120	AP Clearing	\$4,784.11	\$400.00	\$392.24	\$4,791.87
Grand Total: 80 Funds				\$22,268,156.69	\$12,230,735.80	\$15,057,422.66	\$19,441,469.83



# Fund Payments

G/L Date Range 12/01/15 - 12/31/15

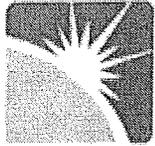
Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 180 - Long Range Capital Improvemnt</b>										
Account 2002 - Due To										
1223 - EHMEN INDUSTRIES	42800	REPAIR OF WATER SERVICE DAMAGED DURING SOIL REMOVAL	Paid by Check # 93397		12/15/2015	12/15/2015	12/15/2015		12/15/2015	(385.00)
4904 - N-TRAK GROUP	11-2015/15021.00	DEMOLITION OF SHERIFF'S BUILDING - 11/10/2015 TO 11/30/2015	Paid by Check # 93398		12/15/2015	12/15/2015	12/15/2015		12/15/2015	(55,008.72)
4561 - SAAVEDRA GEHLHAUSEN ARCHITECTS	INV.005/15021.00	PROFESSIONAL SERVICES FOR NOVEMBER 2015	Paid by Check # 93399		12/15/2015	12/15/2015	12/15/2015		12/15/2015	(5,290.00)
4740 - SYNDEO NETWORKS, INC.	4087	NETWORK SWITCHES FOR COUNTY NETWORK	Paid by Check # 93400		12/15/2015	12/15/2015	12/15/2015		12/15/2015	(5,804.79)
							Account 2002 - Due To Totals		Invoice Transactions 4	(\$66,488.51)
							Fund 180 - Long Range Capital Improvemnt Totals		Invoice Transactions 4	(\$66,488.51)
<b>Fund 200 - County Highway</b>										
Account 2002 - Due To										
1100 - BONNELL INDUSTRIES INC.	0164711-IN	CH Fund - truck part	Paid by Check # 93279		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(329.12)
1100 - BONNELL INDUSTRIES INC.	0165391-IN	CH Fund - snow plow blades	Paid by Check # 93279		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(8,739.50)
1846 - BUSINESS CARD	1540092	CH Fund - gas	Paid by Check # 93280		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(68.56)
3260 - LAURENCE G. CALLANT	9592240	CH Fund - computer laptop	Paid by Check # 93281		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(689.00)
1140 - CITY OF OREGON	OREHWY1512	CH Fund - disposal service	Paid by Check # 93282		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(41.46)
1373 - CLASS C SOLUTIONS GROUP	7982132001	CH Fund - truck parts	Paid by Check # 93283		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(434.76)
4606 - PEGGY S. CORCORAN	11302015	CH Fund - janitorial service Nov 2015	Paid by Check # 93285		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(800.00)
1873 - GRAINGER	9900562738	CH Fund - floor drill press	Paid by Check # 93287		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(969.30)
4188 - LAKESIDE INTERNATIONAL, LLC	7082057	CH Fund - truck labor & parts	Paid by Check # 93288		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(1,470.43)
2138 - MONROE TRUCK EQUIPMENT INC	5309913	CH Fund - truck parts	Paid by Check # 93289		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(557.64)
1557 - PRO COM SYSTEMS	616556	CH Fund - 2016 fire alarm monitoring fee	Paid by Check # 93290		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(590.00)
1568 - RK DIXON	1411816	CH Fund - copier maint agreement	Paid by Check # 93291		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(272.13)
1876 - ROCHELLE WASTE DISPOSAL, LLC	14919365	CH Fund - deer expense	Paid by Check # 93292		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(45.00)



# Fund Payments

G/L Date Range 12/01/15 - 12/31/15

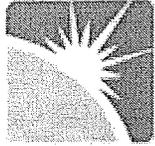
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<b>Fund 200 - County Highway</b>										
<b>Account 2002 - Due To</b>										
4156 - WINTER EQUIPMENT COMPANY, INC.	IV28216	CH Fund - snow plow blades	Paid by Check # 93295		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(2,108.98)
1047 - ACE HARDWARE AND OUTDOOR CTR	400063	CH Fund - shop supplies	Paid by Check # 93403		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(56.97)
1047 - ACE HARDWARE AND OUTDOOR CTR	401082	CH Fund - shop supplies	Paid by Check # 93403		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(9.00)
1047 - ACE HARDWARE AND OUTDOOR CTR	401390	CH Fund - shop supplies	Paid by Check # 93403		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(43.11)
1047 - ACE HARDWARE AND OUTDOOR CTR	402137	CH Fund - shop supplies	Paid by Check # 93403		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(18.47)
1047 - ACE HARDWARE AND OUTDOOR CTR	403660	CH Fund - shop supplies	Paid by Check # 93403		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(142.52)
4667 - AIRGAS USA, LLC	9932122112	CH Fund - shop supplies	Paid by Check # 93404		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(67.10)
4445 - BIG R	6187	CH Fund - shop supplies	Paid by Check # 93405		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(19.96)
2176 - CCP INDUSTRIES, INC.	IN01595721	CH Fund - shop supplies	Paid by Check # 93406		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(340.00)
1373 - CLASS C SOLUTIONS GROUP	8017562001	CH Fund - shop supplies	Paid by Check # 93407		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(149.10)
1156 - COMED	COMHWY1512c	CH Fund - street & traffic lighting	Paid by Check # 93408		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(40.42)
2275 - EAGLE CREEK QUARRIES	1896	CH Fund - road rock	Paid by Check # 93409		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(2,599.65)
2251 - GOODYEAR COMMERCIAL TIRE	146-1076357	CH Fund - truck tires	Paid by Check # 93410		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(2,259.16)
1873 - GRAINGER	9905433190	CH Fund - truck parts	Paid by Check # 93411		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(282.16)
1873 - GRAINGER	9905433182	CH Fund - truck parts	Paid by Check # 93411		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(197.92)
1878 - HEAVY EQUIPMENT SERVICES, INC.	C99284	CH Fund - truck parts & labor	Paid by Check # 93412		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(7,525.85)
1871 - HOWARD LEE & SONS INC	53020	CH Fund - fuel tank line test	Paid by Check # 93413		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(400.00)
4842 - INTERSTATE BATTERIES OF ROCKFORD	400436782	CH Fund - truck battery	Paid by Check # 93414		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(52.95)
4842 - INTERSTATE BATTERIES OF ROCKFORD	500511571	CH Fund - truck battery	Paid by Check # 93414		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(147.95)
4842 - INTERSTATE BATTERIES OF ROCKFORD	100245906	CH Fund - credit - battery	Paid by Check # 93414		12/14/2015	12/14/2015	12/15/2015		12/15/2015	15.00
4842 - INTERSTATE BATTERIES OF ROCKFORD	100246390	CH Fund - battery	Paid by Check # 93414		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(100.95)
4842 - INTERSTATE BATTERIES OF ROCKFORD	50011802	CH Fund - batteries	Paid by Check # 93414		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(413.90)



# Fund Payments

G/L Date Range 12/01/15 - 12/31/15

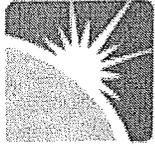
Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 200 - County Highway</b>										
<b>Account 2002 - Due To</b>										
4842 - INTERSTATE BATTERIES OF ROCKFORD	300362408	CH Fund - battery	Paid by Check # 93414		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(69.95)
1924 - KELLEY WILLIAMSON COMPANY	IN-118041	CH Fund - oil	Paid by Check # 93415		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(3,104.50)
1924 - KELLEY WILLIAMSON COMPANY	IN-117423	CH Fund - gas	Paid by Check # 93415		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(1,527.91)
1924 - KELLEY WILLIAMSON COMPANY	IN-117482	CH Fund - diesel	Paid by Check # 93415		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(9,445.66)
4188 - LAKESIDE INTERNATIONAL, LLC	7069500P	CH Fund - truck parts	Paid by Check # 93416		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(364.17)
4188 - LAKESIDE INTERNATIONAL, LLC	7069570P	CH Fund - truck parts	Paid by Check # 93416		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(236.54)
4188 - LAKESIDE INTERNATIONAL, LLC	7070405P	CH Fund - truck part	Paid by Check # 93416		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(44.58)
4188 - LAKESIDE INTERNATIONAL, LLC	7070720P	CH Fund - truck parts	Paid by Check # 93416		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(1,475.90)
4188 - LAKESIDE INTERNATIONAL, LLC	7070798P	CH Fund - truck parts	Paid by Check # 93416		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(460.72)
4188 - LAKESIDE INTERNATIONAL, LLC	7070798PX1	CH Fund - truck parts	Paid by Check # 93416		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(406.90)
1434 - MENARDS	13882	CH Fund - shop supplies	Paid by Check # 93418		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(92.91)
1434 - MENARDS	16013	CH Fund - shop supplies	Paid by Check # 93417		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(74.35)
1463 - NAPA AUTO PARTS	464-737789	CH Fund - truck part	Paid by Check # 93419		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(13.60)
1463 - NAPA AUTO PARTS	464-737896	CH Fund - truck parts	Paid by Check # 93419		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(50.34)
1463 - NAPA AUTO PARTS	464-738176	CH Fund - truck parts	Paid by Check # 93419		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(124.31)
1463 - NAPA AUTO PARTS	464-738192	CH Fund - credit - truck parts	Paid by Check # 93419		12/14/2015	12/14/2015	12/15/2015		12/15/2015	119.68
1463 - NAPA AUTO PARTS	464-739194	CH fund - truck part	Paid by Check # 93419		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(8.76)
1463 - NAPA AUTO PARTS	464-739448	CH Fund - truck part	Paid by Check # 93419		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(9.92)
1463 - NAPA AUTO PARTS	464-739614	CH Fund - truck parts	Paid by Check # 93419		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(41.18)
1463 - NAPA AUTO PARTS	464-739979	CH Fund - truck parts	Paid by Check # 93419		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(72.94)
1463 - NAPA AUTO PARTS	464-740247	CH Fund - truck parts	Paid by Check # 93419		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(106.28)
1898 - NICOR	NICHWY1512	CH Fund - monthly usage	Paid by Check # 93420		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(573.20)



# Fund Payments

G/L Date Range 12/01/15 - 12/31/15

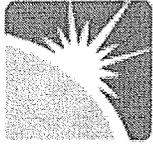
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<b>Fund 200 - County Highway</b>										
<b>Account 2002 - Due To</b>										
1502 - OGLE COUNTY LIFE	393976	CH Fund - legal notice	Paid by Check		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(59.50)
			# 93421							
1502 - OGLE COUNTY LIFE	394388	CH Fund - legal notice	Paid by Check		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(59.50)
			# 93421							
1502 - OGLE COUNTY LIFE	394789	CH Fund - legal notice	Paid by Check		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(59.50)
			# 93421							
1865 - POMP'S TIRE SERVICE, INC.	260033723	CH Fund - service call /repair tire	Paid by Check		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(360.00)
			# 93422							
1865 - POMP'S TIRE SERVICE, INC.	0260027311	CH fund - credit - tires	Paid by Check		12/14/2015	12/14/2015	12/15/2015		12/15/2015	235.00
			# 93422							
1865 - POMP'S TIRE SERVICE, INC.	0260033437	CH Fund - tires	Paid by Check		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(2,457.50)
			# 93422							
2073 - R. J. BOWERS DISTRIBUTORS, INC.	0284592	CH Fund - pressure washer parts & supplies	Paid by Check		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(586.60)
			# 93423							
1597 - RAYNOR DOOR AUTHORITY INC	114745	CH Fund - shop door transmitters	Paid by Check		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(396.00)
			# 93424							
1849 - ROCHELLE MUNICIPAL UTILITIES	ROCHWY1512b	CH Fund - street & traffic lighting	Paid by Check		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(7.65)
			# 93425							
1849 - ROCHELLE MUNICIPAL UTILITIES	ROCHWY1512a	CH Fund - street & traffic lighting	Paid by Check		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(86.58)
			# 93425							
1876 - ROCHELLE WASTE DISPOSAL, LLC	14987456	CH Fund - deer expense	Paid by Check		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(45.00)
			# 93426							
1963 - SICALCO, LTD.	64622	CH Fund - calcium chloride	Paid by Check		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(1,296.00)
			# 93427							
1676 - TERMINAL SUPPLY CO	69343.00	CH Fund - truck parts	Paid by Check		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(187.84)
			# 93428							
3932 - TRACTOR SUPPLY CO.	200200982	CH Fund - shop supplies	Paid by Check		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(102.94)
			# 93429							
2027 - TRANSAM TRUCK & TRAILER PARTS, INC.	734459	CH Fund - truck parts	Paid by Check		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(73.40)
			# 93430							
3387 - TROXLER ELECTRONIC LABORATORIES, INC.	INV47232	CH Fund - nuke gauge supplies	Paid by Check		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(122.38)
			# 93431							
1869 - WEST SIDE TRACTOR SALES	R62914	CH Fund - heavy equipment parts	Paid by Check		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(213.20)
			# 93432							
1100 - BONNELL INDUSTRIES INC.	0165998-IN	CH Fund - spinner parts	Paid by Check		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(211.00)
			# 93444							
1100 - BONNELL INDUSTRIES INC.	0165842-IN	CH Fund - spreader parts	Paid by Check		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(626.07)
			# 93444							
1100 - BONNELL INDUSTRIES INC.	0166015-IN	CH Fund - auger parts	Paid by Check		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(253.84)
			# 93444							
1846 - BUSINESS CARD	79491	CH Fund - office supplies	Paid by Check		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(147.19)
			# 93445							
1846 - BUSINESS CARD	82040	CH Fund - THE Conference registration fee	Paid by Check		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(120.00)
			# 93445							



# Fund Payments

G/L Date Range 12/01/15 - 12/31/15

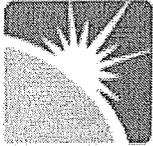
Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 200 - County Highway</b>										
<b>Account 2002 - Due To</b>										
1373 - CLASS C SOLUTIONS GROUP	8048284001	CH Fund - truck parts	Paid by Check # 93446		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(152.13)
1156 - COMED	COMHWY1512b	CH Fund - monthly usage	Paid by Check # 93447		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(312.62)
1156 - COMED	COMHWY1512a	CH Fund - street & traffic lighting	Paid by Check # 93447		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(41.01)
1941 - FRONTIER	FROHWY1512	CH Fund - monthly usage	Paid by Check # 93448		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(74.79)
2503 - G4S SECURE INTEGRATION LLC	21351	CH Fund - julie locates	Paid by Check # 93449		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(315.56)
1873 - GRAINGER	991358392	CH Fund - shop supplies	Paid by Check # 93450		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(58.46)
2227 - ILLINOIS ASSOCIATION OF COUNTY ENGINEERS	01104708	CH Fund - 2016 IACE membership dues/Curtis	Paid by Check # 93451		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(890.51)
2050 - LAWSON PRODUCTS, INC.	9303756702	CH Fund - truck parts	Paid by Check # 93452		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(438.83)
2647 - MARTIN AND COMPANY EXCAVATING	24187	CH Fund - road rock	Paid by Check # 93453		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(382.23)
2647 - MARTIN AND COMPANY EXCAVATING	24206	CH Fund - road rock	Paid by Check # 93453		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(874.88)
1434 - MENARDS	14628	CH Fund - shop supplies	Paid by Check # 93456		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(3.78)
1434 - MENARDS	17284	CH Fund - shop supplies	Paid by Check # 93455		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(12.14)
3039 - NORTHERN CONTRACTING, INC.	6168	CH Fund - guardrail repairs	Paid by Check # 93457		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(746.61)
4440 - NORTHERN ILLINOIS DISPOSAL SERVICES, INC.	14987787	CH Fund - dumpster service	Paid by Check # 93458		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(120.00)
4550 - PREVENTATIVE MAINTENANCE SYSTEMS, INC.	4827	CH Fund - truck test	Paid by Check # 93460		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(78.00)
4550 - PREVENTATIVE MAINTENANCE SYSTEMS, INC.	4851	CH Fund - truck test	Paid by Check # 93460		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(30.50)
4550 - PREVENTATIVE MAINTENANCE SYSTEMS, INC.	4909	CH Fund - truck test	Paid by Check # 93460		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(52.00)
4550 - PREVENTATIVE MAINTENANCE SYSTEMS, INC.	4962	CH Fund - truck test	Paid by Check # 93460		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(30.50)
4550 - PREVENTATIVE MAINTENANCE SYSTEMS, INC.	4999	CH Fund - truck test	Paid by Check # 93460		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(46.00)
4550 - PREVENTATIVE MAINTENANCE SYSTEMS, INC.	5019	CH Fund - truck test	Paid by Check # 93460		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(46.00)
1876 - ROCHELLE WASTE DISPOSAL, LLC	14988794	CH Fund - deer expense	Paid by Check # 93461		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(75.00)
2051 - ROCK CUT QUARRIES	4081	CH Fund - road rock	Paid by Check # 93462		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(1,878.10)



# Fund Payments

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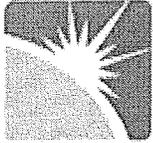
Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 200 - County Highway</b>										
Account 2002 - Due To										
1606 - ROGERS READY MIX	179525	CH Fund - road rock	Paid by Check # 93463		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(40.52)
1963 - SICALCO, LTD.	64648	CH Fund - calcium chloride	Paid by Check # 93464		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(3,373.92)
1657 - STEVE BENESH & SONS QUARRIES	11438	CH Fund - ice abrasives	Paid by Check # 93465		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(5,317.17)
1265 - VERIZON	9756798734	CH Fund - monthly usage	Paid by Check # 93466		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(179.40)
3613 - WAGNER AGGREGATE, INC.	16834	CH Fund - road rock	Paid by Check # 93467		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(138.01)
							Account 2002 - Due To Totals	Invoice Transactions	106	<u>(73,098.32)</u>
							Fund 200 - County Highway Totals	Invoice Transactions	106	<u>(73,098.32)</u>
<b>Fund 210 - County Bridge Fund</b>										
Account 2002 - Due To										
1965 - WILLETT, HOFMANN & ASSOCIATES, INC.	21659	CAB Fund - 14-13115-00-BR engr services	Paid by Check # 93294		12/02/2015	12/03/2015	12/04/2015		12/04/2015	(8,749.00)
1965 - WILLETT, HOFMANN & ASSOCIATES, INC.	21658	CAB Fund - 15-00309-00-BR engr services	Paid by Check # 93294		12/02/2015	12/03/2015	12/04/2015		12/04/2015	(33,503.94)
							Account 2002 - Due To Totals	Invoice Transactions	2	<u>(42,252.94)</u>
							Fund 210 - County Bridge Fund Totals	Invoice Transactions	2	<u>(42,252.94)</u>
<b>Fund 220 - County Motor Fuel Tax Fund</b>										
Account 2002 - Due To										
3004 - OGLE COUNTY FEDERAL AID MATCHING FUND	FAMWY1512a	Co. MFT Fund - return borrowed funds for patching material	Paid by Check # 93437		12/18/2015	12/18/2015	12/18/2015		12/18/2015	(22,630.73)
3004 - OGLE COUNTY FEDERAL AID MATCHING FUND	FAMHWY1512b	Co. MFT Fund - reimburse borrowed funds for sealcoat	Paid by Check # 93437		12/18/2015	12/18/2015	12/18/2015		12/18/2015	(100,000.00)
2154 - OGLE COUNTY HIGHWAY FUND	CHFHWY1512	Co. MFT Fund - return borrowed funds for payroll	Paid by Check # 93438		12/18/2015	12/18/2015	12/18/2015		12/18/2015	(215,463.50)
							Account 2002 - Due To Totals	Invoice Transactions	3	<u>(338,094.23)</u>
							Fund 220 - County Motor Fuel Tax Fund Totals	Invoice Transactions	3	<u>(338,094.23)</u>
<b>Fund 240 - Federal Aid Matching</b>										
Account 2002 - Due To										
3613 - WAGNER AGGREGATE, INC.	16732	FAM Fund - 13-00296-00-WR road rock	Paid by Check # 93293		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(730.02)
3613 - WAGNER AGGREGATE, INC.	16766	FAM Fund - 13-00296-00-WR road rock	Paid by Check # 93293		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(571.67)
3613 - WAGNER AGGREGATE, INC.	16718	FAM Fund - 13-00296-00-WR road rock	Paid by Check # 93293		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(457.30)
2307 - BNSF RAILWAY COMPANY	90125469	FAM Fund - 06-00241-00-WR services	Paid by Check # 93433		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(14,173.78)



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Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 240 - Federal Aid Matching</b>										
Account 2002 - Due To										
2307 - BNSF RAILWAY COMPANY	90124060	FAM Fund - 06-00241-00-WR services	Paid by Check # 93433		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(3,179.86)
2307 - BNSF RAILWAY COMPANY	90125468	FAM Fund - 06-000241-00-WR services	Paid by Check # 93433		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(19,257.47)
2647 - MARTIN AND COMPANY EXCAVATING	MARHWY1512	FAM Fund - 06-00241-00-WR engr pay est #3	Paid by Check # 93454		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(598,551.53)
4908 - POPLAR FARMS	47745	FAM Fund - 06-00241-00-WR trees installed	Paid by Check # 93459		12/23/2015	12/24/2015	12/28/2015		12/28/2015	(4,000.00)
							Account 2002 - Due To Totals		Invoice Transactions 8	<u>(\$640,921.63)</u>
							Fund 240 - Federal Aid Matching Totals		Invoice Transactions 8	<u>(\$640,921.63)</u>
<b>Fund 250 - Township Roads - Motor Fuel Tax</b>										
Account 2002 - Due To										
3392 - CORDRAY BROS. INC.	042115814	TWP MFT Fund - 15-10000-00-GM road rock	Paid by Check # 93434		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(2,375.69)
							Account 2002 - Due To Totals		Invoice Transactions 1	<u>(\$2,375.69)</u>
							Fund 250 - Township Roads - Motor Fuel Tax Totals		Invoice Transactions 1	<u>(\$2,375.69)</u>
<b>Fund 270 - GIS Committee Fund</b>										
Account 2002 - Due To										
2250 - CLIFFORD-WALD	00114289	GIS Committee Fund - plotter paper	Paid by Check # 93284		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(96.50)
3544 - CAPITAL ONE BANK	CAPGIS1512	GIS Committee Fund - laminating material	Paid by Check # 93309		12/04/2015	12/04/2015	12/04/2015		12/04/2015	(101.05)
							Account 2002 - Due To Totals		Invoice Transactions 2	<u>(\$197.55)</u>
							Fund 270 - GIS Committee Fund Totals		Invoice Transactions 2	<u>(\$197.55)</u>
<b>Fund 300 - Insurance - Hospital &amp; Medical</b>										
Account 2002 - Due To										
1895 - OGLE COUNTY HEALTH DEPARTMENT	3243	ADULT FLU SHOTS FOR COUNTY EMPLOYEES	Paid by Check # 93367		12/08/2015	12/08/2015	12/11/2015		12/11/2015	(105.00)
4892 - HOLMES MURPHY & ASSOCIATES LLC	345633	CLIENT: OGLCOUEB - G -CONSULTING SERVICES FOR JANUARY 2016	Paid by Check # 93436		12/17/2015	12/17/2015	12/18/2015		12/18/2015	(2,100.00)
3463 - GROUP ADMINISTRATORS, LTD.	01-2016	JANUARY 2016	Paid by Check # 93474		12/29/2015	12/29/2015	12/29/2015		12/29/2015	(35,631.57)
1895 - OGLE COUNTY HEALTH DEPARTMENT	3247	ADULT FLU SHOTS - 12/10/2015 - KINN & NICHOLSON	Paid by Check # 93476		12/29/2015	12/29/2015	12/29/2015		12/29/2015	(70.00)
							Account 2002 - Due To Totals		Invoice Transactions 4	<u>(\$37,906.57)</u>
							Fund 300 - Insurance - Hospital & Medical Totals		Invoice Transactions 4	<u>(\$37,906.57)</u>
<b>Fund 310 - Insurance Premium Levy</b>										
Account 2002 - Due To										
4560 - COUNTIES OF ILLINOIS RISK MANAGEMENT AGENCY	2015-2016	RENEWAL 2015 - 2016	Paid by Check # 93366		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(214,209.00)



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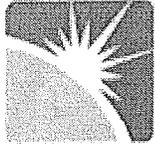
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<b>Fund 310 - Insurance Premium Levy</b>										
Account <b>2002 - Due To</b>										
4560 - COUNTIES OF ILLINOIS RISK MANAGEMENT AGENCY 1256 - TALX UC EXPRESS	2015-2016/CYBER 1986333	CYBER LIABILITY RENEWAL - 2015-2016 CUSTOMER: O24M00 - FOR 12/01/2015 TO 2/29/2016	Paid by Check # 93366 Paid by Check # 93439		12/07/2015 12/18/2015	12/07/2015 12/18/2015	12/11/2015 12/18/2015		12/11/2015 12/18/2015	(7,550.00) (468.29)
1336 - ILLINOIS COUNTIES RISK MGMT TRUST	RCB000000014 752	CUSTOMER #001000005 - 2015-2016 ICRMT/ICRMT2016005	Paid by Check # 93475		12/28/2015	12/28/2015	12/29/2015		12/29/2015	(64,576.50)
1336 - ILLINOIS COUNTIES RISK MGMT TRUST	RCB000000014 936	CUSTOMER #001000005 - 2015-2016 ICRMT/ICRMT2016005	Paid by Check # 93475		12/28/2015	12/28/2015	12/29/2015		12/29/2015	(32,288.25)
							Account <b>2002 - Due To</b> Totals		Invoice Transactions 5	<u>(\$319,092.04)</u>
							Fund <b>310 - Insurance Premium Levy</b> Totals		Invoice Transactions 5	<u>(\$319,092.04)</u>
<b>Fund 350 - County Ordinance</b>										
Account <b>2002 - Due To</b>										
1136 - OFFICE OF THE CHIEF JUDGE	FY2016/ORDINANCE 1535a	FUNDING FOR FY 2016 CASE #2011-MR-10/GLEASH - EXPERT FEES AND COSTS - 11/19-11/20/15	Paid by Check # 93273 Paid by Check # 93349		12/04/2015 12/08/2015	12/04/2015 12/08/2015	12/04/2015 12/11/2015		12/04/2015 12/11/2015	(900.00) (3,246.98)
							Account <b>2002 - Due To</b> Totals		Invoice Transactions 2	<u>(\$4,146.98)</u>
							Fund <b>350 - County Ordinance</b> Totals		Invoice Transactions 2	<u>(\$4,146.98)</u>
<b>Fund 370 - Law Library</b>										
Account <b>2002 - Due To</b>										
1728 - THOMSON REUTERS - WEST	832905674	IL CS 200-209, DEC V392, PR V17-20 & LAFAE SUB CRIM & LAFAVE S&S	Paid by Check # 93368		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(1,787.00)
							Account <b>2002 - Due To</b> Totals		Invoice Transactions 1	<u>(\$1,787.00)</u>
							Fund <b>370 - Law Library</b> Totals		Invoice Transactions 1	<u>(\$1,787.00)</u>
<b>Fund 400 - Public Health</b>										
Account <b>2002 - Due To</b>										
1985 - BERG - JOHNSON ELECTRICAL CONTRACTORS 4690 - DEB CICOGNA	11897 2016-00000010	repairs and maintenance Cell Phone Reimbursement	Paid by Check # 93296 Paid by Check # 93297		12/01/2015 12/01/2015	12/01/2015 12/01/2015	12/04/2015 12/04/2015		12/04/2015 12/04/2015	(130.00) (18.75)
4901 - DOGS ON THE RUN	2016-00000011	Refund	Paid by Check # 93298		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(125.00)
2995 - DPS, INC.	2016-00000012	rent	Paid by Check # 93299		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(3,500.00)



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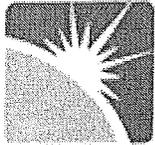
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<b>Fund 400 - Public Health</b>										
<b>Account 2002 - Due To</b>										
2421 - FEDEX	523614622	Overnight Service - Well Samples	Paid by Check # 93300		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(114.66)
1941 - FRONTIER	2016-00000002	COUNTY PHONE	Paid by Check # 93301		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(267.83)
4070 - PAUL HARMON	2016-00000008	Cell Phone	Paid by Check # 93302		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(25.00)
2873 - ROSEMARY MODLER	2016-00000013	mileage	Paid by Check # 93303		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(50.60)
4636 - JOANIE PADILLA	2016-00000007	Cell Phone, Mileage, Per Diem	Paid by Check # 93304		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(65.80)
2008 - U. S. POSTAL SERVICE (POSTAGE - BY-PHONE)	2016-00000006	Postage Machine Replenishment	Paid by Check # 93305		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(375.42)
1265 - VERIZON	2016-00000009	Environmental Cell Phones	Paid by Check # 93307		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(20.18)
1856 - VILLAGE OF PROGRESS	2016-00000003	Rochelle Maintenance	Paid by Check # 93308		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(338.33)
3991 - CARD SERVICE CENTER	12.15.0063	Office Supplies; Postage	Paid by Check # 93322		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(253.14)
1853 - CITY OF DIXON	14374.14375.1436	Water Lab Fees	Paid by Check # 93323		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(81.00)
3105 - CONSERV FS INC	2016-00000079	Fuel	Paid by Check # 93324		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(269.31)
1941 - FRONTIER	2016-00000078	Rochelle Phone System	Paid by Check # 93325		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(292.08)
2254 - HEMOCUE, INC.	1337277	cuvettes	Paid by Check # 93326		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(356.00)
1898 - NICOR	2016-00000082	Rochelle Office	Paid by Check # 93327		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(120.02)
4440 - NORTHERN ILLINOIS DISPOSAL SERVICES, INC.	14922761	Waste Disposal - Rochelle	Paid by Check # 93328		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(47.95)
1753 - A T & T	0304911891.1215	Oregon Long Distance	Paid by Check # 93468		12/21/2015	12/21/2015	12/29/2015		12/29/2015	(40.25)
1853 - CITY OF DIXON	14410.14405	Water Lab Fees	Paid by Check # 93469		12/21/2015	12/21/2015	12/29/2015		12/29/2015	(132.00)
4906 - CUSTOM DATA PROCESSING INC.	90933	Billing Service	Paid by Check # 93470		12/21/2015	12/21/2015	12/29/2015		12/29/2015	(260.00)
1849 - ROCHELLE MUNICIPAL UTILITIES	036313.1215	Electric / Water - Rochelle	Paid by Check # 93471		12/21/2015	12/21/2015	12/29/2015		12/29/2015	(319.24)
1265 - VERIZON	9757051211	Environmental Cell Phones	Paid by Check # 93472		12/21/2015	12/21/2015	12/29/2015		12/29/2015	(14.63)
4738 - WELLS FARGO	5002685021	Copier Maintenance/lease for new copier	Paid by Check # 93473		12/21/2015	12/21/2015	12/29/2015		12/29/2015	(277.55)
								Account 2002 - Due To Totals		(1,494.74)
								Fund 400 - Public Health Totals		(1,494.74)
								Invoice Transactions 25		(1,494.74)
								Invoice Transactions 25		(1,494.74)



# Fund Payments

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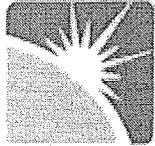
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<b>Fund 410 - TB Fund</b>											
Account 2002 - Due To											
4690 - DEB CICOGNA	2016-00000010	Cell Phone Reimbursement	Paid by Check # 93297		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(6.25)	
1941 - FRONTIER	2016-00000002	COUNTY PHONE	Paid by Check # 93301		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(5.47)	
2008 - U. S. POSTAL SERVICE (POSTAGE - BY-PHONE)	2016-00000006	Postage Machine Replenishment	Paid by Check # 93305		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(1.96)	
1265 - VERIZON	2016-00000014	TB patient monitoring	Paid by Check # 93306		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(41.69)	
3991 - CARD SERVICE CENTER	12.15.0063	Office Supplies; Postage	Paid by Check # 93322		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(.63)	
1753 - A T & T	0304911891.12	Oregon Long Distance	Paid by Check # 93468		12/21/2015	12/21/2015	12/29/2015		12/29/2015	(1.25)	
4738 - WELLS FARGO	5002685021	Copier Maintenance/lease for new copier	Paid by Check # 93473		12/21/2015	12/21/2015	12/29/2015		12/29/2015	(12.45)	
								Account 2002 - Due To Totals		Invoice Transactions 7	(69.70)
								Fund 410 - TB Fund Totals		Invoice Transactions 7	(69.70)
<b>Fund 420 - Animal Control</b>											
Account 2002 - Due To											
3795 - INTERVET INC.	2016-00000038	Microchips - 250	Paid by Check # 93333		12/09/2015	12/09/2015	12/11/2015		12/11/2015	(2,497.50)	
1265 - VERIZON	2016-00000037	Warden November Cell phone bill	Paid by Check # 93338		12/09/2015	12/09/2015	12/11/2015		12/11/2015	(140.73)	
								Account 2002 - Due To Totals		Invoice Transactions 2	(2,638.23)
								Fund 420 - Animal Control Totals		Invoice Transactions 2	(2,638.23)
<b>Fund 430 - Solid Waste</b>											
Account 2002 - Due To											
1015 - BURKARDT'S LP GAS	0160198	Propane for forklift tank	Paid by Check # 93310		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(16.75)	
3105 - CONSERV FS INC	12022015	Gas for truck - November	Paid by Check # 93311		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(48.24)	
1765 - CATHY CRUTHIS	12072015	Recycling station site maintenance	Paid by Check # 93312		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(135.00)	
1941 - FRONTIER	11282015	Acct# 630-159-0035-072202-5	Paid by Check # 93313		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(75.00)	
3404 - ANDREW J. GOOD	12072015	Recycling station site maintenance	Paid by Check # 93314		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(140.69)	
1463 - NAPA AUTO PARTS	739932	snowblower maintenance	Paid by Check # 93315		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(11.31)	
4440 - NORTHERN ILLINOIS DISPOSAL SERVICES, INC.	14918012	Recycling sites pick up	Paid by Check # 93316		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(1,696.00)	
4440 - NORTHERN ILLINOIS DISPOSAL SERVICES, INC.	14918756	Recycling bins pick up	Paid by Check # 93316		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(830.00)	



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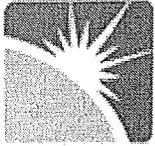
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<b>Fund 430 - Solid Waste</b>										
Account <b>2002 - Due To</b>										
4440 - NORTHERN ILLINOIS DISPOSAL SERVICES, INC.	14919514	Recycling bins pick up	Paid by Check # 93316		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(1,116.00)
1895 - OGLE COUNTY HEALTH DEPARTMENT	12012015	Postage - November	Paid by Check # 93317		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(78.49)
4141 - PRODUCT STEWARDSHIP INSTITUTE, INC.	300000591	1 year membership	Paid by Check # 93318		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(600.00)
1568 - RK DIXON	1404578	Copier contract 60% Solid Waste	Paid by Check # 93319		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(191.84)
1265 - VERIZON	9755918974	Cell phone	Paid by Check # 93320		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(69.80)
1743 - W.R.H.L. RADIO	430-00005-0002	Advertising	Paid by Check # 93321		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(342.00)
							Account <b>2002 - Due To</b> Totals	Invoice Transactions 14		<u>(\$5,351.12)</u>
							Fund <b>430 - Solid Waste</b> Totals	Invoice Transactions 14		<u>(\$5,351.12)</u>
<b>Fund 475 - Mental Health</b>										
Account <b>2002 - Due To</b>										
1857 - EASTER SEALS METROPOLITAN CHICAGO	2016-00000085	Ogle County Mental Health - December 2015	Paid by Check # 93390		12/15/2015	12/15/2015	12/15/2015		12/15/2015	(872.72)
1859 - HOPE	2016-00000087	Ogle County Mental Health - December 2015	Paid by Check # 93391		12/15/2015	12/15/2015	12/15/2015		12/15/2015	(6,292.24)
1858 - LUTHERAN SOCIAL SERVICES OF ILLINOIS	2016-00000090	Ogle County Mental Health - December 2015	Paid by Check # 93392		12/15/2015	12/15/2015	12/15/2015		12/15/2015	(731.66)
1860 - SERENITY HOSPICE AND HOME	2016-00000088	Ogle County Mental Health - December 2015	Paid by Check # 93393		12/15/2015	12/15/2015	12/15/2015		12/15/2015	(2,048.64)
1639 - SINNISSIPPI CENTERS INC.	2016-00000086	Ogle County Mental Health - December 2015	Paid by Check # 93394		12/15/2015	12/15/2015	12/15/2015		12/15/2015	(22,741.18)
1856 - VILLAGE OF PROGRESS	2016-00000084	Ogle County Mental Health - December 2015	Paid by Check # 93395		12/15/2015	12/15/2015	12/15/2015		12/15/2015	(28,311.57)
1855 - CECILIA ZIMMERMAN	2016-00000089	Ogle County Mental Health - December 2015	Paid by Check # 93396		12/15/2015	12/15/2015	12/15/2015		12/15/2015	(291.67)
							Account <b>2002 - Due To</b> Totals	Invoice Transactions 7		<u>(\$61,289.68)</u>
							Fund <b>475 - Mental Health</b> Totals	Invoice Transactions 7		<u>(\$61,289.68)</u>



# Fund Payments

G/L Date Range 12/01/15 - 12/31/15

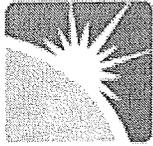
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<b>Fund 480 - Senior Social Services</b>										
Account 2002 - Due To										
4909 - THE NATIONAL BANK & TRUST COMPANY OF SYCAMORE	CASE#15 CH 00065	STACY J. LONES/115 SUNNY HILL DRIVE, DAVIS JUNCTION, IL 61020	Paid by Check # 93477		12/24/2015	12/24/2015	12/29/2015		12/29/2015	(82,000.00)
							Account 2002 - Due To Totals		Invoice Transactions 1	(\$82,000.00)
							Fund 480 - Senior Social Services Totals		Invoice Transactions 1	(\$82,000.00)
<b>Fund 500 - Recorder's Automation</b>										
Account 2002 - Due To										
1983 - COMCAST CABLE	2016-00000083	HIGH SPEED INTERNET - RECORDER'S OFFICE	Paid by Check # 93401		12/05/2015	12/08/2015	12/15/2015		12/15/2015	(102.85)
1177 - CULLIGAN	OCCLERK44441 2	WATER	Paid by Check # 93402		11/30/2015	12/08/2015	12/15/2015		12/15/2015	(25.00)
							Account 2002 - Due To Totals		Invoice Transactions 2	(\$127.85)
							Fund 500 - Recorder's Automation Totals		Invoice Transactions 2	(\$127.85)
<b>Fund 510 - GIS Fee Fund</b>										
Account 2002 - Due To										
2153 - OGLE COUNTY GIS COMMITTEE	FEEGIS1512	GIS Fee Fund - \$12 of \$14 fee Nov 2015	Paid by Check # 93435		12/14/2015	12/14/2015	12/15/2015		12/15/2015	(6,550.91)
							Account 2002 - Due To Totals		Invoice Transactions 1	(\$6,550.91)
							Fund 510 - GIS Fee Fund Totals		Invoice Transactions 1	(\$6,550.91)
<b>Fund 554 - Circuit Clerk Ops &amp; Admin</b>										
Account 2002 - Due To										
1334 - ILLINOIS ASSOCIATION OF COURT CLERKS	2016 DUES	2016 ANNUAL DUES FOR OGLE COUNTY	Paid by Check # 93270		12/03/2015	12/03/2015	12/04/2015		12/04/2015	(325.00)
4527 - KIMBERLY A STAHL	11-2015/IACO	REIMB. FOR HOTEL & MILEAGE FOR IACO CONFERENCE - 11/23-11/25/15	Paid by Check # 93276		12/03/2015	12/03/2015	12/04/2015		12/04/2015	(322.23)
4907 - ERIC JOHNSON	96CF91/13CF95	REFUND PER COURT ORDER - 11/09/2015	Paid by Check # 93443		12/23/2015	12/23/2015	12/23/2015		12/23/2015	(300.00)
							Account 2002 - Due To Totals		Invoice Transactions 3	(\$947.23)
							Fund 554 - Circuit Clerk Ops & Admin Totals		Invoice Transactions 3	(\$947.23)
<b>Fund 555 - County Automation -Circuit Clerk</b>										
Account 2002 - Due To										
3991 - CARD SERVICE CENTER	131415AMAZON	ACCT #0074 - AMAZON (2) TELYHD PRO DEVICES - JAIL COMMUNICATION	Paid by Check # 93347		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(552.48)
1763 - CDW GOVERNMENT INC	BCP7854	CUST #10295586 - (1) JABRA 810 SPEAKER UNIT FOR PRISONER CALL	Paid by Check # 93348		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(400.00)



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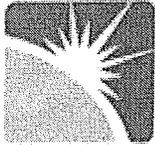
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<b>Fund 555 - County Automation -Circuit Clerk</b>										
Account 2002 - Due To										
1136 - OFFICE OF THE CHIEF JUDGE	FY2016/COURT	FY 2016 BUDGET	Paid by Check # 93350		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(450.00)
4549 - ZONES INC.	S42047630101	ACCT #0071915649 - (1) TELYHD PRO DEVICE - PRISONER CALL	Paid by Check # 93351		12/07/2015	12/07/2015	12/11/2015		12/11/2015	(480.26)
							Account 2002 - Due To Totals		Invoice Transactions 4	<u>(\$1,882.74)</u>
							Fund 555 - County Automation -Circuit Clerk Totals		Invoice Transactions 4	<u>(\$1,882.74)</u>
<b>Fund 560 - Dependent Children</b>										
Account 2002 - Due To										
4896 - JANE BIDDLE	11-12/2015/JB	261 MILES @ \$0.575 PER MILE - NOVEMBER & DECEMBER 2015	Paid by Check # 93369		12/11/2015	12/11/2015	12/11/2015		12/11/2015	(150.08)
2068 - C & C PLUMBING, HEATING & COOLING, INC.	20746	REPLACEMENT OF MOTOR ON FREEZER WITH LABOR	Paid by Check # 93371		12/11/2015	12/11/2015	12/11/2015		12/11/2015	(163.00)
1177 - CULLIGAN	11-2015/63313	MONTHLY WATER DELIVERY & COOLER RENTAL - NOVEMBER 2015	Paid by Check # 93374		12/11/2015	12/11/2015	12/11/2015		12/11/2015	(26.66)
1978 - DISH NETWORK	11-2015/43250204	MONTHLY TV FOR 12/4/2015 TO 1/03/2016	Paid by Check # 93375		12/11/2015	12/11/2015	12/11/2015		12/11/2015	(74.99)
1249 - FOCUS HOUSE	9-11/2015	LEVELS - SEPTEMBER TO NOVEMBER 2015	Paid by Check # 93377		12/11/2015	12/11/2015	12/11/2015		12/11/2015	(85.00)
4492 - GORDON FOOD SERVICE, INC.	836227766	FOOD FOR RESIDENTS - ROASTED TURKEY - 11/19/2015	Paid by Check # 93379		12/11/2015	12/11/2015	12/11/2015		12/11/2015	(32.75)
1898 - NICOR	11-2015/4685532	FOCUS HOUSE - NOVEMBER 2015	Paid by Check # 93380		12/11/2015	12/11/2015	12/11/2015		12/11/2015	(194.79)
1898 - NICOR	11-2015/4720413	FOCUS HOUSE - NOVEMBER 2015	Paid by Check # 93380		12/11/2015	12/11/2015	12/11/2015		12/11/2015	(64.19)
4607 - PER MAR SECURITY SERVICES	1438072	SERVICE CALL - 3279 HWY 251 N - 12/02/2015	Paid by Check # 93381		12/11/2015	12/11/2015	12/11/2015		12/11/2015	(73.93)
1013 - ROCHELLE JANITORIAL SUPPLY	1986.1	CUST ID: FOC050 - DAWN DISH SOAP & LAUNDRY DETERGENT	Paid by Check # 93384		12/11/2015	12/11/2015	12/11/2015		12/11/2015	(99.94)
1849 - ROCHELLE MUNICIPAL UTILITIES	12-2015/41182	INET @ ROCHELLE OFFICE - DECEMBER 2015	Paid by Check # 93385		12/11/2015	12/11/2015	12/11/2015		12/11/2015	(9.95)
4621 - SATELLITE TRACKING OF PEOPLE LLC	STPINV000024071B	CUSTOMER #0061-000152 - NOVEMBER 2015	Paid by Check # 93386		12/11/2015	12/11/2015	12/11/2015		12/11/2015	(238.50)



# Fund Payments

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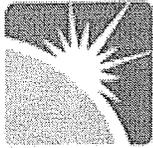
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<b>Fund 560 - Dependent Children</b>										
Account 2002 - Due To										
1015 - BURKARDT'S LP GAS	24970	TANK RENTAL - 2015	Paid by Check # 93478		12/29/2015	12/29/2015	12/29/2015		12/29/2015	(50.00)
1015 - BURKARDT'S LP GAS	24457	ACCT #1-11138 - TANK RENTAL - 2015	Paid by Check # 93478		12/29/2015	12/29/2015	12/29/2015		12/29/2015	(100.00)
3991 - CARD SERVICE CENTER	12-2015/0084	ACCT #0084 - WALMART - SUPPLIES FOR HOUSES	Paid by Check # 93479		12/29/2015	12/29/2015	12/29/2015		12/29/2015	(89.51)
3991 - CARD SERVICE CENTER	12-2015/0118	ACCT #0118 - MEDICATION & DOCTOR CO-PAYS FOR RESIDENTS	Paid by Check # 93479		12/29/2015	12/29/2015	12/29/2015		12/29/2015	(217.86)
3991 - CARD SERVICE CENTER	12-2015/0225	ACCT #0225 - FOOD SAFETY TRAINING	Paid by Check # 93479		12/29/2015	12/29/2015	12/29/2015		12/29/2015	(9.95)
1439 - MEYERS FURNITURE	12/14/2015	SOFA & ROCKER/GLIDER FOR MILLER HOUSE	Paid by Check # 93480		12/29/2015	12/29/2015	12/29/2015		12/29/2015	(2,125.00)
2589 - OGLE COUNTY EDUCATIONAL COOPERATIVE	FH1000	WATER SAMPLE POSTAGE	Paid by Check # 93481		12/29/2015	12/29/2015	12/29/2015		12/29/2015	(24.00)
4607 - PER MAR SECURITY SERVICES	1448378	ACCT #53478 - SECURITY MONITORING SERVICES FOR JANUARY 2016	Paid by Check # 93482		12/29/2015	12/29/2015	12/29/2015		12/29/2015	(205.76)
1573 - REDWOOD TOXICOLOGY LABORATORY, INC.	2645201511	ACCT #002645 - NOVEMBER 2015	Paid by Check # 93483		12/29/2015	12/29/2015	12/29/2015		12/29/2015	(20.25)
							Account 2002 - Due To Totals		Invoice Transactions 21	(\$4,056.11)
							Fund 560 - Dependent Children Totals		Invoice Transactions 21	(\$4,056.11)
<b>Fund 570 - Probation Services</b>										
Account 2002 - Due To										
4903 - JACK BUTITTA	12-2015	FIRST MONTH RENT TO CLEAN HOUSE FOR R. MCCOMAS	Paid by Check # 93370		12/09/2015	12/09/2015	12/11/2015		12/11/2015	(625.00)
3991 - CARD SERVICE CENTER	12-2015/0043	ACCT #0043 - HOTEL DEPOSIT - DRUG COURT CONF. - RENO, NV	Paid by Check # 93372		12/09/2015	12/09/2015	12/11/2015		12/11/2015	(79.45)
3105 - CONSERV FS INC	12-2015/PROB	FOR 11/02/2015 TO 12/02/2015	Paid by Check # 93373		12/09/2015	12/09/2015	12/11/2015		12/11/2015	(102.88)
1246 - FISCHER'S	11-2015/OCPROB	ACCT: OCPROBATION - 10/21/2015 TO 11/23/2015	Paid by Check # 93376		12/09/2015	12/09/2015	12/11/2015		12/11/2015	(98.80)
1941 - FRONTIER	11-15/8155622287	ROCHELLE OFFICE TELEPHONE - NOVEMBER 2015	Paid by Check # 93378		12/09/2015	12/09/2015	12/11/2015		12/11/2015	(239.95)



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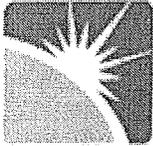
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<b>Fund 570 - Probation Services</b>										
Account 2002 - Due To										
4772 - PREMIER BIOTECH, INC.	44486	(2) EtG INSTANT TESTS W/ 25 CASSETTES PER CASE	Paid by Check # 93382		12/09/2015	12/09/2015	12/11/2015		12/11/2015	(262.07)
1573 - REDWOOD TOXICOLOGY LABORATORY, INC.	536644	CUST #002157 - 34 EA. 2 PT. LSL FORM	Paid by Check # 93383		12/09/2015	12/09/2015	12/11/2015		12/11/2015	(10.68)
4621 - SATELLITE TRACKING OF PEOPLE LLC	STPINV000024071A	CUST #0061-000152 - NOVEMBER 2015	Paid by Check # 93386		12/09/2015	12/09/2015	12/11/2015		12/11/2015	(733.50)
3432 - JOSEPH SHAW	11-2015/JS	120 MILES @ \$0.575 PER MILE - NOVEMBER 2015	Paid by Check # 93387		12/09/2015	12/09/2015	12/11/2015		12/11/2015	(69.00)
1639 - SINNISSIPPI CENTERS INC.	11-2015/OCP-DC	ADULT DRUG COURT TIME - B.MASON & K. NICHOLS - NOVEMBER 2015	Paid by Check # 93388		12/09/2015	12/09/2015	12/11/2015		12/11/2015	(435.00)
3690 - TIKKALA WAREHOUSING	12/15TO3/15/2016	3 MONTHS RENT @ \$600.00 PER MONTH - 12/15/2015 TO 3/15/2016	Paid by Check # 93389		12/09/2015	12/09/2015	12/11/2015		12/11/2015	(1,800.00)
							Account 2002 - Due To Totals	Invoice Transactions 11		<u>(\$4,456.33)</u>
							Fund 570 - Probation Services Totals	Invoice Transactions 11		<u>(\$4,456.33)</u>
<b>Fund 610 - OEMA</b>										
Account 2002 - Due To										
1941 - FRONTIER	11-15/8155621850	WRHL/OCEMA - NOVEMBER 2015	Paid by Check # 93286		12/04/2015	12/04/2015	12/04/2015		12/04/2015	(84.37)
4759 - SIRENNET.COM	0194343-IN	OEMA: Equipment for Vehicle	Paid by Check # 93346		12/07/2015	12/10/2015	12/11/2015		12/11/2015	(747.31)
							Account 2002 - Due To Totals	Invoice Transactions 2		<u>(\$831.68)</u>
							Fund 610 - OEMA Totals	Invoice Transactions 2		<u>(\$831.68)</u>
<b>Fund 611 - EOC</b>										
Account 2002 - Due To										
4445 - BIG R	6375/H	Cust # 16557	Paid by Check # 93342		12/03/2015	12/10/2015	12/11/2015		12/11/2015	(5.97)
							Account 2002 - Due To Totals	Invoice Transactions 1		<u>(\$5.97)</u>
							Fund 611 - EOC Totals	Invoice Transactions 1		<u>(\$5.97)</u>
<b>Fund 625 - DUI Equipment</b>										
Account 2002 - Due To										
3991 - CARD SERVICE CENTER	12/2015DUI	Acct# XXXX XXXX XXXX 0014	Paid by Check # 93343		11/27/2015	12/23/2015	12/11/2015		12/11/2015	(1,336.33)
							Account 2002 - Due To Totals	Invoice Transactions 1		<u>(\$1,336.33)</u>
							Fund 625 - DUI Equipment Totals	Invoice Transactions 1		<u>(\$1,336.33)</u>



# Fund Payments

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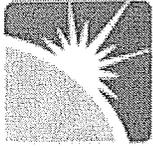
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<b>Fund 632 - Sex Offender Registration</b>										
Account <b>2002 - Due To</b>										
4645 - ILLINOIS ATTORNEY GENERAL	11-2015	30% OF RECEIVED FEES - \$700.00 - NOVEMBER 2015	Paid by Check # 93271		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(210.00)
3192 - ILLINOIS STATE POLICE	11-2015	30% OF RECEIVED FEES - \$700.00 - NOVEMBER 2015	Paid by Check # 93272		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(210.00)
2319 - OFFICE OF THE ILLINOIS STATE TREASURER	11-2015	5% OF RECEIVED FEES - \$700.00 - NOVEMBER 2015	Paid by Check # 93274		12/02/2015	12/02/2015	12/04/2015		12/04/2015	(35.00)
							Account <b>2002 - Due To</b> Totals	Invoice Transactions 3		<u>(\$455.00)</u>
							Fund <b>632 - Sex Offender Registration</b> Totals	Invoice Transactions 3		<u>(\$455.00)</u>
<b>Fund 634 - Administrative Tow Fund</b>										
Account <b>2002 - Due To</b>										
3991 - CARD SERVICE CENTER	12/2015TOW	Acct# XXXX XXXX XXXX 0014	Paid by Check # 93343		11/27/2015	12/23/2015	12/11/2015		12/11/2015	(1,781.93)
4554 - MOBILE ELECTRONICS INC.	10321	Cust # OgleSheriff	Paid by Check # 93344		11/05/2015	12/05/2015	12/11/2015		12/11/2015	(518.17)
1572 - RAY O'HERRON COMPANY INC	12/2015TOW	Squad Equipment	Paid by Check # 93345		11/06/2015	12/10/2015	12/11/2015		12/11/2015	(6,274.34)
4759 - SIRENNET.COM	0193724-IN	Cust No. 8156666	Paid by Check # 93346		11/18/2015	12/16/2015	12/11/2015		12/11/2015	(5,167.84)
							Account <b>2002 - Due To</b> Totals	Invoice Transactions 4		<u>(\$13,742.28)</u>
							Fund <b>634 - Administrative Tow Fund</b> Totals	Invoice Transactions 4		<u>(\$13,742.28)</u>
<b>Fund 640 - 911 Emergency</b>										
Account <b>2002 - Due To</b>										
1083 - SANDRA BEITEL	12-2015/SB	MILEAGE REIMB. & MEAL PER DIEM - DECEMBER 2015	Paid by Check # 93352		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(282.15)
2980 - CARD MEMBER SERVICE (ELAN FINANCIAL)	11-2015/0184	OGLE COUNTY ETSB - ACCT #4798 1737 6100 0184	Paid by Check # 93353		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(3,180.86)
1206 - DIXON OTTAWA COMMUNICATIONS	441984	ACCT #71275 - CONSOLE POSITION EQUIPMENT & INSTALLATION	Paid by Check # 93354		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(20,739.33)
1246 - FISCHER'S	30514	ACCT: OC911 - OFFICE PRINTER	Paid by Check # 93355		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(58.35)
1941 - FRONTIER	11-2015/010165-2	MONTHLY LINE CHARGES - NOVEMBER 2015	Paid by Check # 93356		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(61.74)
1941 - FRONTIER	11-2015/111594-5	MONTHLY LINE CHARGES - NOVEMBER 2015	Paid by Check # 93356		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(11,234.04)



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Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 640 - 911 Emergency</b>										
<b>Account 2002 - Due To</b>										
1941 - FRONTIER	11- 2015/112894-5	MONTHLY LINE CHARGES - NOVEMBER 2015	Paid by Check # 93356		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(119.50)
1941 - FRONTIER	12- 2015/120100-2	MONTHLY LINE CHARGES - DECEMBER 2015	Paid by Check # 93356		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(621.20)
4464 - RICK MOTT	12-2015/RM	MILEAGE & REGISTRATION REIMB. - 12/2015	Paid by Check # 93357		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(780.00)
1516 - OREGON POSTMASTER	2016/OGLE CO 911	ANNUAL POST OFFICE BOX RENTAL #135	Paid by Check # 93358		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(88.00)
2359 - POWERPHONE, INC.	47955	TC TRAINING RECERTS - ROCHELLE POLICE DEPT.	Paid by Check # 93359		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(1,116.00)
2359 - POWERPHONE, INC.	47956	TC TRAINING RECERTS - EMERG. COMM. OFFICE	Paid by Check # 93359		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(1,103.00)
4750 - DAVID SAWLSVILLE	2015 MILEAGE	ETSB MEETINGS - MILEAGE REIMB. - 2015	Paid by Check # 93360		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(172.50)
1946 - SANDRA SULLIVAN	2015 MILEAGE	650 MILES @ \$0.575 PER MILE - ETSB MEETINGS - 2015	Paid by Check # 93361		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(373.75)
4465 - CORY TVEIT	2015 MILEAGE	224 MILES @ \$0.575 PER MILE - ETSB MEETINGS - 2015	Paid by Check # 93362		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(128.80)
1692 - MARTIN TYPER	2015 MILEAGE	308 MILES @ \$0.575 PER MILE - ETSB MEETINGS - 2015	Paid by Check # 93363		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(177.10)
1265 - VERIZON	9755774502	CELL PHONES & WIRELESS CARDS - NOVEMBER 2015	Paid by Check # 93364		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(308.01)
4770 - VOIANCE LANGUAGE SERVICES, LLC.	IV0044995	OVER THE PHONE INTERPRETATION - NOVEMBER 2015	Paid by Check # 93365		12/10/2015	12/10/2015	12/11/2015		12/11/2015	(1.89)
3202 - ILLINOIS DEPARTMENT OF PUBLIC HEALTH	12-2015/EMD- TO	EMD LICENSE FOR TREVOR OWEN	Paid by Check # 93440		12/22/2015	12/22/2015	12/22/2015		12/22/2015	(30.00)
3202 - ILLINOIS DEPARTMENT OF PUBLIC HEALTH	12-2015/EMD- SA	EMD LICENSE FOR SENADA AJVAZI	Paid by Check # 93441		12/22/2015	12/22/2015	12/22/2015		12/22/2015	(30.00)
3202 - ILLINOIS DEPARTMENT OF PUBLIC HEALTH	12-2015/EMD- AP	EMD LICENSE FOR ALISON PATRICK	Paid by Check # 93442		12/22/2015	12/22/2015	12/22/2015		12/22/2015	(30.00)
							Account <b>2002 - Due To</b> Totals	Invoice Transactions 21		(\$40,636.22)
							Fund <b>640 - 911 Emergency</b> Totals	Invoice Transactions 21		(\$40,636.22)



# Fund Payments

G/L Date Range 12/01/15 - 12/31/15

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 725 - Coroner's Fee Fund</b>										
Account 2002 - Due To										
1246 - FISCHER'S	688071-001	ACCT NO. OCCORONER - WRITE ON TAPE, ENVELOPES & HIGHLIGHTERS	Paid by Check # 93268		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(13.48)
4479 - HINCKLEY SPRINGS	14630843 110615	HOT & COLD COOLER RENTAL & WATER SUPPLY	Paid by Check # 93269		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(45.76)
1538 - PETTY CASH	09-2015	DOLLAR GENERAL & GK GRAPHICS EXPENSES	Paid by Check # 93275		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(63.96)
1034 - STAN'S PERFORMANCE, INC.	16069	REPAIR TO VEHICLE/2005 FORD FREESTAR - CABIN FILTER	Paid by Check # 93277		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(59.04)
4395 - STAN'S TOWING & RECOVERY	3392/3516	TOWING ON 91/2015 & 10/27/2015	Paid by Check # 93278		12/01/2015	12/01/2015	12/04/2015		12/04/2015	(210.00)
							Account 2002 - Due To Totals	Invoice Transactions 5		<u>(\$392.24)</u>
							Fund 725 - Coroner's Fee Fund Totals	Invoice Transactions 5		<u>(\$392.24)</u>
							Grand Totals	Invoice Transactions 273		<u>(\$1,760,625.82)</u>

# RESOLUTION - 2016-02XX

## *2016 Budget Amendment*

WHEREAS, from time to time an emergency arises and it is necessary to increase an appropriation in order to conduct the County business in an orderly fashion,

THEREFORE, BE IT RESOLVED, that the County Revolving Vehicle Purchase Fund increase its total appropriation for Fiscal Year 2016 as follows.

### Original Fund Appropriation

**\$226,000.00**

### Additional Appropriation

**\$40,000.00**     184.08.4755  
*Probation - Vehicle Purchase*

### Amended Fund Appropriation

**\$266,000.00**

APPROVED this 16th day of February, 2016  
OGLE COUNTY FINANCE COMMITTEE

\_\_\_\_\_  
Greg Sparrow, Chairman

\_\_\_\_\_  
Zach Oltmanns

\_\_\_\_\_  
Kim Gouker

\_\_\_\_\_  
Patricia Nordman

\_\_\_\_\_  
Rich Gronewold

\_\_\_\_\_  
Martin Typer

\_\_\_\_\_  
Lyle Hopkins

\_\_\_\_\_  
Bill Welty

\_\_\_\_\_  
John O'Brien

**RESOLUTION 2016-0103**  
**Annual Public Notice of Regular Meetings**

WHEREAS, the government of the County of Ogle, State of Illinois, has a responsibility of certain and specific duties for the good of the public welfare of its citizens, and such responsibility being vested with the County Board of the County of Ogle, to conduct its business in full public awareness, and

WHEREAS, the Open Meetings Act, has been enacted by the General Assembly of the State of Illinois, in order to ensure that the public has a right to be informed as to the official conduct of all Illinois public bodies, and

WHEREAS, Section 2.02 of the Illinois Compiled Statutes, Chapter 5 and Subhead 120 (5 ILCS 120/2.02) mandates that all public bodies, such as the Ogle County Board, and all of its committees, “shall give public notice of the schedule of regular meetings at the beginning of each calendar or fiscal year and shall state the regular dates, times, and places of such meetings”

THEREFORE BE IT RESOLVED, by the County Board of Ogle County, State of Illinois on this 19<sup>th</sup> day of January, 2016, that it adopts a Regular Meeting Schedule for the Calendar Year 2016 for the County Board and its ten regular Committees, as per the dates, times and locations as shown on the attached Appendix A.

---

Kim P. Gouker  
Chairman, Ogle County Board

Attest:

---

Rebecca Huntley  
Ogle County Clerk

**APPENDIX A of  
Resolution 2016-0103  
Annual Public Notice of Regular Meetings**

**MEETING DATES:**

Generally, the Ogle County Board meets at 5:30 pm on the third Tuesday of each month, and the Committees meet on the second Tuesday of each month, unless such date falls on a holiday or election day, with the following specific dates established by this resolution, and adjusted for any holidays or election days.

	COMMITTEES	COUNTY BOARD
January	Tuesday, January 12, 2016	Tuesday, January 19, 2016
February	Tuesday, February 9, 2016	Tuesday, February 16, 2016
March	Tuesday, March 8, 2016	Wednesday, March 16, 2016
April	Tuesday, April 12, 2016	Tuesday, April 19, 2016
May	Tuesday, May 10, 2016	Tuesday, May 17, 2016
June	Tuesday, June 14, 2016	Tuesday, June 21, 2016
July	Tuesday, July 12, 2016	Tuesday, July 19, 2016
August	Tuesday, August 9, 2016	Tuesday, August 16, 2016
September	Tuesday, September 13, 2016	Tuesday September 20, 2016
October	Tuesday, October 11, 2016	Tuesday, October 18, 2016
November	<u>*Wednesday, November 9, 2016*</u>	<b>Public Budget Hearing:</b>
December	Tuesday, December 13, 2016	Monday, October 24, 2016
		Tuesday, November 15, 2016
		Tuesday, December 20, 2016

**MEETING TIMES:**

**Committees**

Road, Bridge & Mapping	7:30am	County Infrastructure	2:00pm
Judiciary & Circuit Clerk	9:00am	HEW, Solid Waste & Veterans	3:00pm
Personnel & Salary	9:00 am	Long Range & Strategic Planning	4:00pm
Assessment, Planning & Zoning	10:00am	Finance & Insurance	5:00 pm
State's Attorney, Juvenile/Probation	11:00am	Executive	6:00 pm
County Security	1:00pm		

**County Board** 5:30pm

**MEETING LOCATIONS:**

All meetings will be held at the Ogle County Old Courthouse Building, at 105 S. Fifth Street, located at the intersection of Illinois Routes 2 and 64, in Oregon, Illinois.

Committees	Room 100, 317 or Room 319
County Board	Room 317

Special meetings of the Ogle County Board, or its Committees, may be scheduled at a time and location specified, with at least a 48-hour public notice, as per 5 ILCS 120/2.02.

**RESOLUTION 2016-0101  
and  
CERTIFICATE OF APPOINTMENT**

WHEREAS, the appointment to the Board of Health by the Ogle County Board, AND  
WHEREAS, the name of

Dawood Harunani, DDS, MAGD  
301 W. Washington St  
Oregon, IL 61061

who is an elector of said district, is presented to the Ogle County Board for approval of  
appointment,

BE IT HEREBY RESOLVED, the appointment is for an unexpired term which ends  
November 30, 2016.

Voted upon and passed by the Ogle County Board on January 19, 2016.

---

Kim P. Gouker, Chairman  
Ogle County Board

(COUNTY SEAL)

---

Rebecca Huntley, Ogle County Clerk

**Resolution 2016-0105**

**Resolution to Authorize Long Range Planning Invoices**

WHEREAS, on January 19, 2016, the Ogle County Board reviewed a summary of proposed Long Range Planning expenses;

NOW THEREFORE, BE IT RESOLVED, that the Ogle County Board authorizes payment of Long Range invoices totaling \$77,856.03 for the following:

<b>SUPPLIER NAME</b>	<b>DESCRIPTION</b>	<b>AMOUNT</b>
O'Brien Civil Works Inc.	Final Payment on Parking Lot - 501 W. Washington Street	\$ 3,774.33
IT Credit Card	Wall Mount Brackets - Focus House	\$114.58
Syndeo Networks, Inc.	Hillcrest Radio - Batteries & Supplies Installation & Configuration	\$ 8,703.97
Syndeo Networks, Inc.	Focus House Internet Switch & Installation	\$2,297.00
Clear Armor LLC	Bullet Resistant Mylar film on windows - Public Safety Complex	\$42,303.65
Dach Fence Co.	Fencing @ Public Safety Complex	\$18,657.50
Saavedra Gehlhausen Architects	Professional Services for Dec. 2015 - Ogle County Maintenance Projects	\$2,005.00
	<b>TOTAL:</b>	<b>\$77,856.03</b>

Presented and Approved at the December 15, 2015, Ogle County Board Meeting.

Attest:

---

Rebecca Huntley, Ogle County Clerk

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Kim P. Gouker, Ogle County Board Chairman

# SAFETY MANUAL

*Ogle County Employees, Elected and Appointed Officials*

This handbook is intended to provide for the safety of county employees and the public, promote understanding of Ogle County safety policies and to assure uniform administration of these policies throughout all County Departments and functions.

*Adopted by the Ogle County Board*

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## ARTICLE I: INTRODUCTION

### Section 1.1: Purpose

A safety program is designed to accomplish one primary purpose: **To Prevent Incidents.** Preventing incidents results in saving lives, eliminating human suffering, increasing efficiency of operations, and saving thousands of dollars for both employees and the general public of our County. A county safety program must provide not only for the safety of the County employees, but also for the safety of the public in regards to operations of the various departments. To be successful, the safety program must have continuous active support of all employees, particularly of those in supervisory positions. The "Push" for an effective safety program must come from the "Top" person in each division, department, section or crew to maximize employee support and participation. It should be pointed out that there is nothing new about the common sense and good judgment outlined in this manual because they have been in effect all the time. ***This manual has been published to provide written policies and procedures for the guidance of our personnel; however it is not intended to be in derogation of any existing collective bargaining agreements, or individual Department policies. Existing bargaining agreements and Department policies will take precedence when those agreements or policies are more stringent.***

### Section 1.2: Applicability

All policies relating to inherent managerial policy apply to all Full Time, Part Time, and Short Term or Seasonal employees of Ogle County, including, but not limited to County Board members, non-certified employees and certified collective bargaining unit employees. Any policy that relates to matters directly affecting wages, hours, and terms and conditions of employment shall be binding upon all non-collective bargaining unit employees and not binding upon certified collective bargaining units whereby the collective bargaining agreement shall govern. In the event of any inconsistency between this Handbook and the applicable bargaining unit contract, the bargaining unit contract shall govern

### Section 1.3: Elements of an Effective Safety Program

An effective safety program includes, but is not limited to the following functions and responsibilities:

- (a) Assigning responsibilities to persons for safety activities.
- (b) Assigning personnel to jobs for which they are physically qualified to perform safely.
- (c) Making equipment, work areas, and working methods safe.
- (d) Searching out hazards and eliminating them immediately.
- (e) Establishing and maintaining employees' interest in safety.

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- (f) Controlling work habits through adequate and effective supervision.
- (g) Providing proper protective equipment and making its use mandatory.
- (h) Educating and training employees as to the specific hazards of their jobs.
- (i) Investigating incidents to determine cause and taking necessary action to prevent reoccurrence.
- (j) Preparing and maintaining proper and complete incident records to permit evaluation of the safety program.
- (k) Adoption and enforcement of safety rules and safety practices.

### **Section 1.4: Safety Policy Statement**

It is the policy of the County that incident prevention shall be considered of primary importance in all phases of operation and administration. It is the intention of upper management to provide safe and healthy working conditions and to establish and insist upon safe practices at all times by all employees. The prevention of incidents is an objective affecting all levels of our county and its operations. It is, therefore, a basic requirement that each Department Head make the safety of all employees an integral part of his or her regular management function. It is equally the duty of each employee to accept and follow established safety regulations and procedures.

Every effort will be made to provide adequate training to employees. However, if an employee is ever in doubt about how to do a job or task safely, it is his or her duty to ask a qualified person for assistance.

Employees are expected to assist management in incident prevention activities. Unsafe conditions must be reported immediately. Fellow employees that need help should be assisted. Everyone is responsible for the housekeeping duties that pertain to their jobs. The County is sincerely interested in the safety of its employees. It is the employee's responsibility to follow the rules of safety as established for their protection and to use the protective devices. Personal protection, periodic safety inspections of buildings and grounds and areas of responsibility, including hazard awareness and risk management shall be fundamental in our daily operations. Safety training will be implemented on a continuous basis to improve performance of duties and to enhance all employee conditions. Department Heads, Supervisors and superiors at all levels will continually promote safety and situational awareness.

All employees of the County will be expected to take care of themselves and each other. Under no circumstances, except emergency trips to the hospital, should an employee leave the work site without reporting an injury. When someone has an incident, everyone is hurt. Please work safely. Safety is everyone's business.

## ARTICLE II: ACCOUNTABILITY FOR SAFETY

### Section 2.1: Responsibilities for Safety Functions

(a) County Board.

- i. Overall responsibility for safety
- ii. Authorized expenditures for safety
- iii. Approves safety policies as formulated by the Safety Committee
- iv. Proactive involvement in the safety program as recommended by the Safety Committee.

(b) Safety Committee.

- i. The Safety Committee will set policy for and provide oversight of the safety program for the County.
- ii. They shall work closely with Department Heads and Supervisors in formulating safety rules, policies, and procedures.
- iii. They shall assist department in planning and conducting safety meetings and safety education courses.
- iv. They shall prepare and distribute reports to the Department Head indicating effectiveness of the safety program.
- v. They shall make or supervise periodical inspection of work areas for the purpose of discovering unsafe conditions or unsafe practices and shall report any noted incident to the Department Head or Supervisor for corrective action.
- vi. They shall supervise the investigation of all incidents which result in lost time injuries.
- vii. They shall follow-up to ascertain that corrective action has been taken by Department Heads or Supervisors to prevent reoccurrence of incidents.

(c) Insurance Liaison.

- i. The Insurance Liaison acts as liaison between the insurance carrier and Department Heads and Supervisors.
- ii. He works closely with the Board, Department Heads, Supervisors and the Safety Committee to formulate safety rules, policies and procedures.
- iii. The Insurance Liaison maintains the incident record system for the County, receiving reports, forwarding applicable reports to the insurance carrier, and retaining appropriate reports in the County's files.

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- iv. The Insurance Liaison oversees the OSHA record requirements including the posting of the OSHA Form 300A.
- v. The Insurance Liaison serves at the first point of contact for the Department of Labor Inspector. He accompanies the Inspector on an inspection, taking notes and recording what the inspector reviews, and providing any requested reports/records. The Insurance Liaison for Ogle County is the Ogle County Treasurer.

### (d) Department Heads.

- i. The Department Heads will be responsible for the supervision of the safety program within his/her division.
- ii. They shall assure that employees are properly instructed regarding safe working methods and that Supervisors fulfill their assigned responsibilities in regards to safety instruction and supervision.
- iii. They shall assure that safety meetings are scheduled and held as outlined.
- iv. They shall assure that required reports pertaining to injuries, vehicle incidents, and investigations are promptly prepared and forwarded.
- v. They shall encourage the reporting by employees of all unsafe acts, conditions, equipment, etc. and shall take necessary action to correct them.
- vi. They shall require all personnel to comply with safety rules, procedures, and policies, and shall take or recommend appropriate disciplinary action whenever deemed necessary.
- vii. They shall require their Supervisors to determine causes of incidents involving personnel or equipment under their supervision and to recommend measures to prevent similar incidents.

### (e) Supervisors.

- i. Supervisors are responsible to their Department Head for the safety program so far as it pertains to personnel and equipment under their supervision. They are the key personnel of the safety program because they are in the best position to observe the work of their employees.
- ii. They shall give job instruction to subordinates with special emphasis on the hazards of their work to be performed.
- iii. Supervisors shall constantly watch for and immediately correct unsafe conditions and unsafe working practices, reporting to the Department Head those incidents which are beyond the scope of their authority to correct.
- iv. The Supervisor shall promptly inform their Department Head of all incidents involving personnel or equipment under their supervision and shall take immediate steps to investigate each incident to determine its cause.
- v. They shall assure that injured employees report to the doctor whenever they deem that medical treatment is necessary.

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- vi. They shall enforce safety rules, policies, and procedures and shall require the wearing of protective equipment when necessary.
- vii. They shall constantly talk safety to their personnel and demonstrate, by their actions, that they consider safety important.
- viii. They shall inform all their personnel as to the responsibilities of employees as outlined.

(f) Employees.

- i. Each employee is responsible for their own safety, the safety of their fellow workers, and the safety of the general public with regards to their work.
- ii. An employee shall be required to follow safety work practices and to comply with applicable policies and procedures as a condition of employment.
- iii. An employee shall wear protective equipment such as goggles, hard hats, safety shoes, etc., whenever necessary.
- iv. An employee shall promptly inform their Department Head or Supervisor of any injury received while on the job, no matter how minor this injury is or whether or not medical treatment is required.
- v. An employee shall promptly inform their Department Head or Supervisor of any noted items of unsafe equipment, unsafe acts, or hazardous conditions.
- vi. An employee shall obtain specific instruction from their Department Head or Supervisor in all cases where conditions are not completely understood.

### **Section 2.2: Enforcement of Safety Standards**

The County considers the safety of its employees to be very important. The Department Head or Supervisor has the responsibility to enforce the Safety Manual. Failure to follow the Safety Manual can result in discipline per the appropriate bargaining unit contract or Policy Handbook. Employees have the right to appeal the actions of the Department Head or Supervisor using the dispute resolution and grievance (complaint) procedures outlined in the appropriate bargaining unit contract or Policy Handbook.

## ARTICLE III: SAFETY PROGRAM STRUCTURE

### Section 3.1: Executive Safety Committee

- (a) Appointment. The Safety Committee shall be appointed by the County Board Chair bi-annually following the election of the County Board Chair.
- (b) Chair. The Chair of the Committee shall be elected by the members following the bi-annual appointment of the Committee by the County Board Chair.
- (c) Meetings.
  - i. Committee meetings shall be held quarterly on the second Tuesday of the month to correlate with the County Properties/Planning/Zoning Committee meeting date.
  - ii. Regular attendance is strongly encouraged. Members may select an appointee to attend a meeting in his/her place, with full voting privileges extended to the appointee.
  - iii. The secretary will send out notices of meetings to members before the scheduled meeting, along with an agenda, minutes of the last meeting, supporting material, as well as decisions of all appeals brought before the full committee to the employee and their Department Head.
- (d) Duties and Responsibilities.
  - i. Develop and recommend employee safety and health programs that may include education, training, incentive programs, etc.
  - ii. Discuss, formulate, and recommend safety policies and procedures.
  - iii. Strive to have approved safety and health recommendations placed into practice.
  - iv. Review vehicle incident and injury summary reports, and offer suggestions and recommendations to prevent their recurrence.
  - v. Encourage the participation of all County employees by helping them to understand that safety is the responsibility of everyone, not just a few.

### Section 3.2: Incident/Injury Reporting, Policy and Procedure

- (a) Property Damage Incidents. All incidents involving damage to a vehicle being operated for County business shall be reported immediately to the employee's Department Head or Supervisor. Any required police reports are the employee's responsibility. Any other incident causing damage to publicly or privately owned property during official County business shall be reported to the employee's Department Head or Supervisor immediately.
- (b) Injuries. Staff receiving any type of injury while on duty, no matter how minor, shall submit an "**Employee Incident Report**" to the Department Head or Supervisor within

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24 hours or as soon as possible following the injury/incident. Deaths must be reported within 8 hours.

- (c) Exam. At the discretion of the Department Head or Supervisor, the employee may be required to submit to a physical and/or drug exam following an incident or injury. Refusal to comply with the physical and or/drug exam shall be subject to employee discipline, but taking the exam shall not operate to waive any objection or rights the employee may have.
- (d) Reporting. The following reports shall be completed by the designated individual, when applicable and are available at [www.oglecounty.org](http://www.oglecounty.org) on the Safety Committee page.
  - i. The "**Employee Incident Report**" shall be completed by the employee involved in an incident and/or sustaining an injury within 24 hours or as soon as possible following the injury/incident. The Report shall include the date, time, place of incident/injury, how it occurred, type of injury (if applicable), and whether medical assistance was obtained.
  - ii. The "**Witness Statement**" shall be completed by any/all witnesses to any type of incident within 24 hours or soon as possible following the incident and retained by the Department Head.
  - iii. The "**Property Damage Incident Report**" shall be completed by the Department Head, Insurance Liaison or other individual involved with property damage. The Report shall be filed within 24 hours or as soon as possible with the Insurance Liaison.
  - iv. The "**Illinois Form 45: Employers First Report of Injury**" is completed by the Department Head and forwarded within 24 hours or as soon as possible to the Insurance Liaison for Claim processing.

### Section 3.3: Safety and Health Training

Training is one of the most important elements of any injury and illness prevention program. Such training is designed to enable employees to learn their jobs properly, bring new ideas to the workplace, reinforce existing safety policies and put the injury and illness prevention program into action. Training is required for both Supervisors and employees alike. The content of each training session will vary, but each session will attempt to teach the following list:

- (a) The success of the injury and illness prevention program depends on the actions of individual employees as well as a commitment by the Department Heads and Supervisors.
- (b) Each employee's Department Head and/or Supervisor will review the safe work procedures unique to that employee's job, and how these safe work procedures protect against risk and danger.

- (c) Each employee will learn when personal protective equipment is required or necessary, and how to use and maintain the equipment in good condition.
- (d) Each employee will learn what to do in case of emergencies occurring in the workplace.

### **Section 3.4: Safety Orientation of New Employees**

The Department Head or Supervisor will review safety rules and procedures with the new employee pointing out the possible hazards involved in doing the job. The new employee should be checked at frequent intervals, asked about any problems that may have arisen, and be reminded of safe practices. Any tendency to overlook safety procedures should bring a prompt and vigorous warning. The Department Head or Supervisor is responsible for the documentation of the employee's progress or need for re-training.

### **Section 3.5: Inspection Program**

It is the responsibility of each Department Head to monitor the inspection program for their department.

The inspection program is designed to identify unsafe conditions/procedures and take necessary steps to correct them to prevent injuries and damage. If properly done, the inspection program is the most effective tool in managing the safety program. It serves to the employees as an illustration of the County's sincere attitude towards safety.

Inspections will be conducted by the insurance company. In addition, Department Heads can request an inspection of their department at any time.

## ARTICLE IV: FEDERAL AND STATE COMPLIANCE

### Section 4.1: US Department of Labor Occupational Safety & Health Administration and Illinois OSHA

(a) OSHA Reporting Guidelines. The US Department of Labor Occupational Safety and Health Administration (OSHA) require certain employers to prepare and maintain records of work-related injuries and illnesses. The Illinois Department of Labor enforces these guidelines and has the authority to issue citations and penalties for non-compliance.

i. OSHA Form 300 – Log of Work Related Injuries and Illnesses.

- 1) Records those work related injuries and illnesses that result in death, loss of consciousness, days away from work, restricted activity or job transfer, or medical treatment beyond first aid.
- 2) Compiled by the appropriate Department Head or the Insurance Liaison.
- 3) Supplemental records of each injury are maintained on “Illinois Form 45: Employers Report of Injury”.
- 4) The incident data must be logged on the form within seven calendar days of the employer’s notification.
- 5) The form must be retained by the appropriate Department Head or the Insurance Liaison for five years following the year to which they pertain.

ii. OSHA Form 300A – Summary of Work-Related Injuries and Illnesses

- 1) Annual summary of the work-related injuries or illness reported on the OSHA Form 300.
- 2) Compiled by the appropriate Department Head or the Insurance Liaison.
- 3) Must be posted in a location visible by employees no later than Feb. 1 of the year following the year covered by the form and keep it posted until April 30 of that year.
- 4) The form must be retained by the appropriate Department Head or the Insurance Liaison for five years following the year to which they pertain.

(b) Guidelines for Handling an Illinois Department of Labor Inspection

- i. Under the Illinois Health and Safety Act, the Illinois Department of Labor is charged with the enforcement of safety and health guidelines as outlined in OSHA Standards 29 CFR 1910 and 1926. Other adopted rules and reference standards may come into play in the future. Local units of government should be prepared for handling a safety inspection by an Illinois Department of Labor Inspector.

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In most instances a Department of Labor Inspector will check in with Administration of the County. However if the inspector shows up at an off-site facility, he/she should be directed to the County Board Chair's office and the Insurance Liaison should be notified.

- ii. Insurance Liaison. The Insurance Liaison should greet the Department of Labor Inspector and ask to know why the inspection is to take place. The Department of Labor is required to notify the County as to whether or not this is a target inspection or the result of an employee complaint. If an employee complaint has been filed, the County should request to see a copy of the complaint. The Insurance Liaison should be prepared to show the Department of Labor Inspector the County's OSHA 300 Log. This log should be maintained with the OSHA Form 45's. Other reference material the Insurance Liaison should have available are the Illinois Department of Labor Safety Standards and Safety Committee minutes, self-inspection reports, and other related information. The Department of Labor Inspector should request to see the OSHA 300 - 300A Form and may ask to see where the County keeps the Department of Labor standards. The other information could be shown to the Department of Labor Inspector to show goodwill and to outline some of the safety activities being undertaken by the County. However, showing the Department of Labor Inspector anything above and beyond the OSHA 300 Log and Form 45 is purely optional.

If the inspection is a result of an employee complaint, the inspector should be taken directly to the area of the complaint. The inspector need not be directed towards other areas not specifically outlined in the complaint. If the Inspector is there for a general survey, the Insurance Liaison and/or Department Heads and Supervisors should be courteous and show the inspector around the facilities.

During the inspection, the Insurance Liaison or designated representative should take notes and record what the inspector reviews. It may be beneficial to take photographs of those areas that the inspector cites for standards violations. Any hazards which could be corrected immediately should be done so and the Department of Labor Inspector should be questioned throughout the inspection. When entering various areas, employee representatives should be summoned to assist the inspector and Insurance Liaison in conducting the inspection. The insurance Liaison may ask that the appropriate Union designate a representative and an alternate.

At the closing conference, the inspector should review any violations. At this time, the County will have the opportunity to pose any objections to the citations. In addition, the Insurance Liaison or other designated representatives will be able to discuss and negotiate an abatement period for any hazards noted.

In summary, the following steps should be reviewed with, Department Heads, Supervisors, and other selected personnel.

- 1) Upon notification that the Department of Labor Inspector is onsite, the Inspector should be directed to the County Board Chair's office.
- 2) The Insurance Liaison or designated safety representative should be summoned.

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- 3) The OSHA 300 Log, Illinois Form 45, and Department of Labor Standards should be made available.
- 4) The Insurance Liaison, area employee representatives, and/or Department Heads should be involved in guiding the inspector through facilities.
- 5) If the inspector is there regarding an employee complaint, the inspector should be guided directly to the area of complaint.
- 6) During the inspection, notes should be taken as to the inspector's comments and samples and/or photographs taken to record conditions at the time of the survey.
- 7) Additional activities, self-inspections, and other safety activities that the County is involved in could be shared with the inspector at the closing conference.
- 8) Provisions should be made for notification of other personnel if the Insurance Liaison or other designated safety representative is not available. Alternates for Insurance Liaison, Department Heads, or Supervisors should be determined.

### **Section 4.2: Hazard Communication Standard (29CFR 1910.1200)**

- (a) Purpose. The purpose of hazard substance communication is to establish procedures to comply with the OSHA Hazard Communication Standard. This is done by compiling a hazardous chemicals list, by using Safety Data Sheets (SDS), by ensuring that containers are labeled and by providing employees with training.

This program applies to all work operations where employees may be exposed to hazardous substances under normal working conditions or during an emergency situation.

The program will be reviewed and updated as necessary. The written program will be kept at the office with the SDS file and may be reviewed or copied by any employee.

Under this program, employees will be informed of the contents of the Hazard Communication Standard, the hazardous properties of chemicals with which they work, safe handling procedures, and measures to take to protect themselves from these chemicals. Employees will also be informed of the hazards associated with non-routine tasks and the hazards associated with chemicals in unlabeled containers.

- (b) Department Heads and/or Supervisors Are Responsible For:

- i. Establishing and monitoring the SDS program;
- ii. Ensuring all Hazardous Substance containers are labeled;
- iii. Requesting a SDS every time a Hazardous Substance is purchased;
- iv. Maintaining a SDS file for all such Hazardous Substances;

- v. Training all new employees on the Right-to-Know and Hazardous Substances requirements.

(c) List of Hazardous Chemicals.

A list of all hazardous chemicals used in the facility will be kept and updated as necessary. The list of chemicals identifies all of the chemicals used in work areas. A separate list is available for each location. Each list shall also identify the corresponding SDS for each chemical.

(d) Safety Data Sheets (SDS).

SDS's provide the specific information concerning the chemicals used. The Department Head or Supervisor will maintain a binder with an SDS on every substance on the list of hazardous chemicals. The SDS will be a fully completed OSHA Form 174 or equivalent. The Department Head or Supervisor will ensure that each worksite maintains an SDS for hazardous materials at that location. SDS's will be made readily available during all shifts.

(e) Labels and Other Forms of Warning.

Labels, as defined in the HCS, are an appropriate group of written, printed, or graphic informational elements concerning a hazardous chemical that are affixed to, printed on, or attached to the immediate container of a hazardous chemical, or the outside packaging. The HCS requires chemical manufacturers, importers, or distributors to ensure that each container of hazardous chemical leaving the workplace is labeled, tagged or marked with the following information: product identifier; signal work; hazard statement(s); precautionary statement(s); and pictogram(s); and name address and telephone number of the chemical manufacturer, importer, or other responsible party.

The Department Head or Supervisor will ensure that all hazardous chemicals at the locations are properly labeled and updated as necessary. Labels should be marked with the following: product identifier; signal work; hazard statement(s); precautionary statement(s); and pictogram(s); and name address and telephone number of the chemical manufacturer, importer, or other responsible party.

If there are a number of stationary containers within a work area that have similar contents and hazards, signs will be posted on them to convey the hazard information. Written materials (SDS) that correspond with labeled containers will be made readily available to employees during their work shift.

If chemicals are transferred from a labeled container to a portable container that is intended only for immediate use, no labels are required on the portable container. Pipes or piping systems will not be labeled but their contents will be described in training sessions.

If an employee discovers an unlabeled container they suspect might contain a hazardous substance, they should immediately advise the Department Head or Supervisor. The Department Head or Supervisor shall review the container's label and the SDS for that substance. If appropriate, they shall prepare a hazardous substance label for that container.

(f) Training.

Everyone who works with or is potentially exposed to hazardous chemicals will receive training on the Hazardous Communication Standard and the safe use of those hazardous chemicals either by the Department Head or Supervisor. A program that uses both audio visual materials and classroom type training may be prepared for this purpose. Whenever a new hazard is introduced, additional training will be provided. Regular safety meetings will also be used as needed. Department Heads or Supervisors will be trained regarding hazards and appropriate protective measures so they will be able to answer questions from employees and provide daily monitoring of safe work practices.

The training plan will emphasize these items:

- i. Summary of the standard and written program;
- ii. Chemical and physical properties of hazardous materials (e.g., flash point, reactivity) and methods that can be used to detect the presence or release of chemicals;
- iii. Physical hazards of chemicals (e.g., potential for fire, explosion, etc.);
- iv. Health hazards, including signs and symptoms associated with exposure to chemicals and any medical condition known to be aggravated by exposure to the chemical;
- v. Procedures to protect against hazards (e.g., personal protective equipment required, proper use, and maintenance, work practices or methods to assure proper use and handling of chemicals);
- vi. Work procedures to follow to assure protection when cleaning hazardous chemical spills and leaks;
- vii. Instruction on how to read and interpret the information on both labels and SDS's and how employees may obtain additional information;

(g) Contractor Employees

- i. The appropriate Department Head or Supervisor will advise outside contractors in person of any chemical hazard that may be encountered in the normal course of their work on the premises, the labeling system in use, the protective measures to be taken, and the safe handling procedures to be used. They will also inform these individuals of the location and availability of SDS's. Each contractor bringing in chemicals on site must provide the County with the appropriate hazard information on these substances, including the labels used and the precautionary measures to be taken in working with these chemicals.

(h) Additional Information

- i. All employees, and their designated representatives, can obtain further information on this program, the hazard communication standard, applicable SDS's, and chemical information lists from their Department Head or Supervisor.

**Section 4.3: Hazard Communication Program**

Name of Agency/Institution/University Campus: Ogle County

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

**I. PURPOSE**

The purpose of this Written Hazard Communication program is to ensure that:

1. Hazardous substances present in the work place are properly identified and labeled.
2. Employees have access to information on the hazards of these substances.
3. Employees are provided with information on how to prevent injuries or illnesses due to exposure to these substances.
4. Identify by job title who has the responsibility for maintaining the program, the SDS sheets, conduct training, etc.

**Note:** This program will be available to all employees for review and a copy will be located in the following area(s):

**Location:**

- 1.
- 2.
- 3.

**II. AUTHORITY AND REFERENCE**

Occupational Safety and Health Administration (OSHA) 29 CFR 1910.1200

Dept. of Commerce (Chapter 32) (COMM) 32.15

### III. HAZARD DETERMINATION

- A. A "hazardous substance" is a physical or health hazard that is listed as such in either:
1. 29 CFR Part 1910, Subpart Z, *Toxic and Hazardous Substances*, Occupational Safety and Health Administration.
  2. *Threshold Limit Values for Chemical Substances and Physical Agents in the Work Environment* (latest edition), American Conference of Governmental Industrial Hygienists (ACGIH).
- B. A "hazardous substance" is regarded as a carcinogen or potential carcinogen if it is identified as such by:
1. National Toxicology Program (NTP), *Annual Report on Carcinogens* (latest edition).
  2. International Agency for Research on Cancer (IARC) *Monographs* (latest edition).
  3. 29 CFR Part 1910, Subpart Z, *Toxic and Hazardous Substances*, Occupational Safety and Health Administration.
- C. Manufacturers, importers and distributors will be relied upon to perform the appropriate hazard determination for the substances they produce or sell.
- D. The following materials are not covered by the Hazard Communication Standard:
1. Any hazardous waste as defined by the Solid Waste Disposal Act, as amended by the Resource Conservation and Recovery Act of 1976, as amended (42 USC 6901 et seq.) when subject to regulations issued under that act by the Environmental Protection Agency.
  2. Tobacco or tobacco products.
  3. Wood or wood products. **NOTE:** Wood dust is not exempt since the hazards of wood dust are not "self-evident" as are the hazards of wood or wood products.
  4. Consumer products (including pens, pencils, adhesive tape) used in the work place under typical consumer usage.
  5. Articles (i.e. plastic chairs).
  6. Foods, drugs, or cosmetics intended for personal consumption by employees while in the work place.
  7. Foods, drugs, cosmetics, or alcoholic beverages in retail stores packaged for retail sale.
  8. Any drug in solid form used for direct administration to the patient (i.e. tablets or pills).

**IV. APPLICATION**

This program applies to the use of any hazardous substance which is known to be present in the workplace in such a manner that employees may be exposed under normal conditions of use or in a foreseeable emergency.

**V. RESPONSIBILITY FOR COMPLIANCE**

- A. The administration of this program will be the responsibility of \_\_\_\_\_. The administrative responsibilities of this individual/position will include:
1. Identification of the employees to be included in the Hazard Communication Program.
  2. Development and maintenance of a hazardous substance master inventory.
  3. Coordination and supervision of employee training.
  4. Coordination and supervision of the facility's container labeling program.
  5. Coordination of any necessary exposure monitoring.
  6. Coordination and supervision of required recordkeeping.
  7. Periodic evaluation of the overall program.
- B. Employees are responsible for following all safe work practices and using proper precautions required by the guidelines in this program.

**VI. HAZARDOUS SUBSTANCE INVENTORY**

A. \_\_\_\_\_ is responsible for compiling, maintaining, and updating, when necessary, a master list of hazardous substances used or produced in the facility. The inventory list will include the common identity or trade name of the product and the name and address of the manufacturer. Hazardous substances will be listed alphabetically by manufacturer. Substances which are not in containers will also be included on the inventory list, e.g., welding fumes, carbon monoxide from a fork lift, etc. (See Form #1)

**VII. LABELING**

A. \_\_\_\_\_ is responsible for evaluating labels on incoming containers. Each label must contain the following information:

1. Identity of the substance.
2. Appropriate hazard warning.
3. Name and address of the manufacturer.

B. If the label is not appropriate, \_\_\_\_\_ will notify the manufacturer (or supplier) that the label is not adequate. (See Form #2)

\_\_\_\_\_ will send a second request to the manufacturer if the correct label is not received within 30 days. (See Form #3)

\_\_\_\_\_ is responsible for preparing an appropriate label if one is not supplied by the manufacturer within the second 30 days.

A container will not be released for use until an appropriate label is affixed to the container.

C. Labels will be removed if they are incorrect. When the container is empty it may be used for other materials provided it is properly cleaned and relabeled.

D. Each department supervisor is responsible for ensuring that all containers used in his/her department are labeled properly and remain legible. Defacing labels or using them improperly is prohibited.

E. Unlabeled portable containers, such as pails and buckets, should be used by one employee and emptied at the end of each shift. If the secondary containers are used by more than one employee and/or its contents are not emptied at the end of the shift, the department supervisor is responsible for labeling the container with either a copy of the original label or with a generic label which has a space available for appropriate hazard warnings.

\*F. Piping systems shall be painted at access points and every 10 feet where the piping is 8 feet or closer to employee contact.

1. Piping shall be painted as follows:

- a. (substance)(color)
- b. (e.g., oxygen) (e.g., green)

**VIII. SAFETY DATA SHEETS**

A. SDS's will be available to the employees on all hazardous substances to which there is potential or actual exposure. \_\_\_\_\_ is responsible for ensuring that SDS are available on all incoming products. A product will not be released for use until a completed SDS is on file. (See Form #4)

If the SDS is not available, \_\_\_\_\_ will notify the manufacturer that SDS is needed. (See Form #5).

\_\_\_\_\_ will send a second request to the manufacturer if the SDS is not received within 30 days. (See Form #6)

B. \_\_\_\_\_ is responsible for the review of all incoming SDS's. If the SDS is not complete, it will be returned to the manufacturer with a request for the missing **information**. (See Form #7)

\_\_\_\_\_ will send a second request for the missing information if a complete SDS is not received within 30 days. (See Form #8)

\*C. \_\_\_\_\_ will request an SDS on the purchase orders of all new products. (See Form #9)

D. \_\_\_\_\_ is responsible for compiling and updating the master SDS file. This file will be kept at (Name of location).

Copies of SDS's will be kept in the following areas:

**Department**

**Location**

E. Employees will have access to these SDS's during all work shifts. Copies will be made available upon request to \_\_\_\_\_. (See Form #10)

F. \_\_\_\_\_ is responsible for updating the data sheets to include new information as it is received. A notice will be posted to inform employees that revised information has been received. (See Form #11)

**IX. EMPLOYEE TRAINING**

- A. Prior to starting work with hazardous substances, each employee will attend a Hazard Communication Training Session where they will receive information on the following topics:
1. Policies and procedures related to the Hazard Communication Standard.
  2. Location of the written Hazard Communication Program.
  3. How to read and interpret an SDS.
  4. Location of SDS's.
  5. Physical and health hazards of hazardous substances in their work area.
  6. Methods and observation techniques to determine the presence or release of hazardous chemicals.
  7. Work practices that may result in exposure.
  8. How to prevent or reduce exposure to hazardous substances.
  9. Personal protective equipment.
  10. Procedures to follow if exposure occurs.
  11. Emergency response procedures for hazardous chemical spills.
- B. Upon completion of the training program, each employee will sign a form documenting that he/she has received the training. (See Form 12)
- C. Whenever a new employee is transferred or hired, he/she will be provided training regarding the Hazard Communication Standard. The training session will be conducted by \_\_\_\_\_ before the start of his/her employment if possible.
- D. (\_\_\_\_\_) is responsible for identifying and listing any non-routine hazardous task performed at this facility. (\_\_\_\_\_) will conduct training on the specific hazards of the job and the appropriate personal protective equipment and safety precautions and procedures. (See Form 13)
- E. When a new substance is added to the inventory list, (\_\_\_\_\_) is responsible for reviewing the SDS for potential health effects. If the product presents a new health hazard (causes health effects unlike those covered in the training session), the ((\_\_\_\_)) is responsible for notifying all affected

employees about the new health effects which result from exposure to the new substance.

\*A copy of the new Safety Data Sheet (SDS) will be posted by (\_\_\_\_\_) for 30 days. Both the new Safety Data Sheet and the Employees New Substance Signature Form will be placed above or near the SDS information binder. Each affected employee must read the SDS and sign the signature form. (See Form #11)

## X. INFORMATION TO CONTRACTORS

- A. (\_\_\_\_\_) is responsible for providing outside contractors with the following information:
1. Hazardous chemicals to which they may be exposed as a result of working in this facility.
  2. Suggestions for appropriate protective measures.
- B. Contractors that are potentially exposed to hazardous chemicals present at the facility will not be allowed to begin work until they have been provided information concerning these hazards and have signed a form to document this exchange. (See Form #14)
- C. (\_\_\_\_\_) is responsible for obtaining information from contractors on all hazardous substances to which State employees may be exposed as a result of the contractor's work at the facility. (See Form #15). (\_\_\_\_\_) will notify

affected employees about the health affects that may result from exposure to each substance.

## XI. PERSONNEL POLICIES

When an employee is not following safety and health rules regarding working with a hazardous substance, disciplinary action will be taken.

## XII. RECORD KEEPING

- A. All SDS's will be kept for a period of \_\_\_\_ years after the use of the substance has been discontinued. **EXCEPTION:** If an employee exposure to a particular hazardous chemical occurs, the SDS for that product will become part of the employee's medical records.

Medical records must be kept for **30** years.

**Note:** “Exposure” or “exposed” means that an employee is subjected to a toxic substance or harmful physical agent in the course of employment through any route of entry (inhalation, ingestion, skin contact or absorption, etc.), and includes past exposure,

but does not include situations where the employer can demonstrate that the toxic substance or harmful physical agent is not used, handled, stored, generated, or present

in the workplace in any manner different from typical non-occupational situations.

\*B. The master inventory list will also be kept for \_\_\_\_ years.

### **XIII. COMMUNITY HAZARD COMMUNICATION**

(\_\_\_\_\_) is responsible for responding to requests from members of the community on hazardous substances used in the facility.

### **\* XIV. EMERGENCY RESPONSE PROCEDURES FOR HAZARDOUS CHEMICAL SPILLS**

A. When a hazardous chemical spill occurs, follow these procedures:

1. Move all employees away from spill to a safe environment.
2. Call 911 or the designated emergency response number in your area to notify the necessary response team for the hazardous chemical spill.
3. Retrieve the Hazard Communication Information Binder, if possible.
  - a. Locate the SDS for the hazardous chemical which spilled.
  - b. If requested, provide the SDS to the Emergency Response Team.

**Note:** Do not try to contain the spill. The Emergency or Hazardous Material Response Team is trained to deal with hazardous chemical spills.

**XV. PROGRAM EVALUATION**

(\_\_\_\_\_) will conduct an evaluation of the Hazard Communication program annually. The individual responsible for the items identified for improvement will be notified in writing. It is expected that action will be taken to correct the item within five working days. (See Form #16)

- \* At least annually, \_\_\_(indicate number) employees will be interviewed to determine the effectiveness of the Hazard Communication Program. Each interview will assess the employee's retention of information given during the training session, use of SDS's and response to chemical spills (if applicable). The results of each interview will be recorded on the Employee Interview Form. (See Form #17) The Employee Interview Form will be retained on file for 12 months.

This written program has been developed by the Bureau of State Risk Management, Department of Administration and is available on computer disk. (File name *a:\hazcom.doc*). It may be adapted to fit the particular needs of your facility. The program was adapted from a written program originally developed by the Occupational Safety and Health Administration (OSHA).

**Note:** When there is an asterisk (\*) placed in front of a guideline, then this policy is not required by the Hazard Communication Standard or the Employees Right-To-Know Law.

**LIST OF FORMS AND LETTERS**

Form 1	Hazardous Substance Inventory
Form 2	Letter to Request a Complete Label
Form 3	Second Request for a Complete Label
Form 4	Checklist of Required SDS Information
Form 5	Letter to Request a Safety Data Sheet
Form 6	Second Request for a Safety Data Sheet
Form 7	Letter to Request a Complete SDS
Form 8	Second Request for a Complete SDS
Form 9	Letter to Accompany Purchase Order
Form 10	Request for Chemical Hazard Information
Form 11	Employee's New Substance Signature Form

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Form 12	Employee Hazard Communication Training Record
Form 13	Non-Routine Hazardous Task Training Documentation Form
Form 14	Documentation of Information Given to Contractors
Form 15	Letter to Contractors
Form 16	Hazard Communication Annual Program Summary
Form 17	Employee Hazard Communication Interview Form

### Section 4.4: Blood Borne Pathogens (1910.3000)

#### (a) Applicability.

- i. Reasonable Expectation of Exposure. Employees with a reasonable expectation of contact with bodily fluids are subject to the training requirements as outlined in 29CFR 1910.1030. Two employee groups within the County which have such a reasonable expectation are as follows:
  - 1) The Public Health Nurses in the Health Department who provide vaccinations and possibly draw blood from clients.
  - 2) The Sheriff's Deputies as First Responders to incidents within the County.
- ii. Incidental Risk of Exposure. Employees in other County Departments that are trained in First Aid would have, at most, only incidental contact in the event of an injury involving bodily fluids of which blood is the most common. These employees should be trained in the following subjects:
  - 1) Treatment of all bodily fluids as if contaminated;
  - 2) Universal precautions such as the use of surgical gloves and disposal of used gloves in biohazard bags;
  - 3) Importance of reasonable hygienic practices such as hand washing before and after administering first aid;
  - 4) Clean up using a 5% solution of bleach and disposal of cleaning materials in a biohazard bags;
  - 5) Following the County's Exposure Control Plan if they believe that an exposure to bodily fluids has occurred to direct bodily fluid contact with broken or abraded skin or splashing into the eyes or mouth;

- (b) Purpose. The following Exposure Control Plan (ECP) is provided to eliminate or minimize occupational exposure to blood borne pathogens in accordance with OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Blood Borne Pathogens."

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The ECP is a key document to assist the County in implementing and ensuring compliance with the standard, thereby protecting employees. This ECP includes:

- i. Determination of employee exposure;
- ii. Implementation of various methods of exposure control, including:
  - 1) Universal precautions
  - 2) Engineering and work practice controls
  - 3) Personal protective equipment, and
  - 4) Housekeeping
- iii. Hepatitis B vaccination;
- iv. Post-exposure evaluation and follow-up;
- v. Communication of hazards to employees and training;
- vi. Recordkeeping; and
- vii. Procedures for evaluating circumstances surrounding an exposure incident.

- (c) Administrative Duties. The Department Head is responsible for the implementation of the ECP. The Department Head will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures. Those employees who are determined to have occupational exposure to blood or other potentially infectious materials must comply with the procedures and work practices outlined in this ECP.

Applicable departments will maintain and provide all necessary personal protective equipment (PPE), engineering controls (e.g., sharps containers), labels, and red bags as required by the standard. The department will ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes.

The Department Head will be responsible for ensuring that all medical actions required are performed and that appropriate employee health and OSHA records are maintained.

The Department Head or Supervisor will be responsible for training, documentation of training, and making the written ECP available to employees, OSHA, and NIOSH representatives.

- (d) Methods of Implementation and Control

- i. Universal Precautions. All employees will utilize universal precautions.
- ii. Exposure Control Plan. Employees covered by the blood borne pathogens standard shall receive an explanation of this ECP during their initial training session. It will also be reviewed in their annual refresher training. All employees have an opportunity to review this plan at any time during their work shifts by contacting the Department Head. If requested, an employee will be provided with a copy of the ECP free of charge and within 15 days of the request.

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The Department Head is responsible for reviewing and updating the ECP to reflect any new or modified tasks and procedures that affect occupational exposure and to reflect new or revised employee positions with occupational exposure. The review and update of such plans must also:

1. Reflect changes in technology that eliminate or reduce exposure to blood borne pathogens.
2. Document consideration and implementation of appropriate commercially available and effective safer medical devices designed to eliminate or minimize occupational exposure. The Department Head is responsible for documenting all devices considered.

(e) Engineering and Work Practice Controls. Engineering and work practice controls will be used to prevent or minimize exposure to blood borne pathogens. The specific engineering controls and work practice controls used are listed below:

- i. All bodily fluids of another shall be considered contaminated or potentially infectious material and protective procedures shall be followed when handling such material or assisting any individual.
- ii. All employees are required to report any exposure incident as soon as feasible and no later than the end of the shift during which the exposure occurred.
- iii. Any employee involved in emergency first aid procedures shall follow the guidelines for universal precautions and use all personal protective equipment as required.

The Safety Committee will identify the need for changes in engineering control and work practices through solicitation of input from managerial and non-managerial employees, as well as evaluate the need for new procedures or new products on an ongoing basis.

(f) Personal Protective Equipment (PPE). PPE is provided to employees at no cost to them. Training is provided by the Department Head or Supervisor in the use of the appropriate PPE for the tasks or procedures employees will perform. The types of PPE available to employees are listed by department in section 3 of the Exposure Control Plan and include but are not limited to: gloves, eye protection, respiratory protection, etc.

PPE is located in assigned areas, if not directly issued to an employee. Additional personal protective equipment can be obtained from the Department Head or Supervisor. All employees using PPE must observe the following precautions:

- i. Personal protective equipment will be chosen based on the anticipated exposure to blood or other potentially infectious materials.
- ii. The protective equipment will be considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach the employee's clothing, skin, eyes, mouth or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used.

In work areas where there is reasonable likelihood of exposure to blood or other potentially infectious materials, employees are not to eat, drink, apply cosmetics or lip

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balm, smoke or handle contact lenses. Food and beverages are not to be kept in refrigerators, freezers, shelves, cabinets or counter tops or bench tops where blood or other potentially infectious materials are present.

- (g) Handling used PPE. Employees whose clothing comes into contact with bodily fluids of an unknown nature as a result of work related activities shall be considered contaminated. This may include civilian clothing, uniforms or personal protective equipment.
- i. If a garment is penetrated by blood or other potentially infectious materials, the employee shall immediately or as soon as possible, and before reporting to another job assignment, report back to the facility and remove the garment and place it in a red biohazard bag for laundering by the employer.
  - ii. Soiled/contaminated laundry as described above shall be washed following normal laundry cycles and the clothing manufacturers guidelines for laundering.
  - iii. Personnel involved in the bagging, transport and laundering of contaminated clothing shall wear protective gloves.
  - iv. Boots and leather goods may be brush scrubbed with soap and hot water to remove contamination.
  - v. Disposable personal protective equipment such as gloves, gowns and face shields or masks shall be placed in special waste containers marked BIOHAZARD.
- (h) Housekeeping. Regulated waste is placed in containers that are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded (see Labels section), and closed prior to removal to prevent spillage or protrusion of contents during handling.

The procedure for handling other regulated waste is:

- i. Used equipment from an emergency incident shall be bagged and transported to the designated cleaning area. Burn boxes designated for contaminated equipment must have the biohazard symbol.
- ii. All infectious waste shall be placed in red infectious waste bags.
- iii. A specific area for cleaning contaminated equipment will be used separate from areas used for any food preparation.
- iv. This area shall not be used for the cleaning of SCBA face pieces.
- v. The area must be conspicuously marked with limited access to prevent incidental exposures.
- vi. Equipment will be disinfected following any contamination by a potentially infectious substance by using an approved disinfecting solution applied with either a spray bottle applicator or liquid applied by a sponge. Personnel will utilize personal protective equipment during the entire application and cleaning.

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- vii. Initial clean-up of blood or other potentially infectious materials shall be followed with the use of an approved hospital disinfectant chemical germicide that is tuberculocidal or a solution of 5.5 percent sodium hypochlorite (household bleach) diluted 1:10 with water.
  - viii. All contaminated work surfaces will be decontaminated after completion of procedures and immediately or as soon as feasible after any spill of blood or other potentially infectious materials, as well as at the end of the work shift if the surface may have become contaminated since the last cleaning.
  - ix. Bins and pails (e.g., wash or emesis basins) are cleaned and decontaminated as soon as feasible after visible contamination.
  - x. Broken glassware that may be contaminated is picked up using mechanical means, such as a brush and dust pan.
- (i) Labels. Department Heads or Supervisors will ensure warning labels are affixed or red bags are used as required if regulated waste or contaminated equipment is brought into the facility. Employees are to notify their Department Head or Supervisor if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc., without proper labels.
- (j) Hepatitis B Vaccination. For applicable departments, the Department Head, Supervisor or other qualified instructor will provide training to employees on hepatitis B vaccinations, addressing the safety, benefits, efficacy, methods of administration, and availability. The hepatitis B vaccination series is available at no cost after training and within 10 days of initial assignment to employees identified in the exposure determination section of this plan. Vaccination is encouraged unless:
- i. Documentation exists that the employee has previously received the series,
  - ii. Antibody testing reveals that the employee is immune, or
  - iii. Medical evaluation shows that vaccination is contraindicated.

However, if an employee chooses to decline vaccination, the employee must sign a declination form. Employees who decline may request and obtain the vaccination at a later date at no cost. Documentation of refusal of the vaccination is kept by the Department Head. The "*Hepatitis B Vaccine Declination*" form is available in the appendix of this manual. Vaccination will be provided by an approved health care provider.

- (k) Post-exposure Evaluation and Follow-Up. An immediately available confidential medical evaluation and follow-up will be conducted. Following the initial first aid (clean the wound, flush eyes or other mucous membranes, etc.), the following activities will be performed:
- i. Following an employee's report of an exposure incident, the employee may immediately have a medical evaluation at the Rochelle Hospital and any follow-up evaluations recommended by the physician. All such reports shall be confidential.

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- ii. As required by OSHA regulation, medical records on all HBV and/or HIV, immune evaluations, and exposure records shall be maintained.
- iii. Exposure records shall include documentation of route of exposure, circumstances of exposure, identification and documentation of source individual if feasible and medical monitoring of exposed employee.
- iv. The Department Head shall keep and maintain all such records in a strictly confidential manner.
- v. The source individual's blood shall be tested for HBV and HIV as soon as feasible but only with the prior consent of the individual. If the source individual is already known to be infected with HBV or HIV, then testing is not necessary for the known infection.
- vi. Results of the source individual's testing shall be made available to the exposed employee along with regulations concerning disclosure of the identity and infectious status of the source individual.

The exposed employee's blood shall be collected as soon as feasible and then tested after consent is obtained. The employee should consent to an immediate baseline blood collection, but may refuse to permit HIV serologic testing. In such cases, the sample shall be preserved for at least 90 days to permit the employee to elect to have the baseline sample tested.

- (l) Administration of Post-Exposure Evaluation and Follow-Up. The Department Head and/or Supervisor ensures that health care professional(s) responsible for employee's hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of OSHA's blood borne pathogens standard.

The Department Head and/or Supervisor are responsible for ensuring the health care professional evaluating an employee after an exposure incident receives the following:

- i. A copy of the OSHA regulation and all information regarding the employee's duties;
- ii. Exposure and prior employment medical information on HIV and HBV procedures and medical records.

The Department Head provides the employee with a copy of the evaluating health care professional's written opinion within 15 days after completion of the evaluation.

- (m) Procedures for Evaluating the Circumstances Surrounding an Exposure Incident. The Department Head and/or Supervisor will review the circumstances of all exposure incidents to determine if proper precautions were taken when completing the task or if revisions are needed in standard operating procedures. If it is determined that revisions need to be made, the Department Head will ensure that appropriate changes are made to this ECP.

- (n) Employee Training. All employees who have occupational exposure to blood borne pathogens receive training conducted by the Department Head, Supervisor or other qualified instructor.

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All employees who have occupational exposure to blood borne pathogens receive training on the epidemiology, symptoms, and transmission of blood borne pathogen diseases. In addition, the training program covers, at a minimum, the following elements:

- i. Contents of the standard;
- ii. This exposure control policy;
- iii. Types of controls available and use of protective equipment;
- iv. The Hepatitis B vaccination program;
- v. Emergency procedures;
- vi. Post exposure procedures;
- vii. Contaminated materials, clothing control, and laundering disposal procedures.

### (o) Recordkeeping

- i. Training Records. Training records are completed for each employee upon completion of training. These documents will be kept for at least three years by the appropriate department. The training records include dates, attendees, program content and instructors.

Employee training records are provided upon request to the employee or the employee's authorized representative within 15 working days. Such requests should be addressed to the Department Head or Supervisor.

- ii. Medical Records. Medical records are maintained for each employee with occupational exposure in accordance with OSHA Standard 29 CFR 1910.1020, "Access to Employee Exposure and Medical Records." The Department Head is responsible for maintenance of the required medical records. These confidential records are kept for at least the duration of employment plus 30 years.

Employee medical records are provided upon request of the employee or to anyone having written consent of the employee within 15 working days. Such requests should be sent to the Department Head.

- i. OSHA Recordkeeping. An exposure incident is evaluated to determine if the case meets OSHA's Recordkeeping Requirements (29 CFR 1904). This determination and the recording activities are done by the Insurance Liaison.

**Section 4.5: Exposure Control Plan [ECP]**

**1. OVERVIEW**

Ogle County is committed to providing a safe and healthful work environment for our entire staff. This is our plan to eliminate or minimize occupational exposure to bloodborne pathogens.

Employees who have occupational exposure to blood or other potentially infectious material (OPIM) must follow the procedures and work practices in this plan.

Employees can review this plan at any time during their work shifts. We will provide a copy, free of charge, to an employee within 15 days of a request.

This plan includes:

- Overview
- Identify employees who are at risk for exposure
- Controlling Employee Exposure to Bloodborne pathogens
- Employee Training and Hazardous Communication
- Post Exposure Evaluation and Follow-up
- Recordkeeping

**Note:**

Part-time, temporary, contract, and per diem employees are covered by WAC 296-823, Occupational Exposure to Bloodborne Pathogens. Be sure to describe how you will meet the requirements for these employees.

**2. IDENTIFY EMPLOYEES WHO ARE AT RISK FOR EXPOSURE**

The following are job classifications in our establishment in which ALL employees have occupational exposure to bloodborne pathogens:

JOB TITLE	DEPARTMENT/LOCATION
<i>(example: Phlebotomist)</i>	<i>(example: Clinical Lab)</i>

The following are job classifications in our establishment in which **SOME** employees have occupational exposure to bloodborne pathogens:

JOB TITLE	DEPARTMENT/LOCATION	TASK/PROCEDURE
<i>(example: Housekeeper)</i>	<i>(Environmental services)</i>	<i>(Handling Regulated Waste)</i>

Contact names and phone numbers:

\_\_\_\_\_ is/are responsible for implementing the exposure control plan.

\_\_\_\_\_ will maintain, review, and update the exposure control plan at least annually, and whenever necessary to include new or modified tasks and procedures.

\_\_\_\_\_ will make this plan available to employees, and WISHA (Washington Industrial Health and Safety Act) representatives.

\_\_\_\_\_ will be responsible for making sure all medical actions required are performed, and that appropriate employee medical records are maintained

\_\_\_\_\_ will make sure this list is kept up-to-date.

**3. CONTROLLING EMPLOYEE EXPOSURE TO BLOODBORNE PATHOGENS (BBP)**

We use the following methods to control employee exposure:

**A. Infection control or isolation system used:**

*(List the following: the infection control or isolation system you will be using, a description of the system, and how the system applies to your workplace or a reference to the appropriate policies and procedures.)*

All employees must use: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ is the person to contact if you have questions regarding this system.

**B. Safer medical devices and equipment used to minimize occupational exposure**

The use of safer medical devices and equipment will prevent or minimize exposure to bloodborne pathogens.

- The specific safer medical devices that we use are:

*(for example: self-sheathing needles, needleless systems, and plastic capillary tubes)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- The specific equipment to minimize or eliminate exposure that we use are:

*(for example: sharps containers and biosafety cabinets)*

\_\_\_\_\_

\_\_\_\_\_

- 
- Sharps disposal containers are inspected and maintained or replaced:

By:

---

Every: *(list frequency)*

---

Or: Whenever necessary to prevent overfilling

---

- We identify opportunities to improve controls through:

*(Examples: Review of sharps log, employee interviews, safety committee activities, etc.)*

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- We evaluate new products regularly by:

*(Describe the process, literature reviewed, supplier info, products considered.)*

---

---

- Both front line workers and management officials are involved in this process improvement by:
-

*(Describe how employees will be involved.)*

---

---

**Contact names and phone numbers:**

\_\_\_\_\_ will make sure that recommendations are effectively implemented.

**C. Personal protective equipment (PPE)**

- PPE is provided to our employees at no cost.
- The types of PPE available to employees are:

*(Examples: gloves, eye protection, etc)*

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- PPE is located: *(List location)* \_\_\_\_\_
- All employees using PPE must observe the following precautions:
  - Wear appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or OPIM pose a hazard to the eye, nose, or mouth.
  - Wear appropriate gloves when you:
    - Can reasonably anticipate hand contact with blood or OPIM
    - Handle or touch contaminated items or surfaces
    - Replace gloves if torn, punctured, contaminated, or otherwise damaged.
    - Decontaminate reusable gloves if they don't show signs of cracking, peeling, tearing, puncturing, or other deterioration.
    - Never wash or decontaminate disposable gloves for reuse.

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- Wash hands immediately or as soon as feasible after removal of gloves or other PPE.
  - Remove PPE after it becomes contaminated, and before leaving the work area.
  - Dispose of contaminated PPE in designated containers (list)
  - Remove blood- or OPIM-contaminated garments immediately or as soon as feasible, in a manner that avoids contact with the contaminated surface.
- The procedure for handling **used PPE** is:

*(For example, how and where to decontaminate face shields, eye protection, resuscitation equipment. May refer to specific procedure by title or number and last date of review.)*

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### Contact names and phone numbers:

\_\_\_\_\_ will maintain and provide all the necessary PPE, controls (such as sharps containers), labels, and red bags as required.

\_\_\_\_\_ will make sure that adequate supplies of the PPE are available in the appropriate sizes and types.

### D. Work practices used to minimize occupational exposure

- We use the following work practices to eliminate or minimize employee exposure:

*(For example: follow proper procedures to remove and properly dispose of gloves.)*

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- Changes in work practices are identified through:
-

*(Examples: Review of sharps log, employee interviews, and safety committee activities)*

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- We evaluate new products regularly by involving both frontline workers and management:

*(Describe the process, literature reviewed, supplier information, products considered, and personnel involved)*

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**Contact names and phone numbers:**

\_\_\_\_\_ will make sure that recommendations are effectively implemented.

**E. Housekeeping**

- Written schedules for cleaning and methods of decontamination are located:  
*(For example the location of the cleaning schedule for the laboratory and the specific disinfectant products used)*
- 
- 

- Regulated waste is placed in containers which:
  - Contain all contents
  - Do not leak
  - Are appropriately labeled or color-coded *(see Labels section of this plan)*

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- Are closed prior to removal to prevent contact spilling or protruding during handling.
- Contaminated sharps are discarded immediately or as soon as possible in containers that are:
  - Closable
  - Puncture-resistant
  - Leak-proof on sides and bottoms
  - Labeled or color-coded appropriately.
- Sharps disposal containers are available at: (must be easily accessible and as close as feasible to the immediate area where sharps are used)
- The procedure for handling sharps disposal containers is to contact the Ogle County Coroner to have it picked up.
- The procedure for handling other regulated waste is: (you may refer to a specific procedure by title or number and last date reviewed)
  - Bins, cans and pails intended for reuse are cleaned and decontaminated as soon as feasible after visible contamination.
  - Broken glassware that may be contaminated is picked up using mechanical means, such as a brush and dustpan.

**Contact names and phone numbers:**

The Ogle County Nurse will provide sharps and other containers as required.

**F. Laundry**

- We launder the following contaminated articles:
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
- Laundering is done as follows:
  - Handle contaminated laundry as little as possible, with minimal agitation.

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- Place contaminated laundry in leak-proof, labeled or color-coded containers before transporting. Use color coded bags or bags marked with the biohazard symbol for this purpose.

- Wear the following PPE when handling and/or sorting contaminated laundry:

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- The schedule for laundry: *(time and location)*

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**Contact names and phone numbers:**

\_\_\_\_\_ will make sure laundry is done as required.

**G. Using Labels**

- Labeling is done as follows:

**EQUIPMENT TO BE LABELED**

**LABEL TYPE**

<i>For example: specimens, contaminated laundry, etc.)</i>	<i>(Size, color, red bag, biohazard label, etc)</i>

**Contact names and phone numbers:**

\_\_\_\_\_ will maintain and provide labels and red bags as required.

## H. Hepatitis B Vaccination

- The hepatitis B vaccination series is available:
  - At no cost after training
  - Within 10 days of initial assignment to employees identified in Section 2 of this plan, *Identifying Employees Who Are At Risk for Exposure*.
  - It is encouraged that all employees get the series
  
- Vaccination is encouraged unless:
  - We have documentation that the employee has previously received the series
  - Antibody testing reveals that the employee is immune
  - Medical evaluation shows that vaccination is contraindicated.
  
- A copy of the health care professional's written opinion will be provided to the employee
  
- Employees who choose to decline vaccination must sign a declination form. They may request and obtain the vaccination at a later date at no cost.
  
- Vaccinations will be provided by: \_\_\_\_\_ at  
(location) \_\_\_\_\_.

### Contact names and phone numbers:

\_\_\_\_\_ will make sure vaccinations are available and encourage as required.

#### 4. EMPLOYEE TRAINING AND HAZARD COMMUNICATION

All employees who have occupational exposure to bloodborne pathogens receive training conducted by \_\_\_\_\_

Training will be provided before initial assignment to task where occupational exposure may take place, annually, and when changes in task or procedures take place that affect occupational exposure.

This training will include:

- Epidemiology, symptoms, and transmission of bloodborne pathogens.
- Copy and explanation of WAC 296-xxx-xxx, Occupational Exposure to Bloodborne Pathogens.
- Explanation of our exposure control plan and how to obtain a copy
- This must also be done at the annual refresher training.
- Methods used to identify tasks and other activities that may involve exposure to blood and OPIM.
- What constitutes an exposure incident.
- The use and limitations of controls, work practices, and PPE.
- The basis for PPE selection and an explanation of:
  - Types
  - Uses
  - Location
  - Handling
  - Removal
  - Decontamination
  - Disposal
- Information on the hepatitis B vaccine, including:
  - Effectiveness
  - Safety
  - Method of administration
  - Benefits of being vaccinated
  - Offered free of charge
- Actions to take and persons to contact in an emergency involving blood or OPIM
- Procedures to follow if an exposure incident occurs, including:
  - How to report the incident
  - Medical follow-up available.
- Employee's evaluation and follow-up after an exposure incident
- Signs, labels, and color coding used
- Interactive questions and answers with the trainer.

Training materials for this facility are located at \_\_\_\_\_.

Training records are maintained for each employee upon completion of training. These documents will be kept for at least 3 years at \_\_\_\_\_

The training record should include the following information about training sessions:

- Date
- Contents or a summary
- Names and qualifications of trainers
- Names and job titles of all attendees.

Training records are provided to employees or their authorized representatives within 15 working days of a request. Requests for training records should be addressed to

---

**Contact names and phone numbers:**

\_\_\_\_\_ will maintain and provide labels and red bags as required.

**5. POST EXPOSURE EVALUATION AND FOLLOW-UP**

**A. Do the following after initial first-aid is given:**

- Following the initial first aid treatment such as cleaning the wound, flushing eyes, or other mucous membranes, the following will be performed:
  - Document the routes of exposure and how the exposure occurred.
  - Identify and document the source individual, unless that's not possible or is prohibited by state or local law.
  - Obtain consent and arrange to test the source individual as soon as possible to determine HIV, HCV, and HBV infectivity.
    - If the source individual is already known to be HIV, HCV, and/or HBV positive, new testing is not needed.
  - Document that the source individual's test results were conveyed to the employee's health care provider.
  - Provide the exposed employee with the source individual's test results.
  - Provide the exposed employee with information about laws on confidentiality for the source individual.
  - Obtain consent and provide a blood test for the exposed employee as soon as possible for HBV, HCV, and HIV.
    - If the employee does not give consent for HIV serological testing, preserve the baseline blood sample for at least 90 days. If the exposed employee decides to have the sample tested during this time, perform testing as soon as feasible. Provide the exposed employee with a copy of the healthcare professional's written opinion

**B. Administration of post-exposure evaluation and follow-up**

Employees are provided immediate medical evaluation and follow-up services through:

\_\_\_\_\_ (List the procedure for providing immediate medical services to employees. Include name address and telephone number of the medical provider that you have identified to provide these services).  
*IMPORTANT: Appropriate medical services must be available to employees during all work hours*

---

Contact names and phone numbers:

\_\_\_\_\_ will make sure all medical actions required are performed.

**C. Review the circumstances of an exposure incident as follows:**

- The circumstances of any exposure incidents will be reviewed to determine:
  - Controls in use at the time
  - Work practices that were followed
  - Description of the device used (including type and brand)
  - Protective equipment or clothing in use at the time
  - Location of the incident
  - Procedure being performed when the incident occurred
  - Employee’s training

Contact names and phone numbers:

\_\_\_\_\_ is responsible for reviewing exposure incidents as required.

**6. RECORDKEEPING**

**A. Medical records**

- Medical records are maintained for each employee who has an occupational exposure to bloodborne pathogens in accordance with WAC 296-62-052, Access to Records.

\_\_\_\_\_ is responsible for maintaining medical records. These confidential records are kept \_\_\_\_\_ (List location) \_\_\_\_\_ for at least 30 years beyond the length of employment.

Contact names and phone numbers:

\_\_\_\_\_ will make sure appropriate employee health, OSH and WISHA records are maintained as required.

## **Section 4.6: Personal Protective Equipment [PPE] (1910.132)**

### **Introduction**

The purpose of the Personal Protective Equipment Policies is to protect the employees of Ogle County from exposure to work place hazards and the risk of injury through the use of personal protective equipment (PPE). PPE is not a substitute for more effective control methods and its use will be considered only when other means of protection against hazards are not adequate or feasible. It will be used in conjunction with other controls unless no other means of hazard control exist.

Personal protective equipment will be provided, used, and maintained when it has been determined that its use is required to ensure the safety and health of our employees and that such use will lessen the likelihood of occupational injury and/or illness.

This section addresses general PPE requirements, including eye and face, head, foot and leg, hand and arm, body (torso) protection, and protection from drowning. Separate programs exist for respiratory protection and hearing protection as the need for participation in these programs is established through industrial hygiene monitoring.

The Ogle County Personal Protective Equipment Policies includes:

- Responsibilities of supervisors and employees
- Hazard assessment and PPE selection
- Employee training
- Cleaning and Maintenance of PPE

### **Responsibilities**

A designated safety person is responsible for the development, implementation, and administration of Ogle County's PPE policies. This involves

1. Conducting workplace hazard assessments to determine the presence of hazards which necessitate the use of PPE.
2. Selecting and purchasing PPE.
3. Reviewing, updating, and conducting PPE hazard assessments whenever
  - a job changes
  - new equipment is used
  - there has been an incident
  - a supervisor or employee requests it
  - or at least every year
4. Maintaining records on hazard assessments.

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5. Maintaining records on PPE assignments and training.
6. Providing training, guidance, and assistance to supervisors and employees on the proper use, care, and cleaning of approved PPE.
7. Periodically re-evaluating the suitability of previously selected PPE.
8. Reviewing, updating, and evaluating the overall effectiveness of PPE use, training, and policies.

### **Supervisors or department heads**

Supervisors or department heads have the primary responsibility for implementing and enforcing PPE use and policies in their work area. This involves

1. Providing appropriate PPE and making it available to employees.
2. Ensuring that employees are trained on the proper use, care, and cleaning of PPE.
3. Ensuring that PPE training certification and evaluation forms are signed and given to a designated person.
4. Ensuring that employees properly use and maintain their PPE, and follow Ogle County PPE policies and rules.
5. Notifying Ogle County management and the Safety Person when new hazards are introduced or when processes are added or changed.
6. Ensuring that defective or damaged PPE is immediately disposed of and replaced.

### **Employees**

The PPE user is responsible for following the requirements of the PPE policies. This involves

1. Properly wearing PPE as required.
2. Attending required training sessions.
3. Properly caring for, cleaning, maintaining, and inspecting PPE as required.
4. Following Ogle County PPE policies and rules.
5. Informing the supervisor of the need to repair or replace PPE.

Employees who repeatedly disregard and do not follow PPE policies and rules will be reviewed by a supervisor or department head.

## **Procedures**

### **A. Hazard Assessment for PPE**

*A department head, in conjunction with Supervisors, will conduct a walk-through survey of each work area to identify sources of work hazards. Each survey will be documented using the Hazard Assessment Certification Form, which identifies the work area surveyed, the person conducting the survey, findings of potential hazards, and date of the survey. A designated person will keep the forms in the department files.*

A designated safety person will conduct, review, and update the hazard assessment for PPE whenever

- a job changes
- new equipment or process is installed
- there has been an incident
- whenever a supervisor or employee requests it
- or at least every year

*Any new PPE requirements that are developed will be added into Ogle County's written incident prevention program.*

### **B. Selection of PPE**

Once the hazards of a workplace have been identified, a designated safety person will determine if the hazards can first be eliminated or reduced by methods other than PPE, i.e., methods that do not rely on employee behavior, such as engineering controls (refer to Appendix B – Controlling Hazards).

If such methods are not adequate or feasible, then a designated safety person will determine the suitability of the PPE presently available; and as necessary, will select new or additional equipment which ensures a level of protection greater than the minimum required to protect our employees from the hazards (refer to Appendix C – Selection of PPE). Care will be taken to recognize the possibility of multiple and simultaneous exposure to a variety of hazards. Adequate protection against the highest level of each of the hazards will be recommended for purchase.

All personal protective clothing and equipment will be of safe design and construction for the work to be performed and will be maintained in a sanitary and reliable condition. Only those items of protective clothing and equipment that meet NIOSH or ANSI (American National Standards Institute) standards will be procured or accepted for use. Newly purchased PPE must conform to the updated ANSI standards which have been incorporated into the PPE regulations, as follows:

- Eye and Face Protection ANSI Z87.1-1989
- Head Protection ANSI Z89.1-1986
- Foot Protection ANSI Z41.1-1991

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- Hand Protection (There are no ANSI standards for gloves, however, selection must be based on the performance characteristics of the glove in relation to the tasks to be performed.)

Affected employees whose jobs require the use of PPE will be informed of the PPE selection and will be provided PPE by Ogle County at no charge. Careful consideration will be given to the comfort and proper fit of PPE in order to ensure that the right size is selected and that it will be used.

### **C. Training**

Any worker required to wear PPE will receive training in the proper use and care of PPE before being allowed to perform work requiring the use of PPE. Periodic retraining will be offered to PPE users as needed. The training will include, but not necessarily be limited to, the following subjects:

- When PPE is necessary to be worn
- What PPE is necessary
- How to properly don, doff, adjust, and wear PPE
- The limitations of the PPE
- The proper care, maintenance, useful life, and disposal of the PPE

After the training, the employees will demonstrate that they understand how to use PPE properly, or they will be retrained.

Training of each employee will be documented using the Personal Protective Equipment Training Documentation Form and kept on file. The document certifies that the employee has received and understood the required training on the specific PPE he/she will be using.

### **Retraining**

The need for retraining will be indicated when:

- an employee's work habits or knowledge indicates a lack of the necessary understanding, motivation, and skills required to use the PPE (i.e., uses PPE improperly)
- new equipment is installed
- changes in the work place make previous training out-of-date
- changes in the types of PPE to be used make previous training out-of-date

### **D. Cleaning and Maintenance of PPE**

It is important that all PPE be kept clean and properly maintained. Cleaning is particularly important for eye and face protection where dirty or fogged lenses could impair vision. Employees must inspect, clean, and maintain their PPE according to the manufacturers' instructions before and after each use. Supervisors are responsible for ensuring that users properly maintain their PPE in good condition.

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Personal protective equipment must not be shared between employees until it has been properly cleaned and sanitized. PPE will be distributed for individual use whenever possible.

If employees provide their own PPE, make sure that it is adequate for the work place hazards, and that it is maintained in a clean and reliable condition.

Defective or damaged PPE will not be used and will be immediately discarded and replaced

**NOTE:** *Defective equipment can be worse than no PPE at all. Employees would avoid a hazardous situation if they knew they were not protected; but they would get closer to the hazard if they erroneously believed they were protected, and therefore would be at greater risk.*

It is also important to ensure that contaminated PPE which cannot be decontaminated is disposed of in a manner that protects employees from exposure to hazards.

### **E. Safety Disciplinary Policy**

Ogle County believes that a safety and health Incident Prevention Program is unenforceable without some type of disciplinary policy. Our company believes that in order to maintain a safe and healthful workplace, the employees must be cognizant and aware of all company, State, and Federal safety and health regulations as they apply to the specific job duties required. The following disciplinary policy is in effect and will be applied to all safety and health violations.

The following steps will be followed unless the seriousness of the violation would dictate going directly to Step 2 or Step 3.

1. A first time violation will be discussed orally between company supervision and the employee. This will be done as soon as possible.
2. A second time offense will be followed up in written form and a copy of this written documentation will be entered into the employee's personnel folder.
3. A third time violation will result in time off or possible termination, depending on the seriousness of the violation

**Section 4.7: Control of Hazardous Energy (Lockout/Tagout) Procedure (1910.147)**  
**Table of Contents**

- I. Objective
- II. Assignment of Responsibility
- III. Procedures
  - A. Preparation for Lockout or Tagout
  - B. Electrical
  - C. Hydraulic/Pneumatic
  - D. Fluids and Gases
  - E. Mechanical Energy
  - F. Release from Lockout/Tagout
  - G. Service or Maintenance Involving More than One Person
  - H. Removal of an Authorized Employee's Lockout/Tagout by the Company
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  - J. Procedures for Outside Personnel/Contractors
  - K. Training and Communication
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- IV. Attachments in Appendix
  - A. List of Authorized Personnel for Lockout/Tagout Procedures Form
  - B. Certification of Training of Authorized Personnel Form
  - C. Certification of Training of Affected Personnel Form
  - D. Lockout/Tagout Inspection Certification Form
  - E. Outside Personnel/Contractor Certification Form
  - F. Equipment Specific Procedure Form

## Ogle County Lockout/Tagout Procedure

### I. OBJECTIVE

The objective of this procedure is to establish a means of positive control to prevent the incidental starting or activating of machinery or systems while they are being repaired, cleaned and/or serviced. This program serves to:

- A. Establish a safe and positive means of shutting down machinery, equipment and systems.
- B. Prohibit unauthorized personnel or remote control systems from starting machinery or equipment while it is being serviced.
- C. Provide a secondary control system (tagout) when it is impossible to positively lockout the machinery or equipment.
- D. Establish responsibility for implementing and controlling lockout/tagout procedures.
- E. Ensure that only approved locks, standardized tags and fastening devices provided by the company will be utilized in the lockout/tagout procedures.

### II. ASSIGNMENT OF RESPONSIBILITY

- A. The Department Head will be responsible for implementing the lockout/tagout program.
- B. Department Heads are responsible for enforcing the program and insuring compliance with the procedures in their departments.
- C. A Department Head is responsible for monitoring the compliance of this procedure and will conduct the annual inspection and certification of the authorized employees.
- D. Authorized employees\_(those listed in Attachment A) are responsible for following established lockout/tagout procedures. An authorized employee is defined as a person who locks out or tags out machines or equipment in order to perform servicing or maintenance on that machine or equipment. An affected employee becomes an authorized employee when that employee's duties include performing servicing or maintenance covered under 1910.147, The Control of Hazardous Energy (lockout/tagout).
- E. Affected employees (all other employees in the facility) are responsible for insuring they do not attempt to restart or re-energize machines or equipment that are locked out or tagged out. An affected employee is defined as a person whose job requires him/her to operate or use a machine or equipment on which servicing or maintenance

is being performed under lockout or tagout, or whose job requires him/her to work in an area in which such servicing or maintenance is being performed.

### **III. PROCEDURES**

The ensuing items are to be followed to ensure both compliance with the OSHA Control of Hazardous Energy Standard and the safety of our employees.

#### **A. Preparation for Lockout or Tagout**

Employees who are required to utilize the lockout/tagout procedure (see Attachment A) must be knowledgeable of the different energy sources and the proper sequence of shutting off or disconnecting energy means. The four types of energy sources are:

1. electrical (most common form);
2. hydraulic or pneumatic;
3. fluids and gases; and
4. mechanical (including gravity).

More than one energy source may be utilized on some equipment and the proper procedure must be followed in order to identify energy sources and lockout/tagout accordingly. See Attachment F for specific procedure format.

#### **B. Electrical**

1. Shut off power at machine and disconnect.
2. Disconnecting means must be locked or tagged.
3. Press start button to see that correct systems are locked out.
4. All controls must be returned to their safest position.
5. Points to remember:
  - a. If a machine or piece of equipment contains capacitors, they must be drained of stored energy.
  - b. Possible disconnecting means include the power cord, power panels (look for primary and secondary voltage), breakers, the operator's station, motor circuit, relays, limit switches, and electrical interlocks.
  - c. Some equipment may have a motor isolating shut-off and a control isolating shut-off.
  - d. If the electrical energy is disconnected by simply unplugging the power cord, the cord must be kept under the control of the authorized employee or the plug end of the cord must be locked out or tagged out.

**C. Hydraulic/Pneumatic**

1. Shut off all energy sources (pumps and compressors). If the pumps and compressors supply energy to more than one piece of equipment, lockout or tagout the valve supplying energy to the piece of equipment being serviced.
2. Stored pressure from hydraulic/pneumatic lines shall be drained/bled when release of stored energy could cause injury to employees.
3. Make sure controls are returned to their safest position (off, stop, standby, inch, jog, etc.).

**D. Fluids and Gases**

1. Identify the type of fluid or gas and the necessary personal protective equipment.
2. Close valves to prevent flow, and lockout/tagout.
3. Determine the isolating device, then close and lockout/tagout.
4. Drain and bleed lines to zero energy state.
5. Some systems may have electrically controlled valves. If so, they must be shut off and locked/tagged out.
6. Check for zero energy state at the equipment.

**E. Mechanical Energy**

Mechanical energy includes gravity activation, energy stored in springs, etc.

1. Block out or use die ram safety chain.
2. Lockout or tagout safety device.
3. Shut off, lockout or tagout electrical system.
4. Check for zero energy state.
5. Return controls to safest position.

**F. Release from Lockout/Tagout**

1. Inspection: Make certain the work is completed and inventory the tools and equipment that were used.
2. Clean-up: Remove all towels, rags, work-aids, etc.
3. Replace guards: Replace all guards possible. Sometimes a particular guard may have to be left off until the start sequence is over due to possible adjustments. However, all other guards should be put back into place.

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4. Check controls: All controls should be in their safest position.
5. The work area shall be checked to ensure that all employees have been safely positioned or removed and notified that the lockout/tagout devices are being removed.
6. Remove locks/tags. Remove only your lock or tag.

### **G. Service or Maintenance Involving More than One Person**

When servicing and/or maintenance is performed by more than one person, each authorized employee shall place his own lock or tag on the energy isolating source. This shall be done by utilizing a multiple lock scissors clamp if the equipment is capable of being locked out. If the equipment cannot be locked out, then each authorized employee must place his tag on the equipment.

### **H. Removal of an Authorized Employee's Lockout/Tagout by the Company**

Each location must develop written emergency procedures that comply with 1910.147(e)(3) to be utilized at that location. Emergency procedures for removing lockout/tagout should include the following:

1. Verification by employer that the authorized employee who applied the device is not in the facility.
2. Make reasonable efforts to advise the employee that his/her device has been removed. (This can be done when he/she returns to the facility).
3. Ensure that the authorized employee has this knowledge before he/she resumes work at the facility.

### **I. Shift or Personnel Changes**

Each facility must develop written procedures based on specific needs and capabilities. Each procedure must specify how the continuity of lockout or tagout protection will be ensured at all times. See 1910.147(f)(4).

### **J. Procedures for Outside Personnel/Contractors**

Outside personnel/contractors shall be advised that the company has and enforces the use of lockout/tagout procedures. They will be informed of the use of locks and tags and notified about the prohibition of attempts to restart or re-energize machines or equipment that are locked out or tagged out.

The company will obtain information from the outside personnel/contractor about their lockout/tagout procedures and advise affected employees of this information.

The outside personnel/contractor will be required to sign a certification form (see Attachment E). If outside personnel/contractor has previously signed a certification that is on file, additional signed certification is not necessary.

**K. Training and Communication**

Each authorized employee who will be utilizing the lockout/tagout procedure will be trained in the recognition of applicable hazardous energy sources, type and magnitude of energy available in the work place, and the methods and means necessary for energy isolation and control.

Each affected employee (all employees other than authorized employees utilizing the lockout/tagout procedure) shall be instructed in the purpose and use of the lockout/tagout procedure, and the prohibition of attempts to restart or re-energize machines or equipment that are locked out or tagged out.

Training will be certified using Attachment B (Authorized Personnel) or Attachment C (Affected Personnel). The certifications will be retained in the employee personnel files.

**L. Periodic Inspection**

A periodic inspection (at least annually) will be conducted of each authorized employee under the lockout/tagout procedure. This inspection shall be performed by the department head. If a department head is also using the energy control procedure being inspected, then the inspection shall be performed by another party.

The inspection will include a review between the inspector and each authorized employee of that employee's responsibilities under the energy control (lockout/tagout) procedure. The inspection will also consist of a physical inspection of the authorized employee while performing work under the procedures.

The department head shall certify in writing that the inspection has been performed. The written certification (Attachment D) shall be retained in the individual's personnel file.

## ARTICLE V: FLEET SAFETY

### Section 5.1: Ogle County Motor Vehicle Driving Policy

#### I. PURPOSE

To assure that employee drivers of the County of Ogle maintain a current valid Illinois driver's license and operate vehicles in a safe and lawful manner in compliance with the laws of the State of Illinois while performing their duties as an employee of Ogle County.

#### II. DEFINITIONS

The term "employee driver(s)" shall mean any and all paid or unpaid employees, applicants for employment, elected officials, volunteers and other persons who may be required or permitted to operate any motor vehicle while performing that person's duties on behalf of the County.

#### III. DRIVER'S LICENSES

- A. Each employee driver of the County shall at all times maintain a current valid Illinois driver's license. Any employee driver failing to maintain a current valid operator's license or automobile insurance as required by the State of Illinois shall be prohibited from operating any motor vehicle while performing any duties on behalf of the County.
- B. Any employee driver whose driver's license is suspended, revoked or otherwise invalid is immediately prohibited from operating any vehicle while performing that person's duties on behalf of the County. Each employee driver shall immediately notify his/her immediate supervisor or Department Head if his/her driver's license has been suspended, revoked or become invalid in any way. Each employee driver is responsible for knowing the status of his/her driver's license.
- C. In order to ensure compliance with the foregoing requirements, each employee driver shall annually provide to their respective supervisor or Department Head, a copy of his/her driver's license. Department Heads and Elected Officials shall maintain a current copy of their driver's license in their personnel file.
- D. Once per year, the Department Head shall request a copy of a Driving Record Abstract (DRA) from the Illinois Secretary of State, Driver Services Department for each employee driver. A DRA shall also be requested for applicants for positions which may be required or permitted to operate a motor vehicle as part of their job. It shall further be the responsibility of Department Head to review each DRA for every employee driver at least one time per calendar year.

#### IV. DUTY TO OPERATE SAFELY AND LEGALLY

Each employee driver is required to operate motor vehicles in a safe and legal manner whether on or off duty with the County. This includes the use of seatbelts by all employee drivers and their passengers at all times required by law and compliance with any restrictions on the employee driver's operator's license. Any employee who is found guilty or pays a bond forfeiture on an offense for which points may be charged under the Illinois Administrative Code, Title 92, part 1040 et.al. shall immediately report that fact to their Department Head.. This requirement shall apply to all offenses described above regardless

of whether the offense is committed while the employee driver is on or off duty with the County.

**V. OPERATION OF A VEHICLE UNDER THE INFLUENCE OF ALCOHOL OR ILLEGAL DRUGS**

Employee drivers must comply with the policies and procedures outlined in the current version of the Ogle County Personnel Policies and Benefits, Section V, entitled "Drug Free Workplace."

**VI. INCIDENT REPORTS**

An employee driver involved in a motor vehicle incident while performing duties on behalf of the County shall cooperate in the filing of all law enforcement reports required by law and, in addition, shall immediately inform his/her supervisor and complete a full and accurate report on the form prescribed by the County.

**VII. DISCIPLINE**

The failure to comply with any of the foregoing requirements, a conviction or payment of a bond forfeiture as described above and/or the imposition of a driving prohibition as described above may result in disciplinary action including, but not limited to, placement on restricted duty, administrative leave, suspension or termination.

Adopted by the Ogle County Board October 16, 2012 (R-2012-1012)

## ARTICLE VI: EMPLOYEE SAFETY AND HEALTH

### Section 6.1: General Safety Rules

The following guidelines are general in nature and should help employees carry out responsibilities safely. It is not a complete list and could be amended by need or suggestion as well as specific to the department.

- (a) Report and take care of injuries at once. Small cuts and scratches can become infected unless care was immediate.
- (b) Work at a safe, sane pace.
- (c) Do not attempt to give first aid to an injured person unless trained to do so. Do not move a seriously injured person unless absolutely necessary. Call 911 immediately.
- (d) Obey all warning tags and signs on equipment. Read instruction manuals or seek instruction **before** operating any machine or equipment.
- (e) Do not horseplay on the job. Workers' Compensation coverage benefits could be negated for horseplay related injuries.
- (f) The use or possession of intoxicating beverages or narcotics on the job is prohibited.
- (g) Correct all unsafe conditions or report them to the Department Head or Supervisor.
- (h) Keep work areas clean and orderly at all times. Good housekeeping can help prevent incidents.
- (i) Use the correct tools and equipment for the job.
- (j) Wear proper safety equipment such as eye and ear protection and hard hats as specified by policy.
- (k) Be considerate and concerned at all times for the safety of fellow workers and the general public.
- (l) Obey safety rules and practices and take an active part in the safety of co-workers. Remind co-workers if they are working unsafely.

### Section 6.2: Illness and Injury Control/Prevention

In addition to the Loss Control methods cited in this manual, there are several types of policies and/or procedures that can be implemented to help reduce the possibility of occupational illnesses and injuries. These policies and procedures are discussed briefly in this section.

- (a) Physical Examination. A physical examination or medical authorization should be required in the following instances:

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- i. An injured employee who has recently received medical attention should have medical approval before he/she returns to work.
  - ii. An employee who has been absent from work for 5 or more days, or the applicable number of days per the appropriate bargaining contract, should have medical authorization before he/she returns to work.
  - iii. Incumbents of critical occupations should be re-examined on a periodic schedule. The results and findings of the physical examinations either for pre-placement, annual or reevaluation should be treated as confidential. Information should not be provided to anyone outside the normal processing agencies involved in hiring or an individual without the individual's expressed written consent.
- (b) Physical Fitness. The physical fitness of employees is a prime requisite in preventing a significantly large number of personal injuries. All employees should be encouraged to seek regular physical activity.
- (c) First-Aid Treatment for Sick or Injured Employees. All injuries or illnesses will be reported. However, other than for very minor cuts or scratches, the Department Head or Supervisor should send the injured or ill employee(s) for first-aid or medical treatment.

If an employee has been injured on the job and requests to leave work to go home, the Department Head or Supervisor will inform the employee to go immediately to the hospital or physician's office to have the injury evaluated. If the doctor, who the employee has been sent to for treatment, feels that the employee is unable to return to his/her regular job but can perform some part(s) of the job without aggravating his/her injury, the Supervisor will request permission from the Department Head to allow the employee to return to work.

The family of an employee who is severely ill or injured should be notified promptly by the employee's Supervisor. The Department Head should be notified immediately of all disabling and potentially disabling injuries.

- (d) Emergency Medical Treatment. In the event of a serious injury requiring immediate medical treatment, administer first-aid as necessary and call for an ambulance. The facility nearest the incident scene should be used. Also, the County should maintain a current listing of local hospitals and medical centers that have 24-hour full emergency treatment facilities.
- (e) First Aid/CPR. ---Department Heads may designate staff members to receive first-aid and/or CPR training.

The following first aid rules are established:

- i. The Department head may designate other staff members to receive the training. Appropriate certification shall be maintained.
- ii. First-aid kits will be maintained in all County buildings and on County vehicles where necessary.

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- iii. Department Head or Supervisors are required to check first-aid supplies on a periodic basis. Minimum amounts of each item must be maintained. Department Head or Supervisors shall order supplies through regular purchasing channels.
  - iv. Employees will notify their Department Head or Supervisor after each use of first-aid supplies.
  - v. Minor medical treatment for cuts, scratches, etc., may be given by the Department Head, Supervisor or a crew leader, if trained.
  - vi. In many cases, an injured employee that needs professional medical attention can be transported to the hospital by the means of a County vehicle. However, in some cases, it is important that the injured employee be transported by ambulance with a qualified medical attendant available. If there is any doubt in the mind of the Department Head, Supervisor or lead man in charge, Emergency 911 should be called (if using a County extension, dial 911). The following conditions would definitely indicate ambulance service:
    - 1. Employee unconscious or apparently in shock.
    - 2. Any apparent fracture.
    - 3. Any apparent serious back injury.
    - 4. Any hemorrhaging.
    - 5. Symptoms of internal injury.
  - vii. All animal bites, because of the possibility of rabies, should receive prompt medical attention by a physician. Where practical, an attempt should be made to confine the animal.
  - viii. All injuries, no matter how minor, are to be reported to the Department Head or Supervisor. Injury report forms shall be completed as per Section 3.2: Incident/Injury Reporting, Policy and Procedure.
- (f) Environmental Hazards. It is important that each department be able to recognize, understand, and work effectively and safely with hazardous materials. Occupational health hazards are preventable, but if they are not controlled, they may lead to conditions that cause legally compensated illnesses. Hazardous materials could impair the health of employees enough to make them lose time from work or to work at less than full efficiency. Illinois has enacted "Right-to-Know" legislation regarding employee hazard communication. The basic intent of these acts is to ensure that employees are made aware of the toxic substances in the workplace.

### Section 6.3: Transitional Duty Policy

- (a) Purpose. The purpose of establishing a transitional duty policy is to provide temporary duty/work for employees who are temporarily disabled and cannot be assigned to regular duty but maintain the ability to perform another form of productive work/duty. The duties to be performed by the employee on transitional duty status will always be bona fide work that will be limited in duration and intended for employees who are expected to return to full duty in the near future, but no later than 3 months (with an option to extend the status upon review).
- (b) Eligibility. Eligible candidates for transitional duty must be currently employed by the county and be temporarily disabled. Temporary disability is defined as the lack of ability to perform all aspects of the essential functions of the employee's regular position for a period of time which is generally less than 3 months.

Transitional duty will be required for all employees who have been disabled as a result of a work related injury, provided there is bona fide, productive work available and medical approval is obtained by the County. In the case of a work related injury, the employee will keep in constant contact with his/her Department Head or immediate Supervisor in regard to his/her medical condition and the projected commencement date for the Transitional duty assignment. Should an employee who has been disabled as a result of a work related injury refuse a viable transitional duty assignment, workers compensation payments will then cease.

- (c) Physician's Role. An eligible employee must be released to return to transitional duty by his/her treating physician. The eligible employee must bring a letter to the Department Head from his/her treating physician that details the following:
- i. The length of time that the employee is expected to remain on transitional duty;
  - ii. The exact nature of the work (including duties/limitations) that the employee can and cannot perform;
  - iii. The date of the next scheduled re-examination to determine any change in the employee's physical status;
  - iv. A medical opinion as to whether the employee's current disability is permanent or temporary in nature.

The employee must provide the above mentioned information in writing prior to assignment to transitional duty and after each re-examination while on transitional duty status. The appendix of this manual contains a sample "TRANSITIONAL DUTY GUIDELINES FORM". The County may consult a physician in regard to an employee's placement on or removal from transitional duty status. The County's consulting physician will have the final advisory opinion on an employee's transitional duty status.

- (d) Types of Duty/Work. Projects or tasks assigned to an eligible employee for transitional duty must be legitimate, ongoing, and productive work which does not consist of "manufactured" or "busy" work. Any transitional duties shall not be construed as creating a new or permanent position.

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An eligible employee who is released by the County's and/or their treating physician to return to transitional duty shall be directed by his/her Department Head or immediate Supervisor as to their job duties and responsibilities under this transitional duty status. These transitional duties must be within any restrictions enumerated by the treating physician and/or the County's consulting physician.

Transitional duty can involve, but is not limited to, work assignments to areas other than the eligible employee's regular duty station, division or department. The eligible employee may be assigned to an entirely different division or department. Coordination of placement of eligible employees into transitional duty will be through the employee's immediate Supervisor in conjunction with the Department Head.

Use of transitional duty is designed to benefit the employees and the employer. Department Heads are encouraged to outline departmental procedures regarding transitional duty for present and future situations.

If no transitional duties are available or, should any alternative duties become unavailable in the future, the eligible employee will be so informed and may be returned to disability leave status.

Availability, assignment and continuation of transitional duty will always be at the discretion of the employee's Department Head in accordance with the guidelines set forth in this policy.

- (e) Scheduling. Eligible employees assigned to transitional duty will be scheduled through the immediate Supervisor, in conjunction with the appropriate Department Head. Transitional duty assignments shall not be in derogation of any existing collective bargaining agreements. However, transitional duty schedules may vary from the employee's regular work schedule or hours. Transitional duty may be for part-time hours, in which case the employee will be paid on a part-time basis and, if applicable, Workers' Compensation wages will be applied to make up the difference in hours for the employee's regularly scheduled work week.
- (f) Administrative Review. An employee assigned to transitional duty will be subject to an Administrative Review at the end of every 30 calendar days. Included in this meeting will be the employee, the immediate Supervisor, the Department Head or his/her designee, and the appropriate collective bargaining unit representative, if requested by the employee. This review will consist of an evaluation of the employee's physical status to determine the employee's ability to perform the transitional duty and of the availability of legitimate work. If it is determined that the transitional duty assignment is not meeting the restrictions detailed by the County's consulting physician or the employee's treating physician or the needs of the County, the transitional duty assignment will be terminated and the employee returned to disability status.

#### **Section 6.4: Ergonomics and Office Safety Program**

- (a) Policy. The purpose of this program is to inform interested persons, including employees, that the county is committed to improving our employees' comfort and well-being by identifying and correcting ergonomic risk factors on the job. This program applies to all work operations. The Safety Committee manages all safety and health programs for the County. They review the ergonomics program and provide guidance, as needed.

The County has implemented the ergonomics program at all County sites, to address the problem of Musculoskeletal Disorders (SDS). SDS have become an issue of increasing concern because they continue to rise in occurrence.

The goal of the ergonomics program is to prevent the occurrence of work-related musculoskeletal disorders by controlling or eliminating the risk factors which cause them. The program ensures that all affected employees are aware of job-related risk factors and provides information and solutions to eliminate them. The County promotes continuous improvement for efficiency, comfort, and well-being of all employees through a team effort of management and employee involvement.

Recommendations for improving the ergonomics program can be made to the Safety Committee. The Safety Committee is committed to the success of the program and encourages all constructive criticism or suggestions. The Committee strives for clear understanding, safe and efficient work practices, and involvement in the program from every level of the County.

- (b) Injury/Medical Management. All employees are encouraged to immediately report to their Department Head or Supervisor any symptoms of discomfort that may be associated with their job duties. The Department Head or Supervisor is responsible to recommend transitional work or medical evaluation for injured or ill employees.

Department Heads or Supervisors record and file written reports from the first observation of illness or injury through all subsequent follow-up activities. They are also responsible to forward information about the worker injury or illness for recording on the OSHA 300 Injury and Illness Form.

Every work procedure that causes a worker injury or illness will be investigated and reported. This documentation provides vital information for the identification of job related risk factors so that the problems can be corrected before other injuries occur.

After an injured employee has been treated, status reports from the treating physician(s) should detail limitations employees may face, or if they are eligible to return to full duty.

- (c) Office Safety. Office work is more dangerous than is commonly supposed, and many incidents occur during the performance of ordinary office routines. Therefore, it is important that certain safety rules be observed in offices, just as they are in other work areas.
- (d) Office Safety Rules and Regulations.
- i. Keep desk and work areas clean and orderly.
  - ii. Report loose or rough floor covering to the Department Head or Supervisor.

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- iii. All file, desk, and table drawers shall be kept closed when not in use. Never open more than one file drawer at a time.
- iv. Furniture such as tables, desks, and chairs must be maintained in good condition and free from sharp corners, projecting edges, wobbly legs, etc.
- v. Tilted chairs can be hazardous when improperly used and therefore, care should be taken to assure that they are in good condition. Learn the limits. Be sure the chair is behind you before you sit down.
- vi. Never use chairs, desks, or other furniture as a make shift ladder. Use a stepladder.
- vii. When a message spindle is used, a suitable blunt cover shall protect the point, or preferably, the point should be bent at a horizontal angle.
- viii. Keep the blades of paper cutters closed when not in use.
- ix. Keep pencils pointed down when carrying them in pockets.
- x. Keep hands clear of electric typewriter carriages while they are in motion.
- xi. Use a sponge or other wetting device for envelopes. Use finger guards when working with stacks of paper.
- xii. Be sure equipment is grounded and that the cords are in good condition. If a machine gives a shock or starts smoking, unplug it and report it immediately.

### **Section 6.5: Workplace Violence**

#### **Purpose of this Section**

1. To define workplace violence.
2. To discuss the concept of zero tolerance towards acts of workplace violence.
3. To detail the policy on workplace violence.
4. To describe the actions to take if you are a victim or witness an act of workplace violence.

#### **Definition of Workplace Violence**

Threatening, attempting to cause, or causing physical harm to another employee or a member of the public while at work or while on duty. Unacceptable behavior includes verbal abuse, harassment, threats, physical attacks, property damage, and any intentional or reckless behavior resulting in harm or which causes someone to feel threatened with harm.

#### **Types of Workplace Violence**

The National Institute of Occupational Safety and Health (NIOSH), has identified the following categories of workplace violence:

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- Violence by strangers, such as during robberies;
- Violence by customers or clients, such as assaults on health care professionals by their patients or assaults on law enforcement personnel by detainees/arrestees;
- Violence by fellow employees;
- Violence to employees while at work by domestic abusers.

### **Identification of Problematic Behaviors**

The Federal Bureau of Investigation (FBI) has identified a number of problematic behaviors exhibited by those individuals who perpetrate acts of workplace violence. These include:

- Personality conflicts between co-workers or supervisors;
- Increasing belligerence;
- Ominous, specific threats;
- Hypersensitivity to criticism;
- Fascination with weapons;
- Preoccupation with violent themes;
- Obsessive interest in recently publicized violent events;
- Outbursts of anger;
- Homicidal/ suicidal comments or threats;
- Obsession with a supervisor or co-worker;
- Drug and alcohol use at work;
- Recent life-changing events, such as divorce, break-up of a relationship, financial hardships.

### **Workplace Violence Policy**

In order to prevent incidents of workplace violence, Ogle County has adopted a policy of zero tolerance for violence, or the threat of violence, in the workplace. This means that all employees and members of the public will be treated with courtesy and respect. Any threat of violence, or any actual act of violence, will be taken very seriously, and will be investigated as thoroughly as possible, and action taken to ensure that perpetrators are disciplined accordingly and to ensure that victims are provided medical treatment and counseling as necessary. In instances of actual violence, local law enforcement will be notified and criminal sanctions pursued.

Given this zero tolerance policy employees are instructed to report **all** incidents of violence, threats of violence or any behavior witnessed which may lead to violence immediately to management. There will be no retaliation to those who report these incidents. Local law enforcement will be notified in the event of an actual incident, and medical transport contacted if injuries warrant.

Another critical aspect of the zero tolerance policy provides that under no circumstances are weapons of any kind to be brought to the workplace. Employees found with weapons in their possession while at work will be disciplined accordingly.

A report form will be completed and sent to management. The employee who perpetrated the violence or who stated the threat may be sent for counseling, and may be disciplined accordingly. Victims will be provided medical treatment and counseling as necessary. As stated above, criminal sanctions may also be pursued.

All new employees will be made aware of this policy. All potential hires will be screened thoroughly and a thorough background check performed to ensure that those with a history of behaviors contrary to this policy are not selected for hire. All supervisory staff will be trained in identifying and defusing workplace problems and conflicts. Employees will be trained in non-violent response and conflict resolution, unacceptable conduct, and the reporting of threats and incidents.

At some point Ogle County may designate a Threat Management Team. The duties of the Team will include:

- Evaluate potential violence problems by reviewing past incidents or investigating reports of behaviors exhibited that are contrary to this policy;
- Assess the responsible employee's fitness for duty after undergoing counseling;
- Review and recommend intervention techniques;
- Develop a protection plan for use;
- Coordinate with all affected parties after an incident;
- Refer victim for appropriate treatment;
- Perform security assessments;
- Review, develop, and present training programs;
- Review all threats to determine validity and response.

### **Facility Modifications**

Staff may want to review the physical layout of their work areas, especially in those departments where there may exist an increased potential for confrontations due to the nature of the operations. Possible physical modifications may include:

- Increasing visibility;
- Provision of panic alarms;
- Control of access to sensitive areas;
- Arrangement of space to avoid entrapment;
- Establishment of escape routes.

### **Exercises**

Study the definition of workplace violence. Think about those times that you may have either shown or witnessed some of the actions included in the definition. Consider the fact that even threats made in jest are considered unacceptable. Discuss this issue with all employees.

Discuss a recent case of workplace violence, from a seemingly minor incident here to one of national prominence, such as an incident involving multiple injuries or fatalities. If available, study the events that led up to the incident, such as repeated threats.

Examine the layout of your work area. Do you have a planned escape route? Does the layout of your area allow you unimpeded egress in the event of a confrontation?

**Section 6.6: Cell Phone Policy**

**Ogle County  
Corporate Cell Phone Policy**

Employees must adhere to state laws regarding use of electronic communication devices while driving.

Use of an electronic communication device by employees during working hours shall not negatively affect an employee's performance of assigned duties.

Employees will be given two warnings. The third time an employee is found to be in violation of this policy, it is grounds for immediate dismissal.

(625 ILCS 5/12-610.2) Sec. 12-610.2(d)(1) Illinois law states this section does not apply to a law enforcement officer or operator of an emergency vehicle while performing his or her official duties.

Your signature below certifies your agreement to comply with this policy.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

**ARTICLE VII: EMPLOYEE DISSEMINATION/ACKNOWLEDGEMENT**

Each Department Head shall be responsible for reviewing the Safety Manual with each employee. Each employee must sign an acknowledgement form indicating the employee has received and reviewed a copy of Safety Manual. This acknowledgement form shall be kept in the employee's personnel file. All new hires will receive the instruction on the Safety Manual as part of his/her orientation.

**Employee Safety Manual  
Acknowledgement Form**

I, as an employee of Ogle County, hereby acknowledge the receipt of the **Ogle County Administrative Safety Manual**.

Also, I acknowledge that it is my responsibility as an employee of Ogle County to read and follow the policies outlined in the Ogle County Administrative Safety Manual. I understand that failure to observe the rules of the **Safety Manual** may result in possible disciplinary action or termination.

Print Name \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Witness \_\_\_\_\_ Date \_\_\_\_\_

ADMINISTRATIVE NOTE TO DEPARTMENT HEAD:

Two copies should be made of this form. The original should be kept in employee's file, one copy should stay with the Department Head, and the remaining copy returned to the employee to be kept in this handbook.

## Forms

*Forms are included in the manual for illustrative purposes only. Contact your Department Head or Insurance Liaison John Coffman for the approved forms. Contact Information for Ogle County Treasurer John Coffman:*

Ogle County Treasurer John Coffman  
(815) 732-1100  
(815) 732-1455 fax  
treasurer@oglecounty.org

**Confirmation of Transitional Duty/Return to Work Status** is completed by the employee when returning to work following an injury or illness.

**Employee Incident Report** is completed by the employee and submitted to the Supervisor or Department Head within 24 hours or as soon as possible following an injury/incident. The Supervisor or Department Head completes his/her section of the report and submits it to the Insurance Liaison within 48 hours or as soon as possible following an injury/incident.

**Hepatitis B Vaccine Declination (Mandatory)** is completed by the employee that declines the hepatitis B vaccination, and retained by the County Officer/Department Head.

**Illinois Form 45: Employers First Report of Injury** is completed by the Department Head and forwarded within 24 hours or as soon as possible to the Insurance Liaison for claim processing. (Required by Gallagher Bassett Services to process an employee injury claim.)

**Medical Authorization (Medical Records Release Form)** is completed by the injured party only upon request of the insurance claims adjuster.

**Non – Employee Injury Report** is completed by the injured party (other than a county employee) and filed with the County Insurance Liaison within 24 hours or as soon as possible following the injury/incident.

**OSHA Form 300 – Log of Work Related Injuries and Illnesses** is a US Department of Labor Occupational Safety and Health Administration (OSHA) form to be compiled and retained by the Insurance Liaison. This form lists every work-related death, injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. This form is available on the US Department of Labor website at [www.osha.gov](http://www.osha.gov).

**OSHA Form 300A – Summary of Work-Related Injuries and Illnesses** is a US Department of Labor Occupational Safety and Health Administration (OSHA) form compiled by the Insurance Liaison. This annual summary of work-related injuries or illnesses must be posted by Feb. 1 of the year following the year covered by the form and keep it posted until April 30 of that year. This form is available on the US Department of Labor website at [www.osha.gov](http://www.osha.gov).

**Property Damage Incident Report** is completed by the Department Head, the Insurance Liaison or other individual involved with property damage and filed within 24 hours or as soon as possible with the Insurance Liaison.

**Transitional Duty Guidelines Form** is completed by the employee's Physician when returning to work following an injury or illness. Specifies what, if any work restrictions the employee shall follow.

**Witness Statement** is completed within 24 hours or as soon as possible by any/all witnesses to any type of incident and retained by the Department Head or Insurance Liaison.

**Hazard Communication Forms**

**Lockout/Tagout Procedure Forms**

**R-2012-1012 Ogle County Motor Vehicle Driving Policy & Review/ Employee Authorization for MVR Review**

**Confirmation of Transitional Duty**

*This form is completed by the employee and submitted to the Supervisor or Department Head when the employee is returning to work following an injury or illness, confirming the commencement of a Transitional Duty/Return-to-Work assignment and again at the resumption of regular duty, or an alternate regular assignment.*

**To be completed by the Employee**

Employee Name: _____ Dept. _____
Position: _____ Date of Injury/Temporary Disability: _____
( Work Related Injury/Disability ( Non-Work Related Injury/Disability
Supervisor's Name: _____ Phone: _____
Date available for Transitional Duty or to return to work (start date): _____
Next Medical Evaluation Date: _____

**To be completed by the Supervisor or Department Head**

Employee resumed regular day/alternate regular assignment on: (start date) _____
Were you able to accommodate the job modifications as described by the physician? ( yes ( no
If the job modifications were altered from the physician/s recommendations, please describe below:
_____
_____
_____
_____

\_\_\_\_\_  
Employee Signature Date

\_\_\_\_\_  
Department Head/Supervisor Signature Date



## ILLINOIS FORM 45: EMPLOYER'S FIRST REPORT OF INJURY

*Please type or print.*

Employer's FEIN	Date of report	Case or File #	Is this a lost workday case? Yes      No
Employer's name		Doing business as	
Employer's mailing address			Employer's email address
Nature of business or service			SIC code
Name of workers' compensation carrier/admin.		Policy/Contract #	Self-insured? Yes      No
Employee's full name			Birthdate
Employee's mailing address			Employee's e-mail address
Gender Male      Female	Marital status Married      Single	# Dependents	Employee's average weekly wage
Job title or occupation			Date hired
Time employee began work	Date and time of accident		Last day employee worked
If the employee died as a result of the accident, give the date of death.		Did the accident occur on the employer's premises? Yes      No	
Address of accident			
What was the employee doing when the accident occurred?			
How did the accident occur?			
What was the injury or illness? List the part of body affected and explain how it was affected.			
What object or substance, if any, directly harmed the employee?			
Name and address of physician/health care professional			
If treatment was given away from the worksite, list the name and address of the place it was given.			
Was the employee treated in an emergency room? Yes      No		Was the employee hospitalized overnight as an inpatient? Yes      No	
Report prepared by	Signature	Title and telephone #	Email address

Please send this form to: ILLINOIS WORKERS' COMPENSATION COMMISSION 4500 S. SIXTH ST. FRONTAGE RD SPRINGFIELD, IL 62703  
 By law, employers must keep accurate records of all work-related injuries and illness (except for certain minor injuries). Employers shall report to the Commission all injuries resulting in the loss of more than three scheduled workdays. Filing this form does not affect liability under the Workers' Compensation Act and is not incriminatory in any way. This information is confidential. IC45 8/12



**Non-Employee Injury Report**

www.oglecounty.org

*To be completed by Injured Party within 24 hours or as soon as possible following the incident and filed with the Ogle County Treasurer John Coffman.*

Name: \_\_\_\_\_ Soc. Sec. #: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone #: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Alt. Phone #: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Date of Incident: \_\_\_\_\_ Time of Incident: \_\_\_\_\_  am  pm

Location of Incident: \_\_\_\_\_  
(Please describe location in detail.)

Explain what happened, including the reason for being in the area of the incident:

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

Describe the injury: \_\_\_\_\_

What was the injury or illness? \_\_\_\_\_

Was medical attention sought?  Yes  No

If yes, date you first sought medical attention: \_\_\_\_\_

Medical Facility: \_\_\_\_\_ City: \_\_\_\_\_

Physician: \_\_\_\_\_ Phone #: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Describe Medical Attention: \_\_\_\_\_

\_\_\_\_\_

Prior Workers' Compensation claims or major injuries?  Yes  No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

I understand that by signing this report, I am verifying that all of the above statements are true and correct.

\_\_\_\_\_  
Signature Date Time

**PROPERTY DAMAGE INCIDENT REPORT**

www.oglecounty.org

*To be completed by the Department Head, Insurance Liaison, or other individual involved with property damage and filed within 24 hours or as soon as possible following the property damage with Insurance Liaison, Ogle County Treasurer John Coffman.*

Name of person filing the report: \_\_\_\_\_

Department Head     Insurance Liaison     Other \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Alternate Phone #: \_\_\_\_\_

Date of Incident: \_\_\_\_\_ Time of Incident: \_\_\_\_\_  am    pm

Property/Equipment damaged in the incident: \_\_\_\_\_

Specific location of the Incident: \_\_\_\_\_

Description of the Incident: \_\_\_\_\_

Was anyone injured?    Yes    No   If yes, what is the name of the injured party and describe the injury to the best of your knowledge: \_\_\_\_\_

Witnesses to the Incident:

Name: \_\_\_\_\_ Phone #: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Note: Witness Statements need to be completed by each witness present.**

\_\_\_\_\_  
Preparer's Signature

\_\_\_\_\_  
Date

**R-2016-0102**

ICRMT  
WC Employee Injury Report  
(to be completed by injured employee)

Your Name:

Home Phone:

Hire Date:

SSN:

Date of Birth:

Home Address & Phone:

Marital Status:     Single     Married     Divorced

# Dependents:

Date/Time of Incident:

Time Shift Began:

Date/Time Reported:

Address of accident occurrence:

Body part and how it was affected:

What were you doing when the accident occurred?

Reason for being in the area:

How did the accident occur ? (use 2<sup>nd</sup> sheet if necessary):

Who else saw the incident?

To whom did you report the incident?

Have you received first aid?	Yes	No	Were you treated in the Emergency Room?	Yes	No
If yes, check One:		On Premise	Were you hospitalized overnight as an inpatient?	Yes	No
		Outside medical assistance	Has your doctor taken you off of work?	Yes	No
		Both			

When is your next medical appointment? \_\_\_\_\_

Name, address, phone and fax # (if available) of medical facility where treatment was sought: \_\_\_\_\_

Date/Time of such treatment:

Prior Workers' Compensation Claims?     Yes     No

If yes, please explain using 2<sup>nd</sup> sheet if necessary (i.e. date, body part, injury specifics): \_\_\_\_\_

I agree the above is true and accurate

**Employee's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**R-2016-0102**

ICRMT  
WC Supervisor Report  
(to be completed by supervisor of injured employee)

---

Injured Employee Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Employee Home Phone: \_\_\_\_\_ Employee's approximate weekly wage: \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Date/Time of Accident: \_\_\_\_\_ Date/Time Employee Reported: \_\_\_\_\_

Medical Expenses so far (if known): \_\_\_\_\_

Did/will employee lose time from work as a result of this accident?  Yes  No

If yes, please list dates/timeframes missed due to this accident: \_\_\_\_\_

If lost time: Did or will the lost time exceed 3 consecutive scheduled work shifts?  Yes  No

Is there a possibility of accommodating a modified duty position during any recovery period?  Yes  No

If no, reason why: \_\_\_\_\_

Was medical treatment performed outside of the employer's facility?  Yes  No

If yes, was this medical provider (select all that apply):  Occupational Health Provider  
 Chosen by employee  
 Other

Did the employee see more than one physician for this accident?  Yes  No

What object or substance, if any, directly harmed the employee? \_\_\_\_\_

Did the accident occur on the employer's premises?  Yes  No

Please review the employee's report of injury. Do you agree with the employee's details of this accident?  Yes  No

If no, please explain thoroughly (use 2<sup>nd</sup> sheet if necessary): \_\_\_\_\_

What did the employee tell you regarding what happened for the incident to occur? \_\_\_\_\_

What was the sequence of events that led up to the accident? What material, equipment and tools were involved? \_\_\_\_\_

**R-2016-0102**

What were the environmental conditions at the accident site? \_\_\_\_\_

\_\_\_\_\_

---

What was done immediately after the accident? \_\_\_\_\_

\_\_\_\_\_

Specify body parts injured in this accident: \_\_\_\_\_

Injury Type (i.e. sprain, fracture, etc.): \_\_\_\_\_

Accident Location: \_\_\_\_\_

Loss Causation: \_\_\_\_\_

What conditions or actions contributed to the accident? \_\_\_\_\_

\_\_\_\_\_

What system design and implementation problems contributed to the accident occurrence? \_\_\_\_\_

\_\_\_\_\_

What actions will be taken to reduce unsafe conditions and actions? \_\_\_\_\_

\_\_\_\_\_

What actions will be taken to strengthen system design and implementation? \_\_\_\_\_

\_\_\_\_\_

Would you like Method Management to contact you for further risk management assistance?  Yes  No

Do you believe an outside/3<sup>rd</sup> party is responsible for this accident occurring?  Yes  No

If yes, please indicate the responsible party's name, address and phone number if known: \_\_\_\_\_

---

I agree the above is true and accurate

Supervisor Name: \_\_\_\_\_ Supervisor Phone: \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**R-2016-0102**

ICRMT  
WC Witness Report  
(to be completed by accident witness)

---

Injured Employee Name: \_\_\_\_\_

Your Name: \_\_\_\_\_ Your Phone Number: \_\_\_\_\_

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

Your relationship with injured employee (check one):       Co-worker     Other

Date/Time of Incident: \_\_\_\_\_ Today's Date/Time: \_\_\_\_\_

What was the employee doing at the time of the accident? \_\_\_\_\_

What was the sequence of events that led up to the accident? \_\_\_\_\_

\_\_\_\_\_

What was done immediately after the incident? \_\_\_\_\_

\_\_\_\_\_

What were the environmental conditions at the accident site? \_\_\_\_\_

\_\_\_\_\_

What materials, equipment and tools were involved? \_\_\_\_\_

---

I agree the above is true and accurate

Witness Name (please print): \_\_\_\_\_

Witness' Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Transitional Duty Guidelines Form**

www.oglecounty.org

*To be completed by the employee's Physician when returning to work following an injury or illness and submitted to the Department Head.*

Employee Name: \_\_\_\_\_ Dept: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Injury: \_\_\_\_\_

Description of Injury/Illness: \_\_\_\_\_

-----**The following must be completed by Physician**-----

1. \_\_\_\_\_ Fit for Duty (no restrictions), effective date: \_\_\_\_\_

2. \_\_\_\_\_ Restriction until (date): \_\_\_\_\_

Details of Restriction: \_\_\_\_\_

Considering these restrictions, can the employee be assigned to one of these following forms of Transitional Duty? If so, please check the one that best suits the type of work the employee can perform according to his/her injury.

- Medium Work;** May require occasional lifting up to 50 lbs., carrying loads up to 20 lbs., frequent tasks involving standing, walking, sitting.
- Light Work;** May require lifting up to 20lbs., some walking, standing, and/or pushing or pulling. Majority of work is sedentary.
- Semi-Sedentary Work;** May require lifting light items up to 10 lbs., sitting, minimal walking, answering phones.
- Sedentary Work;** Sitting, answering phones, computer work.
- Cannot be assigned transitional duty at this time for a duration of \_\_\_\_\_ days.

3. Date of next evaluation: \_\_\_\_\_

4. Projected date Employee could be returned to Full Duty: \_\_\_\_\_

\_\_\_\_\_  
Attending Physician Date

\_\_\_\_\_  
Address Phone Number

**Witness Statement**

www.oglecounty.org

*To be completed by any/all Witnesses within 24 hours of the incident and filed with Ogle County Treasurer John Coffman.*

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

Home Phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Alternate phone #:(\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name of Injured Party: \_\_\_\_\_

Date of Incident: \_\_\_\_\_ Time of Incident: \_\_\_\_\_  am  pm

Please explain, in your words, what you saw:

- Where were you at and what were you doing?
- How did the incident happen?
- How would you describe the appearance of the injured party?
- Describe the area in which the incident occurred.
- Who else was at the scene?
- What conversation took place?
- Did the injured party say anything to you?
- Any other information about the incident?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please use the back of this sheet to continue your statement if necessary.

I understand that by signing this statement, I am verifying that all of the information contained herein is true and correct.

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date



Form #2

LETTER TO REQUEST A COMPLETE LABEL

TO: Chemical Manufacturer, Vendor, Distributor

FROM: Ogle County

DATE:

RE: Chemical Labels

We are using (number) of your products and in evaluating the label(s) on (this/these) product(s), we determined that the label(s) (is/are) not appropriate for the following reason(s):

Product Name

Reason Label Is Not Appropriate

Please clarify the wording on (this/these) label(s) or send (a) revised label(s). Your prompt attention is necessary for us to fully implement our Hazard Communication Program. Please respond to this request no later than (date 14 days after the date of this letter).

Thank you for your cooperation.

\* A tickler file should be established to notify the responsible individual in 14 days that their request for a revised label has not been received and that a second notice is needed.

**Form #3                      SECOND REQUEST FOR A COMPLETE LABEL**

**TO:        Chemical Manufacturer, Vendor, Distributor**

**FROM:    Ogle County**

**DATE:**

**RE:        Labels**

On (date) we notified you that the warning label for your product(s) was incomplete. The label is not appropriate for the following reason(s):

Product Name

Reason Label Is Not Appropriate

We requested that you supply us with this information by (date). Please clarify the wording on (this/these) label(s) or send (a) revised label(s). Your prompt attention is necessary for us to fully implement our Hazard Communication Program. Please respond to this request no later than (date 14 days after the date of this letter).

Thank you for your cooperation.

**Form #4 CHECKLIST OF REQUIRED SDS INFORMATION**

The Hazard Communication Standard 1910.1200 requires that 16 items of information be included in Safety Data Sheets provided to purchasers. There is a specified order for these items; they will be found in the order listed below. If the preparer of the SDS has found no relevant information for a given item, the SDS must be marked to indicate that no applicable information was found. This checklist should be used to determine the completeness of the SDS. It does not assess the accuracy of the information. See Appendix D of 1910.1200 for a detailed description of SDS contents.

**Section 1, Identification** includes product identifier; manufacturer or distributor name, address, phone number; emergency phone number; recommended use; restrictions on use.

**Section 2, Hazard(s) identification** includes all hazards regarding the chemical; required label elements.

**Section 3, Composition/information on ingredients** includes information on chemical ingredients; trade secret claims.

**Section 4, First-aid measures** includes important symptoms/ effects, acute, delayed; required treatment.

**Section 5, Fire-fighting measures** lists suitable extinguishing techniques, equipment; chemical hazards from fire.

**Section 6, Accidental release measures** lists emergency procedures; protective equipment; proper methods of containment and cleanup.

**Section 7, Handling and storage** lists precautions for safe handling and storage, including incompatibilities.

**Section 8, Exposure controls/personal protection** lists OSHA's Permissible Exposure Limits (PELs); ACGIH Threshold Limit Values (TLVs); and any other exposure limit used or recommended by the chemical manufacturer, importer, or employer preparing the SDS where available as well as appropriate engineering controls; personal protective equipment (PPE).

**Section 9, Physical and chemical properties** lists the chemical's characteristics.

**Section 10, Stability and reactivity** lists chemical stability and possibility of hazardous reactions.

**Section 11, Toxicological information** includes routes of exposure; related symptoms, acute and chronic effects; numerical measures of toxicity.

**Section 12, Ecological information\***

**Section 13, Disposal considerations\***

**Section 14, Transport information\***

**Section 15, Regulatory information\***

**Section 16, Other information**, includes the date of preparation or last revision.

\*Note: Since other Agencies regulate this information, OSHA will not be enforcing Sections 12 through 15(29 CFR 1910.1200(g)(2)).

**Employers must ensure that SDSs are readily accessible to employees.**

See Appendix D of 1910.1200 for a detailed description of SDS contents.

*Form #5*

**LETTER TO REQUEST SDS**

**TO: Chemical Manufacturer, Vendor, Distributor**  
**FROM: Ogle County**  
**DATE:**  
**RE: Safety Data Sheets (SDS)**

We are using (number) of your products and need (a) Safety Data Sheet(s) in order to complete our Hazard Communication Program.

Please send (a) Safety Data Sheet(s) on the following products:

Your prompt attention is necessary for us to fully implement our Hazard Communication Program. Please send the SDS(s) no later than (date 15 days after the date of this letter).

Thank you for your cooperation.

\* A tickler file should be established to notify the responsible individual in 15 days that their request for an SDS has not been received and that a second notice is needed.

*Form #6*

**SECOND REQUEST FOR SDS**

**TO: Chemical Manufacturer, Vendor, Distributor**

**FROM: Ogle County**

**DATE:**

**RE: Safety Data Sheets (SDS)**

On (date) we requested (an) Safety Data Sheet(s) on the following product(s):

We have not received (it/them). Your prompt attention to this is necessary for us to complete our Hazard Communication Program. Please respond to this second request by (date 15 days after the date of this letter).

Thank you for your cooperation.

**Form #7**

**LETTER TO REQUEST A COMPLETE SDS**

**TO:** Chemical Manufacturer, Vendor, Distributor

**FROM:** Ogle County

**DATE:**

**RE:** Safety Data Sheets (SDS)

In reviewing the Safety Data Sheet(s) for your product(s), the following required information (according to the OSHA Hazard Communication Standard 1910.1200) was not on the SDS:

Product Name

Reason SDS Is Not Complete

Please supply us with this information. Your prompt attention to this is necessary for us to fully implement our Hazard Communication Program. Please send this information by (date 15 days after the date of this letter).

Thank you for your cooperation.

\* A tickler file should be established to notify the responsible individual in 15 days that their request for a revised SDS has not been received and that a second notice is needed.

Form #8

**SECOND REQUEST FOR A COMPLETE SDS**

**TO: Chemical Manufacturer, Vendor, Distributor**

**FROM: Ogle County**

**DATE:**

**RE: Safety Data Sheets (SDS)**

On (date) we notified you that the Safety Data Sheet(s) for your product(s) (was/were) incomplete. The following required information was not on the SDS(s):

Product Name

Reason SDS Is Not Complete

We requested that you supply us with this information by (date) . We have not received this information. Your prompt attention to this is necessary for us to complete our Hazard Communication Program. Please respond to this second request by (date 15 days after the date of this letter).

Thank you for your cooperation.

Form #9

LETTER TO ACCOMPANY PURCHASE ORDERS

*This is a notice to chemical vendors concerning the need for SDS's and container labeling. This letter should be attached to purchase orders for all chemicals or other hazardous substances.*

TO: Chemical Manufacturer, Vendor, Distributor  
FROM: Ogle County  
DATE:  
RE: Hazard Communication Responsibilities

Attached to this letter is a purchase order for the chemicals which we plan to utilize in our facility. Our receiving personnel have been instructed to accept only containers which have been properly labeled and identified. Improperly labeled containers will result in refusal of the shipment. We would appreciate your cooperation in this matter.

We expect to receive Safety Data Sheets (SDS) prior to receipt of our initial order and/or when an SDS has been revised. If your policy is different, or has changed since our last order, please notify us as soon as possible. To assist us, we would appreciate if you would record the responsible party information on the shipping papers.

If you have any questions, please do not hesitate to contact me. Thank you for your cooperation. I look forward to working with you in the future.

Yours truly,

(Name of Purchasing Director/Program Director)

**NOTE: THIS LETTER SHOULD BE ATTACHED TO THE INITIAL AND/OR TO EACH PURCHASE ORDER FOR CHEMICALS OR HAZARDOUS SUBSTANCES**

Form #10

**REQUEST FOR CHEMICAL HAZARD INFORMATION**

(Use a separate form for each chemical/material)

Name of Requester(s): \_\_\_\_\_ Date: \_\_\_\_\_

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

Department: \_\_\_\_\_

Name of Chemical/Material: \_\_\_\_\_

Manufacturer: \_\_\_\_\_

Description: \_\_\_\_\_  
(Please describe the material as completely as possible)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employee or Union Representative Signature

Received copy of SDS: Yes      No

Copy provided by: \_\_\_\_\_ Date: \_\_\_\_\_

Form #11

**EMPLOYEE'S NEW CHEMICAL/SUBSTANCE SIGNATURE FORM**

Name of New Chemical/Substance: \_\_\_\_\_

Vendor's Name: \_\_\_\_\_

Location: \_\_\_\_\_

Date the Chemical Arrived: \_\_\_\_\_

Date of Posting (SDS) Form: \_\_\_\_\_

**This chemical may have health effects not covered during your initial Hazard Communication Training Session. Each affected employee is asked to read the attached Safety Data Sheet (SDS) to understand the new health effects for the following chemical:**

**Upon reading the Safety Data Sheet (SDS), each employee must sign and date this form.**

- |          |           |
|----------|-----------|
| 1. _____ | 6. _____  |
| 2. _____ | 7. _____  |
| 3. _____ | 8. _____  |
| 4. _____ | 9. _____  |
| 5. _____ | 10. _____ |



Form #13

**NON-ROUTINE HAZARDOUS TASK  
TRAINING DOCUMENTATION FORM**

The following employee(s) has/have been trained to perform work in what is considered a "non-routine hazardous task."

Nonroutine Hazardous Task	Employee(s) Name	Date of Training	Trainer



*Form #15*

**LETTER TO CONTRACTORS**

**Subject: OSHA HAZARD COMMUNICATION STANDARD**

**To Whom it May Concern:**

The Occupational Safety & Health Administration (OSHA) Hazard Communication Standard (29CFR 1910.1200) states that contractors/suppliers must be informed of the hazardous chemicals their employees may be exposed to while performing their work and any appropriate protective measures. In order to comply with this requirement, (Name of facility) has developed a list of all the hazardous chemicals known to be present in our facility. A Safety Data Sheet (SDS) is also on file for each of these chemicals and/or hazardous substances. This information is available to you and to your employees upon request.

In order to protect the safety and health of our own employees, contractors/suppliers must provide (upon request) an SDS on any hazardous chemical(s) or material(s) which they bring into this facility. Failure to provide this information in a timely manner will result in the removal of the contractor/supplier from the premises.

Each employer is also responsible for notifying any subcontractor they employ regarding the requirements of OSHA's Hazard Communication Standard and other provisions described in this letter.

If we can be of any further assistance, please feel free to contact me at (phone number).

Sincerely,

Form #16

**HAZARD COMMUNICATION ANNUAL  
PROGRAM SUMMARY**

Training

	Number of Training Courses Presented:	Number of Employees Trained:
New-employee training:		
Work-area-specific training:		
New-substance training:		
Other training:		
Total courses/employees		

Hazardous Substances

	# of Different Hazardous Substances in Use:	# of SDS on File:
Previous Total:		
New This Year:		
Revised Total:		

The following activities have been completed:

- Written plan is up to date.
- Hazardous substance inventory has been updated.
- All training is up to date.
- All SDS are up to date.
- All products are properly labeled.
- All portable containers are properly labeled.

If any of the above activities are not complete, explain:

---



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

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

Form #17

**EMPLOYEE HAZARD COMMUNICATION INTERVIEW**

Date of Interview: \_\_\_\_\_

Interviewed by: \_\_\_\_\_

Agency: \_\_\_\_\_

Location: \_\_\_\_\_

1. Do you feel that your organization's Hazard Communication Program is successful overall? Yes \_\_\_\_ No \_\_\_\_ Why?

\_\_\_\_\_

2. What was the subject of the last training session you attended?

\_\_\_\_\_

3. Have you applied the information from that session? Yes \_\_\_\_ No \_\_\_\_ If yes, how?

\_\_\_\_\_

4. Have you had an occasion to refer to an SDS in the last month? Yes \_\_\_\_ No \_\_\_\_ Which one?

a. Was the SDS easy to understand? Yes \_\_\_\_ No \_\_\_\_

b. Why did you refer to the SDS?

\_\_\_\_\_

\_\_\_\_\_

c. Did the SDS have the information you were looking for? Yes \_\_\_\_ No \_\_\_\_ If no, what information was missing?

\_\_\_\_\_

5. Have all of the containers in your work area been properly labeled and marked?

Yes \_\_\_\_ No \_\_\_\_

6. Over the last six months, has your work area been involved in any chemical spill or emergency? Yes \_\_\_\_ No \_\_\_\_ If yes, describe

\_\_\_\_\_

7. Were you prepared? Yes \_\_\_\_ No \_\_\_\_ If not, why not?

\_\_\_\_\_

Form # 18

## HAZARD COMMUNICATION CHECKLIST

	Yes	No
Has a program for hazard communication training been established?		
Has a program for hazard communication procedures been established and is the program reviewed on an annual basis?		
Are chemical injuries tracked for program improvement?		
Have chemical hazard control procedures developed for each job?		
Has a chemical inventory of the facility been conducted?		
Are the procedures reviewed on an annual basis?		
Do the hazard communication procedures include the following:		
• A statement of the intended use?		
• Steps for labeling of containers?		
• Steps for safe issuance, use, transfer and disposal of chemicals?		
Are control procedures inspected at least annually?		
Are periodic inspections conducted by a competent employee?		
Is the inspection designed to correct deviations or inadequacies?		
Is the inspection documented?		
Have SDSs been produced in accordance with 29CFR 1910.1200?		
Have employees been informed of:		
• The requirements of 29 CFR 1910.1200?		
• Any operations in their work area where hazardous chemicals are present?		
• The location and availability of the written HAZCOM program?		
• The location and availability of the lists of hazardous chemicals?		
Does employee training include at least:		
• Methods & means necessary to detect the presence or release of a chemical?		
• The physical and health hazards of the chemicals in the work area?		
• The steps employees can take to protect themselves from the chemicals?		
• The details of the written program?		
Have criteria for recurrent training been developed?		
Is the training documented?		
Is the training conducted by a competent person?		
Is retraining required whenever there is a change in job assignments?		



ATTACHMENT B  
**Certification of Training  
(Authorized Personnel)**

I certify that I received training as an authorized employer under Ogle County Lockout/Tagout program. I further certify that I understand the procedures and will abide by those procedures.

\_\_\_\_\_  
AUTHORIZED EMPLOYEE SIGNATURE

\_\_\_\_\_  
DATE

ATTACHMENT C  
**Certification of Training  
(Affected Personnel)**

I certify that I received training as an Affected Employee under Ogle County Lockout/Tagout Program. I further certify and understand that I am prohibited from attempting to restart or re-energize machines or equipment that are locked out or tagged out.

\_\_\_\_\_  
AUTHORIZED EMPLOYEE SIGNATURE

\_\_\_\_\_  
DATE

ATTACHMENT D  
**Lockout/Tagout Inspection Certification**

I certify that Equipment was inspected on this date utilizing lockout/tagout procedures. The inspection was performed while working on Equipment .

\_\_\_\_\_  
AUTHORIZED EMPLOYEE SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
INSPECTOR SIGNATURE

\_\_\_\_\_  
DATE

ATTACHMENT E  
**Outside Personnel/Contractor Certification**

I certify that \_\_\_\_\_ and \_\_\_\_\_ (outside personnel/contractor) have informed each other of our respective lockout/tagout procedures.

\_\_\_\_\_  
AUTHORIZED EMPLOYEE SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
INSPECTOR SIGNATURE

\_\_\_\_\_  
DATE

ATTACHMENT F  
Equipment Specific Procedure  
for  
Ogle County

(Date)

**Machine Identification**

General Description:

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Manufacturer:

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Model Number:

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Serial Number:\*

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*\* If more than one piece of same equipment, list all serial numbers.*

Location of equipment:

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**Operator Controls**

The types of controls available to the operator need to be determined. This should help identify energy sources and lockout capacity for the equipment.

List types of operator controls:

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**Energy Sources**

The energy sources, such as electrical, steam, hydraulic, pneumatic, natural gas, stored energy, etc.) present on this equipment are:

ENERGY SOURCE	LOCATION	Lockable		Type lock or block needed
		Yes	No	

**Shutdown Procedures**

List the steps in order necessary to shut down and de-energize the equipment. Be specific. For stored energy, be specific about how the energy will be dissipated or restrained.

Procedure:

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Lock Type & Location:

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How Will De-energized State Be Verified? \_\_\_\_\_

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***NOTIFY ALL AFFECTED EMPLOYEES WHEN THIS PROCEDURE IS IN APPLICATION.***

**Start Up Procedures**

List the steps in order necessary to reactivate (energize) the equipment. Be specific.

Procedure:

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AUTHORIZED EMPLOYEES	
Name	Job Title

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Approved by \_\_\_\_\_ Date \_\_\_\_\_

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Approved by \_\_\_\_\_ Date \_\_\_\_\_

**Employee Authorization for MVR Review**

I acknowledge that the information contained in **Ogle County** MVR policy has been reviewed with me, and a copy of the policy has been furnished to me. As a driver of an **Ogle County** vehicle or a private vehicle on **Ogle County** business I understand d that it is my responsibility to operate the vehicle in a safe manner and to drive defensively to prevent injuries and property damage.

I also understand that my employer will periodically review my Motor Vehicle Record to determine continued eligibility. In accordance with the law, I have been informed that a MVR will be periodically obtained on me for continued qualification and employment purposes.

I acknowledge the receipt of the above disclosure and authorize my employer or its designated agent to obtain a MVR report. This authorization is valid as long as I am an employee or employee candidate and may only be rescinded in writing.

\_\_\_\_\_  
Employee Name (printed)

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

Ogle County Safety Manual presented at the December 15, 2015 Ogle County Board Meeting.

Approved at the January 19, 2016 Ogle County Board Meeting.

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Kim P. Gouker  
Ogle County Board Chairman

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Rebecca Huntley  
Ogle County Clerk

**RESOLUTION 2016-0106**

WHEREAS, the Office of the State's Attorneys Appellate Prosecutor was created to provide services to State's Attorneys in Counties containing less than 3,000,000 inhabitants; and

WHEREAS, the powers and duties of the Office of the State's Attorneys Appellate Prosecutor are defined and enumerated in the "State's Attorneys Appellate Prosecutor's Act", 725 ILCS 210/1 et seq., as amended; and

WHEREAS, the Illinois General Assembly appropriates monies for the ordinary and contingent expenses of the Office of the State's Attorneys Appellate Prosecutor, one-third from the State's Attorneys Appellate Prosecutor's County Fund and two-thirds from the General Revenue Fund, provided that such funding receives approval and support from the respective Counties eligible to apply; and

WHEREAS, the Office of the State's Attorneys Appellate Prosecutor shall administer the operation of the appellate offices so as to insure that all participating State's Attorneys continue to have final authority in preparation, filing, and arguing of all appellate briefs and any trial assistance; and

NOW, THEREFORE, BE IT RESOLVED that the Ogle County Board, in regular session, this 19 day of January, 2016 does hereby support the continued operation of the Office of the State's Attorneys Appellate Prosecutor, and designates the Office of the State's Attorneys Appellate Prosecutor as its Agent to administer the operation of the appellate offices and process said appellate court cases for this County.

BE IT FURTHER RESOLVED that the attorneys employed by the Office of the State's Attorneys Appellate Prosecutor are hereby authorized to act as Assistant State's Attorneys on behalf of the State's Attorney of this County in the appeal of all cases, when requested to do so by the State's Attorney, and with the advice and consent of the State's Attorney prepare, file, and argue appellate briefs for those cases; and also, as may be requested by the State's Attorney, to assist in the prosecution of cases under the Illinois Controlled Substances Act, the Cannabis Control Act, the Drug Asset Forfeiture Procedure Act and the Narcotics Profit Forfeiture Act. Such attorneys are further authorized to assist the State's Attorney in the State's Attorney's duties under the Illinois Public Labor Relations Act, including negotiations thereunder, as well as in the trial and appeal of tax objections.

BE IT FURTHER RESOLVED that the Office of the State's Attorneys Appellate Prosecutor will offer Continuing Legal Education training programs to the State's Attorneys and Assistant State's Attorneys.

BE IT FURTHER RESOLVED that the attorneys employed by the Office of the State's Attorneys Appellate Prosecutor may also assist the State's Attorney of this County in the discharge of the State's Attorney's duties in the prosecution and trial of other cases, and may act as Special Prosecutor if duly appointed to do so by a court having jurisdiction.

BE IT FURTHER RESOLVED that the Ogle County Board hereby agrees to participate in the service program of the Office of the State's Attorneys Appellate Prosecutor for Fiscal Year 2016, commencing December 1, 2015 and ending November 30, 2016, by hereby appropriating the sum of \$18,000.00 as consideration for the express purpose of providing a portion of the funds required for financing the operation of the Office of the State's Attorneys Appellate Prosecutor, and agrees to deliver the same to the Office of the State's Attorneys Appellate Prosecutor on request during the Fiscal Year 2016.

Passed and adopted by the County Board of Ogle County, Illinois, this 19th day of January, 2016.

ATTEST: \_\_\_\_\_

County Clerk  
Rebecca Huntley

Chairman \_\_\_\_\_

Kim P. Gouker

# RESOLUTION

2016-0104

*WHEREAS*, it is necessary to transfer funds from certain accounts to other accounts in order to conduct the County business in an orderly fashion,

*WHEREAS*, the County Board reviewed its finances while preparing their 2016 budget, and at that time identified certain funds that could be transferred to the General Fund for the general operation of the County.

*THEREFORE, BE IT RESOLVED*, that the entire balance of the IFiber, Sheriff's Petty Cash, and Bad Check Restitution funds be transferred to County General for operation of the County, and

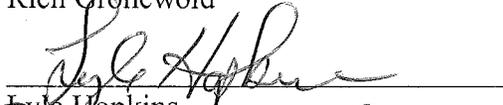
*BE IT FURTHER RESOLVED*, that the sum of \$120,000.00 be transferred from the Self Insurance Reserve Fund to the County General Fund for the operation of the County.

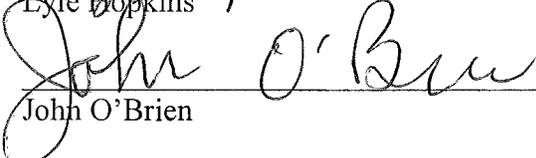
APPROVED this 19th day of January, 2016  
OGLE COUNTY FINANCE COMMITTEE

  
\_\_\_\_\_  
Greg Sparrow, Chairman

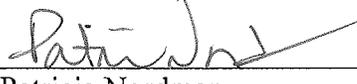
  
\_\_\_\_\_  
Kim Gouker

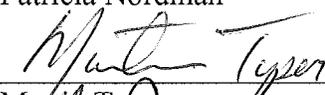
  
\_\_\_\_\_  
Rich Gronewold

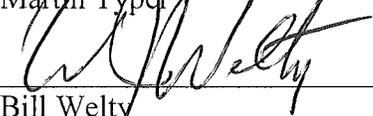
  
\_\_\_\_\_  
Lyle Hopkins

  
\_\_\_\_\_  
John O'Brien

  
\_\_\_\_\_  
Zachary Oltmanns

  
\_\_\_\_\_  
Patricia Nordman

  
\_\_\_\_\_  
Martin Typen

  
\_\_\_\_\_  
Bill Welty



*R. Daniel Jones*

01/12/2016

# Accounts Payable by G/L Distribution Report

G/L Date Range 12/08/15 - 01/11/16

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 200 - County Highway</b>										
Department <b>17 - Highway</b>										
Account <b>4210 - Disposal Service</b>										
1140 - CITY OF OREGON	OREHWY1601	CH Fund - disposal service	Paid by Check # 93504		01/05/2016	01/06/2016	01/06/2016		01/07/2016	66.00
							Account <b>4210 - Disposal Service</b> Totals		Invoice Transactions 1	<u>\$66.00</u>
Account <b>4212 - Electricity</b>										
1156 - COMED	COMHWY1512b	CH Fund - monthly usage	Paid by Check # 93447		12/23/2015	12/24/2015	12/24/2015		12/28/2015	312.62
							Account <b>4212 - Electricity</b> Totals		Invoice Transactions 1	<u>\$312.62</u>
Account <b>4214 - Gas (Heating)</b>										
1898 - NICOR	NICHWY1512	CH Fund - monthly usage	Paid by Check # 93420		12/14/2015	12/14/2015	12/14/2015		12/15/2015	573.20
							Account <b>4214 - Gas (Heating)</b> Totals		Invoice Transactions 1	<u>\$573.20</u>
Account <b>4216.10 - Telephone Primary Location</b>										
1941 - FRONTIER	FROHWY1512	CH Fund - monthly usage	Paid by Check # 93448		12/23/2015	12/24/2015	12/24/2015		12/28/2015	74.79
1265 - VERIZON	9756798734	CH Fund - monthly usage	Paid by Check # 93466		12/23/2015	12/24/2015	12/24/2015		12/28/2015	179.40
1884 - CURTIS COOK	CURHWY1601	CH Fund - reimburse cell phone - Oct, Nov & Dec.	Paid by Check # 93505		01/05/2016	01/06/2016	01/06/2016		01/07/2016	150.00
							Account <b>4216.10 - Telephone Primary Location</b> Totals		Invoice Transactions 3	<u>\$404.19</u>
Account <b>4412 - Official Publications</b>										
1502 - OGLE COUNTY LIFE	393976	CH Fund - legal notice	Paid by Check # 93421		12/14/2015	12/14/2015	12/14/2015		12/15/2015	59.50
1502 - OGLE COUNTY LIFE	394388	CH Fund - legal notice	Paid by Check # 93421		12/14/2015	12/14/2015	12/14/2015		12/15/2015	59.50
1502 - OGLE COUNTY LIFE	394789	CH Fund - legal notice	Paid by Check # 93421		12/14/2015	12/14/2015	12/14/2015		12/15/2015	59.50
							Account <b>4412 - Official Publications</b> Totals		Invoice Transactions 3	<u>\$178.50</u>
Account <b>4422 - Travel Expenses, Dues &amp; Seminars</b>										
1846 - BUSINESS CARD	82040	CH Fund - THE Conference registration fee	Paid by Check # 93445		12/23/2015	12/24/2015	12/24/2015		12/28/2015	120.00
2227 - ILLINOIS ASSOCIATION OF COUNTY ENGINEERS	01104708	CH Fund - 2016 IACE membership dues/Curtis	Paid by Check # 93451		12/23/2015	12/24/2015	12/24/2015		12/28/2015	890.51
							Account <b>4422 - Travel Expenses, Dues &amp; Seminars</b> Totals		Invoice Transactions 2	<u>\$1,010.51</u>
Account <b>4474 - Deer Expense</b>										
1876 - ROCHELLE WASTE DISPOSAL, LLC	14987456	CH Fund - deer expense	Paid by Check # 93426		12/14/2015	12/14/2015	12/14/2015		12/15/2015	45.00
1876 - ROCHELLE WASTE DISPOSAL, LLC	14988794	CH Fund - deer expense	Paid by Check # 93461		12/23/2015	12/24/2015	12/24/2015		12/28/2015	75.00
							Account <b>4474 - Deer Expense</b> Totals		Invoice Transactions 2	<u>\$120.00</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 12/08/15 - 01/11/16

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund <b>200 - County Highway</b>										
Department <b>17 - Highway</b>										
Account <b>4490 - Contingencies</b>										
4440 - NORTHERN ILLINOIS DISPOSAL SERVICES, INC.	14987787	CH Fund - dumpster service	Paid by Check # 93458		12/23/2015	12/24/2015	12/24/2015		12/28/2015	120.00
							Account <b>4490 - Contingencies</b> Totals		Invoice Transactions 1	<u>120.00</u>
Account <b>4510 - Office Supplies</b>										
1846 - BUSINESS CARD	79491	CH Fund - office supplies	Paid by Check # 93445		12/23/2015	12/24/2015	12/24/2015		12/28/2015	147.19
2986 - RANDALL BULTHAUS	8640213	CH Fund - reimburse for purchase of file folders	Paid by Check # 93503		01/05/2016	01/06/2016	01/06/2016		01/07/2016	76.10
1565 - QUILL CORPORATION	1756711	CH Fund - office supplies	Paid by Check # 93512		01/05/2016	01/06/2016	01/06/2016		01/07/2016	123.84
							Account <b>4510 - Office Supplies</b> Totals		Invoice Transactions 3	<u>\$347.13</u>
Account <b>4540 - Repairs &amp; Maint - Facilities</b>										
1871 - HOWARD LEE & SONS INC	53020	CH Fund - fuel tank line test	Paid by Check # 93413		12/14/2015	12/14/2015	12/14/2015		12/15/2015	400.00
1597 - RAYNOR DOOR AUTHORITY INC	114745	CH Fund - shop door transmitters	Paid by Check # 93424		12/14/2015	12/14/2015	12/14/2015		12/15/2015	396.00
4606 - PEGGY S. CORCORAN	12312015-2	CH Fund - janitorial service - Dec.	Paid by Check # 93506		01/05/2016	01/06/2016	01/06/2016		01/07/2016	800.00
							Account <b>4540 - Repairs &amp; Maint - Facilities</b> Totals		Invoice Transactions 3	<u>\$1,596.00</u>
Account <b>4545.10 - Petroleum Products - Gasoline</b>										
1924 - KELLEY WILLIAMSON COMPANY	IN-117423	CH Fund - gas	Paid by Check # 93415		12/14/2015	12/14/2015	12/14/2015		12/15/2015	1,527.91
							Account <b>4545.10 - Petroleum Products - Gasoline</b> Totals		Invoice Transactions 1	<u>\$1,527.91</u>
Account <b>4545.20 - Petroleum Products - Diesel</b>										
1924 - KELLEY WILLIAMSON COMPANY	IN-117482	CH Fund - diesel	Paid by Check # 93415		12/14/2015	12/14/2015	12/14/2015		12/15/2015	9,445.66
							Account <b>4545.20 - Petroleum Products - Diesel</b> Totals		Invoice Transactions 1	<u>\$9,445.66</u>
Account <b>4545.30 - Petroleum Products - Motor Oil</b>										
1924 - KELLEY WILLIAMSON COMPANY	IN-118041	CH Fund - oil	Paid by Check # 93415		12/14/2015	12/14/2015	12/14/2015		12/15/2015	3,104.50
							Account <b>4545.30 - Petroleum Products - Motor Oil</b> Totals		Invoice Transactions 1	<u>\$3,104.50</u>
Account <b>4610.10 - Maint of Roads &amp; Bridges Road Rock</b>										
2275 - EAGLE CREEK QUARRIES	1896	CH Fund - road rock	Paid by Check # 93409		12/14/2015	12/14/2015	12/14/2015		12/15/2015	2,599.65
2647 - MARTIN AND COMPANY EXCAVATING	24187	CH Fund - road rock	Paid by Check # 93453		12/23/2015	12/24/2015	12/24/2015		12/28/2015	382.23
2647 - MARTIN AND COMPANY EXCAVATING	24206	CH Fund - road rock	Paid by Check # 93453		12/23/2015	12/24/2015	12/24/2015		12/28/2015	874.88
2051 - ROCK CUT QUARRIES	4081	CH Fund - road rock	Paid by Check # 93462		12/23/2015	12/24/2015	12/24/2015		12/28/2015	1,878.10



# Accounts Payable by G/L Distribution Report

G/L Date Range 12/08/15 - 01/11/16

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<b>Fund 200 - County Highway</b>										
Department <b>17 - Highway</b>										
Account <b>4610.10 - Maint of Roads &amp; Bridges Road Rock</b>										
1606 - ROGERS READY MIX	179525	CH Fund - road rock	Paid by Check # 93463		12/23/2015	12/24/2015	12/24/2015		12/28/2015	40.52
3613 - WAGNER AGGREGATE, INC.	16834	CH Fund - road rock	Paid by Check # 93467		12/23/2015	12/24/2015	12/24/2015		12/28/2015	138.01
3613 - WAGNER AGGREGATE, INC.	16870	CH Fund - road rock	Paid by Check # 93517		01/05/2016	01/06/2016	01/06/2016		01/07/2016	14.91
								Account <b>4610.10 - Maint of Roads &amp; Bridges Road Rock</b> Totals	Invoice Transactions 7	<u>\$5,928.30</u>
Account <b>4610.40 - Maint of Roads &amp; Bridges Guard Rail Material</b>										
3039 - NORTHERN CONTRACTING, INC.	6168	CH Fund - guardrail repairs	Paid by Check # 93457		12/23/2015	12/24/2015	12/24/2015		12/28/2015	746.61
								Account <b>4610.40 - Maint of Roads &amp; Bridges Guard Rail Material</b> Totals	Invoice Transactions 1	<u>\$746.61</u>
Account <b>4610.90 - Maint of Roads &amp; Bridges JULIE</b>										
2503 - G4S SECURE INTEGRATION LLC	21351	CH Fund - julie locates	Paid by Check # 93449		12/23/2015	12/24/2015	12/24/2015		12/28/2015	315.56
								Account <b>4610.90 - Maint of Roads &amp; Bridges JULIE</b> Totals	Invoice Transactions 1	<u>\$315.56</u>
Account <b>4620.10 - Repair Parts - License Vehicles</b>										
1873 - GRAINGER	9905433190	CH Fund - truck parts	Paid by Check # 93411		12/14/2015	12/14/2015	12/14/2015		12/15/2015	282.16
1873 - GRAINGER	9905433182	CH Fund - truck parts	Paid by Check # 93411		12/14/2015	12/14/2015	12/14/2015		12/15/2015	197.92
1878 - HEAVY EQUIPMENT SERVICES, INC.	C99284	CH Fund - truck parts & labor	Paid by Check # 93412		12/14/2015	12/14/2015	12/14/2015		12/15/2015	7,525.85
4842 - INTERSTATE BATTERIES OF ROCKFORD	400436782	CH Fund - truck battery	Paid by Check # 93414		12/14/2015	12/14/2015	12/14/2015		12/15/2015	52.95
4842 - INTERSTATE BATTERIES OF ROCKFORD	500511571	CH Fund - truck battery	Paid by Check # 93414		12/14/2015	12/14/2015	12/14/2015		12/15/2015	147.95
4842 - INTERSTATE BATTERIES OF ROCKFORD	100245906	CH Fund - credit - battery	Paid by Check # 93414		12/14/2015	12/14/2015	12/14/2015		12/15/2015	(15.00)
4842 - INTERSTATE BATTERIES OF ROCKFORD	100246390	CH Fund - battery	Paid by Check # 93414		12/14/2015	12/14/2015	12/14/2015		12/15/2015	100.95
4842 - INTERSTATE BATTERIES OF ROCKFORD	50011802	CH Fund - batteries	Paid by Check # 93414		12/14/2015	12/14/2015	12/14/2015		12/15/2015	413.90
4842 - INTERSTATE BATTERIES OF ROCKFORD	300362408	CH Fund - battery	Paid by Check # 93414		12/14/2015	12/14/2015	12/14/2015		12/15/2015	69.95
4188 - LAKESIDE INTERNATIONAL, LLC	7069500P	CH Fund - truck parts	Paid by Check # 93416		12/14/2015	12/14/2015	12/14/2015		12/15/2015	364.17
4188 - LAKESIDE INTERNATIONAL, LLC	7069570P	CH Fund - truck parts	Paid by Check # 93416		12/14/2015	12/14/2015	12/14/2015		12/15/2015	236.54
4188 - LAKESIDE INTERNATIONAL, LLC	7070405P	CH Fund - truck part	Paid by Check # 93416		12/14/2015	12/14/2015	12/14/2015		12/15/2015	44.58
4188 - LAKESIDE INTERNATIONAL, LLC	7070720P	CH Fund - truck parts	Paid by Check # 93416		12/14/2015	12/14/2015	12/14/2015		12/15/2015	1,475.90



# Accounts Payable by G/L Distribution Report

G/L Date Range 12/08/15 - 01/11/16

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund <b>200 - County Highway</b>										
Department <b>17 - Highway</b>										
Account <b>4620.10 - Repair Parts - License Vehicles</b>										
4188 - LAKESIDE INTERNATIONAL, LLC	7070798P	CH Fund - truck parts	Paid by Check # 93416		12/14/2015	12/14/2015	12/14/2015		12/15/2015	460.72
4188 - LAKESIDE INTERNATIONAL, LLC	7070798PX1	CH Fund - truck parts	Paid by Check # 93416		12/14/2015	12/14/2015	12/14/2015		12/15/2015	406.90
1463 - NAPA AUTO PARTS	464-737789	CH Fund - truck part	Paid by Check # 93419		12/14/2015	12/14/2015	12/14/2015		12/15/2015	13.60
1463 - NAPA AUTO PARTS	464-737896	CH Fund - truck parts	Paid by Check # 93419		12/14/2015	12/14/2015	12/14/2015		12/15/2015	50.34
1463 - NAPA AUTO PARTS	464-738176	CH Fund - truck parts	Paid by Check # 93419		12/14/2015	12/14/2015	12/14/2015		12/15/2015	124.31
1463 - NAPA AUTO PARTS	464-738192	CH Fund - credit - truck parts	Paid by Check # 93419		12/14/2015	12/14/2015	12/14/2015		12/15/2015	(119.68)
1463 - NAPA AUTO PARTS	464-739194	CH fund - truck part	Paid by Check # 93419		12/14/2015	12/14/2015	12/14/2015		12/15/2015	8.76
1463 - NAPA AUTO PARTS	464-739448	CH Fund - truck part	Paid by Check # 93419		12/14/2015	12/14/2015	12/14/2015		12/15/2015	9.92
1463 - NAPA AUTO PARTS	464-739614	CH Fund - truck parts	Paid by Check # 93419		12/14/2015	12/14/2015	12/14/2015		12/15/2015	41.18
1463 - NAPA AUTO PARTS	464-739979	CH Fund - truck parts	Paid by Check # 93419		12/14/2015	12/14/2015	12/14/2015		12/15/2015	72.94
1463 - NAPA AUTO PARTS	464-740247	CH Fund - truck parts	Paid by Check # 93419		12/14/2015	12/14/2015	12/14/2015		12/15/2015	106.28
1676 - TERMINAL SUPPLY CO	69343.00	CH Fund - truck parts	Paid by Check # 93428		12/14/2015	12/14/2015	12/14/2015		12/15/2015	187.84
2027 - TRANSAM TRUCK & TRAILER PARTS, INC.	734459	CH Fund - truck parts	Paid by Check # 93430		12/14/2015	12/14/2015	12/14/2015		12/15/2015	73.40
1373 - CLASS C SOLUTIONS GROUP	8048284001	CH Fund - truck parts	Paid by Check # 93446		12/23/2015	12/24/2015	12/24/2015		12/28/2015	152.13
2050 - LAWSON PRODUCTS, INC.	9303756702	CH Fund - truck parts	Paid by Check # 93452		12/23/2015	12/24/2015	12/24/2015		12/28/2015	438.83
4881 - INTERSTATE POWERSYSTEMS, INC.	1233115	CH Fund - batteries	Paid by Check # 93510		01/05/2016	01/06/2016	01/06/2016		01/07/2016	475.83
Account <b>4620.10 - Repair Parts - License Vehicles</b> Totals								Invoice Transactions	29	\$13,401.12
Account <b>4620.20 - Repair Parts - Heavy Equipment</b>										
2251 - GOODYEAR COMMERCIAL TIRE	146-1076357	CH Fund - truck tires	Paid by Check # 93410		12/14/2015	12/14/2015	12/14/2015		12/15/2015	2,259.16
1869 - WEST SIDE TRACTOR SALES	R62914	CH Fund - heavy equipment parts	Paid by Check # 93432		12/14/2015	12/14/2015	12/14/2015		12/15/2015	213.20
2049 - IDEAL METAL FAB., INC.	042277	CH Fund - repairs - angle iron	Paid by Check # 93509		01/05/2016	01/06/2016	01/06/2016		01/07/2016	15.20
Account <b>4620.20 - Repair Parts - Heavy Equipment</b> Totals								Invoice Transactions	3	\$2,487.56



# Accounts Payable by G/L Distribution Report

G/L Date Range 12/08/15 - 01/11/16

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
Fund <b>200 - County Highway</b>											
Department <b>17 - Highway</b>											
Account <b>4620.40 - Repair Parts - Radio Repairs</b>											
1206 - DIXON OTTAWA COMMUNICATIONS	237027	CH Fund - antenna part	Paid by Check # 93507		01/05/2016	01/06/2016	01/06/2016		01/07/2016	3.70	
									Account <b>4620.40 - Repair Parts - Radio Repairs</b> Totals	Invoice Transactions 1	<u>3.70</u>
Account <b>4620.50 - Repair Parts - Snow Plows &amp; Cinder Spreaders</b>											
1100 - BONNELL INDUSTRIES INC.	0165998-IN	CH Fund - spinner parts	Paid by Check # 93444		12/23/2015	12/24/2015	12/24/2015		12/28/2015	211.00	
1100 - BONNELL INDUSTRIES INC.	0165842-IN	CH Fund - spreader parts	Paid by Check # 93444		12/23/2015	12/24/2015	12/24/2015		12/28/2015	626.07	
1100 - BONNELL INDUSTRIES INC.	0166015-IN	CH Fund - auger parts	Paid by Check # 93444		12/23/2015	12/24/2015	12/24/2015		12/28/2015	253.84	
									Account <b>4620.50 - Repair Parts - Snow Plows &amp; Cinder Spreaders</b> Totals	Invoice Transactions 3	<u>\$1,090.91</u>
Account <b>4620.99 - Repair Parts - Other Repair Parts</b>											
2073 - R. J. BOWERS DISTRIBUTORS, INC.	0284592	CH Fund - pressure washer parts & supplies	Paid by Check # 93423		12/14/2015	12/14/2015	12/14/2015		12/15/2015	586.60	
2073 - R. J. BOWERS DISTRIBUTORS, INC.	0284949	CH Fund - pressure washer parts	Paid by Check # 93514		01/05/2016	01/06/2016	01/06/2016		01/07/2016	140.72	
									Account <b>4620.99 - Repair Parts - Other Repair Parts</b> Totals	Invoice Transactions 2	<u>\$727.32</u>
Account <b>4630.20 - De-Icing Material - Chloride</b>											
1963 - SICALCO, LTD.	64622	CH Fund - calcium chloride	Paid by Check # 93427		12/14/2015	12/14/2015	12/14/2015		12/15/2015	1,296.00	
1963 - SICALCO, LTD.	64648	CH Fund - calcium chloride	Paid by Check # 93464		12/23/2015	12/24/2015	12/24/2015		12/28/2015	3,373.92	
									Account <b>4630.20 - De-Icing Material - Chloride</b> Totals	Invoice Transactions 2	<u>\$4,669.92</u>
Account <b>4630.30 - De-Icing Material - Abrasive Materials</b>											
1657 - STEVE BENESH & SONS QUARRIES	11438	CH Fund - ice abrasives	Paid by Check # 93465		12/23/2015	12/24/2015	12/24/2015		12/28/2015	5,317.17	
									Account <b>4630.30 - De-Icing Material - Abrasive Materials</b> Totals	Invoice Transactions 1	<u>\$5,317.17</u>
Account <b>4640.10 - Sign &amp; Striping Material - Street &amp; Traffic Lighting</b>											
1156 - COMED	COMHWY1512c	CH Fund - street & traffic lighting	Paid by Check # 93408		12/14/2015	12/14/2015	12/14/2015		12/15/2015	40.42	
1849 - ROCHELLE MUNICIPAL UTILITIES	ROCHWY1512b	CH Fund - street & traffic lighting	Paid by Check # 93425		12/14/2015	12/14/2015	12/14/2015		12/15/2015	7.65	
1849 - ROCHELLE MUNICIPAL UTILITIES	ROCHWY1512a	CH Fund - street & traffic lighting	Paid by Check # 93425		12/14/2015	12/14/2015	12/14/2015		12/15/2015	86.58	
1156 - COMED	COMHWY1512a	CH Fund - street & traffic lighting	Paid by Check # 93447		12/23/2015	12/24/2015	12/24/2015		12/28/2015	41.01	
1849 - ROCHELLE MUNICIPAL UTILITIES	ROCHWY1601a	CH Fund - street & traffic lighting	Paid by Check # 93516		01/05/2016	01/06/2016	01/06/2016		01/07/2016	96.48	



# Accounts Payable by G/L Distribution Report

G/L Date Range 12/08/15 - 01/11/16

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund <b>200 - County Highway</b>										
Department <b>17 - Highway</b>										
Account <b>4640.10 - Sign &amp; Striping Material - Street &amp; Traffic Lighting</b>										
1849 - ROCHELLE MUNICIPAL UTILITIES	ROCHWY1601b	CH Fund - street & traffic lighting	Paid by Check # 93516		01/05/2016	01/06/2016	01/06/2016		01/07/2016	7.65
							Account <b>4640.10 - Sign &amp; Striping Material - Street &amp; Traffic Lighting</b> Totals		Invoice Transactions 6	<u>\$279.79</u>
Account <b>4650.20 - Hardware &amp; Shop Supplies Shop Supplies</b>										
1047 - ACE HARDWARE AND OUTDOOR CTR	400063	CH Fund - shop supplies	Paid by Check # 93403		12/14/2015	12/14/2015	12/14/2015		12/15/2015	56.97
1047 - ACE HARDWARE AND OUTDOOR CTR	401082	CH Fund - shop supplies	Paid by Check # 93403		12/14/2015	12/14/2015	12/14/2015		12/15/2015	9.00
1047 - ACE HARDWARE AND OUTDOOR CTR	401390	CH Fund - shop supplies	Paid by Check # 93403		12/14/2015	12/14/2015	12/14/2015		12/15/2015	43.11
1047 - ACE HARDWARE AND OUTDOOR CTR	402137	CH Fund - shop supplies	Paid by Check # 93403		12/14/2015	12/14/2015	12/14/2015		12/15/2015	18.47
1047 - ACE HARDWARE AND OUTDOOR CTR	403660	CH Fund - shop supplies	Paid by Check # 93403		12/14/2015	12/14/2015	12/14/2015		12/15/2015	142.52
4667 - AIRGAS USA, LLC	9932122112	CH Fund - shop supplies	Paid by Check # 93404		12/14/2015	12/14/2015	12/14/2015		12/15/2015	67.10
4445 - BIG R	6187	CH Fund - shop supplies	Paid by Check # 93405		12/14/2015	12/14/2015	12/14/2015		12/15/2015	19.96
2176 - CCP INDUSTRIES, INC.	IN01595721	CH Fund - shop supplies	Paid by Check # 93406		12/14/2015	12/14/2015	12/14/2015		12/15/2015	340.00
1373 - CLASS C SOLUTIONS GROUP	8017562001	CH Fund - shop supplies	Paid by Check # 93407		12/14/2015	12/14/2015	12/14/2015		12/15/2015	149.10
1434 - MENARDS	13882	CH Fund - shop supplies	Paid by Check # 93418		12/14/2015	12/14/2015	12/14/2015		12/15/2015	92.91
1434 - MENARDS	16013	CH Fund - shop supplies	Paid by Check # 93417		12/14/2015	12/14/2015	12/14/2015		12/15/2015	74.35
3932 - TRACTOR SUPPLY CO.	200200982	CH Fund - shop supplies	Paid by Check # 93429		12/14/2015	12/14/2015	12/14/2015		12/15/2015	102.94
1873 - GRAINGER	991358392	CH Fund - shop supplies	Paid by Check # 93450		12/23/2015	12/24/2015	12/24/2015		12/28/2015	58.46
1434 - MENARDS	14628	CH Fund - shop supplies	Paid by Check # 93456		12/23/2015	12/24/2015	12/24/2015		12/28/2015	3.78
1434 - MENARDS	17284	CH Fund - shop supplies	Paid by Check # 93455		12/23/2015	12/24/2015	12/24/2015		12/28/2015	12.14
1683 - R & D DO-IT-BEST	A459354	CH Fund - shop supplies	Paid by Check # 93513		01/05/2016	01/06/2016	01/06/2016		01/07/2016	2.49
1683 - R & D DO-IT-BEST	A460074	CH Fund - shop supplies	Paid by Check # 93513		01/05/2016	01/06/2016	01/06/2016		01/07/2016	39.92
3309 - R.P. LUMBER CO., INC.	1512-204399	CH Fund - shop supplies	Paid by Check # 93515		01/05/2016	01/06/2016	01/06/2016		01/07/2016	11.97
							Account <b>4650.20 - Hardware &amp; Shop Supplies Shop Supplies</b> Totals		Invoice Transactions 18	<u>\$1,245.19</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 12/08/15 - 01/11/16

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
Fund <b>200 - County Highway</b>											
Department <b>17 - Highway</b>											
Account <b>4650.30 - Hardware &amp; Shop Supplies Truck Tests</b>											
4550 - PREVENTATIVE MAINTENANCE SYSTEMS, INC.	4827	CH Fund - truck test	Paid by Check # 93460		12/23/2015	12/24/2015	12/24/2015		12/28/2015	78.00	
4550 - PREVENTATIVE MAINTENANCE SYSTEMS, INC.	4851	CH Fund - truck test	Paid by Check # 93460		12/23/2015	12/24/2015	12/24/2015		12/28/2015	30.50	
4550 - PREVENTATIVE MAINTENANCE SYSTEMS, INC.	4909	CH Fund - truck test	Paid by Check # 93460		12/23/2015	12/24/2015	12/24/2015		12/28/2015	52.00	
4550 - PREVENTATIVE MAINTENANCE SYSTEMS, INC.	4962	CH Fund - truck test	Paid by Check # 93460		12/23/2015	12/24/2015	12/24/2015		12/28/2015	30.50	
4550 - PREVENTATIVE MAINTENANCE SYSTEMS, INC.	4999	CH Fund - truck test	Paid by Check # 93460		12/23/2015	12/24/2015	12/24/2015		12/28/2015	46.00	
4550 - PREVENTATIVE MAINTENANCE SYSTEMS, INC.	5019	CH Fund - truck test	Paid by Check # 93460		12/23/2015	12/24/2015	12/24/2015		12/28/2015	46.00	
									Account <b>4650.30 - Hardware &amp; Shop Supplies Truck Tests</b> Totals	Invoice Transactions 6	<u>\$283.00</u>
Account <b>4660.20 - Tires &amp; Tubes - Trucks</b>											
1865 - POMP'S TIRE SERVICE, INC.	260033723	CH Fund - service call /repair tire	Paid by Check # 93422		12/14/2015	12/14/2015	12/14/2015		12/15/2015	360.00	
1865 - POMP'S TIRE SERVICE, INC.	0260027311	CH fund - credit - tires	Paid by Check # 93422		12/14/2015	12/14/2015	12/14/2015		12/15/2015	(235.00)	
1865 - POMP'S TIRE SERVICE, INC.	0260033437	CH Fund - tires	Paid by Check # 93422		12/14/2015	12/14/2015	12/14/2015		12/15/2015	2,457.50	
1865 - POMP'S TIRE SERVICE, INC.	260034138	CH Fund - tire repair	Paid by Check # 93511		01/05/2016	01/06/2016	01/06/2016		01/07/2016	173.00	
									Account <b>4660.20 - Tires &amp; Tubes - Trucks</b> Totals	Invoice Transactions 4	<u>\$2,755.50</u>
Account <b>4745 - Survey Equipment &amp; Supplies</b>											
3387 - TROXLER ELECTRONIC LABORATORIES, INC.	INV47232	CH Fund - nuke gauge supplies	Paid by Check # 93431		12/14/2015	12/14/2015	12/14/2015		12/15/2015	122.38	
3409 - DUANE A. HEVLY	16001	CH Fund - monitor dosimetry badges	Paid by Check # 93508		01/05/2016	01/06/2016	01/06/2016		01/07/2016	45.00	
									Account <b>4745 - Survey Equipment &amp; Supplies</b> Totals	Invoice Transactions 2	<u>\$167.38</u>
									Department <b>17 - Highway</b> Totals	Invoice Transactions 109	<u>\$58,225.25</u>
									Fund <b>200 - County Highway</b> Totals	Invoice Transactions 109	<u>\$58,225.25</u>
									Grand Totals	Invoice Transactions 109	<u>\$58,225.25</u>



## Ogle County Highway Department Road & Bridge / GIS Committee Meeting Minutes

January 12, 2016

- I. Meeting called to order at 7:30 AM by Chairman Janes at the Ogle County Courthouse, Room 100.  
Members present: Dan Janes, Pat Saunders, Dorothy Bowers, John O'Brien, Marty Typer, Ashley Simms, and Rick Fritz.
- II. Approval of Minutes
  - A. Reviewed December 8, 2015 Road & Bridge/GIS Committee Minutes.
    1. Motion to approve minutes by – Marty Typer
    2. Motion seconded by – Pat Saunders
    3. Vote - All in Favor
- III. Reviewed Bills and Payroll
  - A. Motion to approve Highway Dept bills and payrolls by – Dorothy Bowers
  - B. Motion seconded by – Rick Fritz
  - C. Vote - All in Favor
  - D. Motion to approve GIS Dept bills and payrolls by – Dorothy Bowers
  - E. Motion seconded by – Rick Fritz
  - F. Vote - All in Favor

It is noted by John O'Brien that the credit card bills for GIS and the Highway Department were reviewed, documentation was included, and they were found to be in good order
- IV. Bid Awards, Petitions and Resolutions
  - A. Purchase of two mowing tractors
    1. Motion to award low bid meeting the specifications by – Rick Fritz
    2. Motion seconded by – Dorothy Bowers
    3. Vote – 6-0 in Favor, Saunders abstains
  - B. Purchase of full sized pickup truck w/ trade in
    1. Motion to award low bid meeting the specifications by – Marty Typer
    2. Motion seconded by – Dorothy Bowers
    3. Vote - All in Favor

- C. Accept all bids for 2016 County Aggregate
  - 1. Motion to accept all bids by – Marty Typer
  - 2. Motion seconded by – Rick Fritz
  - 3. Vote – All in favor

VI. Business & Communications

A. Unfinished Business

- 1. The States Attorney and County Engineer have another status call on the Preferred Construction suit this week.
- 2. The Committee and County Engineer discussed the impending improvements on Montague Road, from Rock City Road to Spielman Road.
- 3. The Committee and County Engineer discussed the upcoming bridge replacement on Macklin Road.
- 4. The County Engineer notified the Committee that IDOT is not planning on replacing box culverts under IL 2 this year as was contemplated earlier. The culverts will be replaced with the upcoming IL 2 reconstruction project, Byron to Rockford.

B. New Business

- 1. I.A.C.E. Legislative Committee – Nothing to report.
- 2. I.A.C.E. Revenue Fact Finding Committee – The County received all due Motor Fuel tax last month. The delinquent Township MFT payments amounted to \$527,728 and the delinquent County MFT payments were \$374,187.

- 3. Next Meeting – **Tuesday, February 9, 2016, @ 7:30 AM,**  
Ogle County Courthouse, Room 100

Lettings: Township MFT Aggregate  
Township Calcium Chloride  
Township Pipe Culverts  
2016 County Pipe Culverts  
2016 Crackfilling

4. **2016 Project Status Report:**

Macklin Rd bridge	-ready for bid advertisement
Various culvert projects	- under final design and ROW acquisition
Montague Road	- April 2016 letting

- 5. The County Engineer discussed the status of the annual road salt contract with the committee.

6. As a long range planning exercise, the County Engineer reviewed a “typical” budget with the Committee. The typical budget reveals the need for a statewide capital program to maintain the same level of service for the County Highway System.
7. The metal roof, on the office portion of the highway department building, has developed a leak and a warranty repair claim is being processed.
8. The Committee asked the County Engineer to contact Sheriff VanVickle to discuss remedies to roadway slope erosion at the Weld Park entrance road.
9. The County Engineer notified the Committee the Department is submitting a grant application for the funding of two programmable message boards and a grapple bucket for one of the end loaders.

VII. Public Comment

There was no public comment.

- VIII. Meeting adjourned at 8:26 A.M. by Chairman Janes.  
Minutes submitted by Curtis D. Cook, PE

**STATE'S ATTORNEY AND JUVENILE & PROBATION COMMITTEE MEETING**

**Tentative Minutes**

**January 12, 2016**

1. Call to order: Chairman Finfrock calls the meeting to order at 11:02 a.m. Committee Members Present: Brooks, Colbert, Oltmanns, Nordman, Gouker and Welty (enters at 11:06 a.m.). Others: Typer, Gronewold, Focus House Director Matt Mekeel, State's Attorney Eric Morrow and Director of Court Services Ken Burn.
2. Approval of Minutes: Motion by Brooks to approve December 8, 2015 minutes, 2<sup>nd</sup> by Colbert. Motion carries.
3. Public Comment: none
4. Bills for Approval:
  - State's Attorney – monthly bills total \$20,783.70. Motion to approve bills by Oltmanns, 2<sup>nd</sup> by Nordman. Motion carries.
  - Probation – no bills
  - Focus House – no credit card bills, monthly bills total \$15,396.00. Motion to approve bills by Colbert, 2<sup>nd</sup> by Nordman. Motion carries.
5. Department Reports:
  - State's Attorney:
    - Budget Update: none
    - Pending Litigation: none
    - Collection of unpaid fees and/or fines update: State's Attorney Eric Morrow states he will have more to report next month.
    - Due Diligence on Automation Systems: Morrow states they are moving forward. He is still working with the Circuit Clerk.
    - Personnel update – Receptionist: Morrow reports there is an entry level position open but he has not taken any action for hire yet.
  - Probation:
    - Budget Update: none
    - Models for Change update: Director of Court Services Ken Burn reports they did not meet last month but they are still working and prioritizing.
    - Burn reports he will be talking to Finance tonight about 2 new vehicles.
  - Focus House:
    - Budget Update: none
    - Personnel Update: none
    - Department of Juvenile Justice Contract: Focus House Director Matt Mekeel reports one youth has been discharged successfully and one new youth will be coming this Friday.
6. New Business: none
7. Old Business: none
8. Closed Session: none
9. Adjournment: With no further business, Chairman Finfrock adjourns the meeting at 11:22 a.m.



SUPERVISOR OF ASSESSMENTS AND  
PLANNING & ZONING COMMITTEE  
of the  
OGLE COUNTY BOARD

**SUPERVISOR OF ASSESSMENTS AND  
PLANNING & ZONING COMMITTEE REPORT  
JANUARY 12, 2016**

The regular monthly meeting of the Supervisor of Assessments and Planning & Zoning Committee of the Ogle County Board was held on Tuesday, January 12, 2016 at 10:00 A.M. in the Old Ogle County Courthouse, Third Floor County Board Room #317, 105 S. Fifth St., Oregon, IL.

The Order of Business is as follows:

1. ROLL CALL AND DECLARATION OF A QUORUM

Chairman Bill Welty called the meeting to order at 10:00 A.M. Roll call indicated nine members of the Committee were present: Dan Janes, Bruce McKinney, Lee Meyers, Rick Fritz, John O'Brien, Bill Welty, Ron Colson, Lyle Hopkins, and Ashley Simms.

2. READING AND APPROVAL OF REPORT OF DECEMBER 8, 2015 MEETING AS MINUTES

Mr. Welty asked for a motion regarding the report of the December 8, 2015 regular meeting. Mr. Janes made a motion to approve the report of December 8, 2015 minutes; seconded by Mr. Fritz. The motion carried by a voice vote.

3. REVIEW AND APPROVAL OF CLOSED MINUTES PER 5 ILCS 120/2 © (21) (IF NEEDED)

- Approval of Closed Minutes (if needed)

Mr. Welty stated there are no closed minutes for review.

SUPERVISOR OF ASSESSMENTS PORTION OF MEETING:

4. CONSIDERATION OF MONTHLY BILLS OF SUPERVISOR OF ASSESSMENTS, AND ACTION

Monthly bills of the Supervisor of Assessments were presented to the committee for consideration. The bills totaled \$3,308.79. Mr. McKinney made a motion to approve the payment of the bills in the amount of \$3,308.79; seconded by Ms. Simms. The motion carried by a voice vote.

5. OLD BUSINESS

Mr. Harrison stated the Board of Review has 48 assessment appeal hearing scheduled the last two weeks in January. The Exelon review is scheduled for 1/28 at 10:00 in the County Board room.

Mr. Harrison stated the annual township assessors meeting was held 1/7, attended by about half of the township assessors.

6. NEW BUSINESS

No new business for discussion.

PLANNING & ZONING PORTION OF MEETING:

7. UNFINISHED BUSINESS (CONSIDERATION AND POSSIBLE ACTION)

There was no unfinished business for consideration.

8. NEW BUSINESS

A. DECISIONS (CONSIDERATION AND POSSIBLE ACTION)

**#2-15 SPECIAL USE - Byron-Oregon Sportsman & Conservation Club, Inc. % Oscar K. Welty III, President, 1509 E. Town Line Rd.- PO Box 742, Byron, IL** for a Special Use Permit to allow a shooting range in AG-1 Agricultural District on property described as follows and owned by the petitioner:

Part of the W1/2 of the NE1/4 and part of the E1/2 of NW1/4 of Section 2 Rockvale Township 24N, R10E of the 4<sup>th</sup> P.M., Ogle County, IL, 19.93 acres, more or less  
Property Identification Number: 09-02-126-002  
Common Location: 1509 E. Town Line Rd.

Mr. Welty stated I will abstain from voting on this request but will continue to chair the discussion. Mr. Meyers stated the Vice Chairman should be heading the meeting so there is no conflict and made a motion for Vice Chairman Janes to handle discussion of #2-15SU; seconded by Mr. Hopkins. Mr. Meyers asked for a roll call vote: Simms - yes; Fritz - yes; Hopkins - yes; Janes - no; McKinney - yes; O'Brien - no; Colson - yes; Meyers - yes; Welty - abstained; motion approved 6 yes, 2 no, 1 abstain (Welty).

Vice Chairman Janes asked for a motion regarding Petition #2-15SU. Mr. Colson stated that, as we were deadlocked at the last meeting, it is imperative that this Committee make a recommendation so this petition can be sent to the County Board for a final decision. Mr. Reibel has worked diligently for both sides of this petition and has revised the original 14 conditions and added 7 more for a total of 21 recommended conditions. However, the County Board is not bound by these recommendations. Mr. Reibel asked if everyone has received a copy of the 21 recommended conditions; all members answered yes, and Mr. Colson stated that he distributed the 21 recommended conditions during the meeting. Mr. Colson stated as we need to have a starting point, I move to attach the most recent set of 21 conditions to #2-15SU and then allow for discussion of each. The motion was seconded by Mr. O'Brien. Mr. Meyers requested a roll call vote. Mr. Reibel read the roll, the vote being as follows: Fritz - yes; Hopkins - yes; - Janes - yes; McKinney - yes; O'Brien - yes; Simms - yes; Janes - yes; Colson - yes; Welty - abstain; Motion carried 8 yes; 0 no; 1 abstain.

Mr. Janes asked for a motion regarding #2-15SU. Mr. Colson moved to approve Petition #2-15SU with the 21 conditions as presented; seconded by Mr. O'Brien.

Mr. Janes asked for discussion. Mr. Meyers stated on condition #3, I would ask that the engineering for the building be done before the special use is approved or denied by the County Board to ensure that the range has been designed by a licensed range designer. Mr. Janes stated that would be during the construction phase and you can't ask the petitioner to spend money before the request has been approved. Mr. Hopkins agreed. Mr. Meyers stated the petitioner has stated they can't afford to construct a fully contained range. Discussion ensued regarding the proposed range and the clarification of the change.

Mr. Meyers referenced Condition #14, and asked who will make sure that the "range safety manager" is present. Mr. Reibel answered it would be the responsibility of my department to enforce the approved conditions.

Mr. Meyers stated on condition #15, I would like it to read "fully enclosed". Mr. Colson stated that could add a million dollars to this project. This issue will be handled by the engineer and the architect. Mr. Hopkins stated this condition is regarding electronic access to the building. Mr. Myers asked if the video cameras will be pointed at the shooting range or the neighbors, and discussion of the Committee indicated that the condition reads that the surveillance cameras are to be monitoring the shooting range and not the neighboring properties.

Mr. Meyers stated on condition #20, I would like to add the word "random" prior to the word "inspections". Mr. Janes stated it is up to Mr. Reibel's office when they wish to do inspections and they can do them

anytime they want. As far as inspections to the building and range safety, that would be done through an engineer and would need to be scheduled. Discussion ensued.

Mr. Meyers read a prepared statement in which he requested a roll call vote on this matter. He also discussed the petitioner's involvement in this matter, the fact that no engineering design work has been completed on the proposed shooting range, the number of surrounding residents opposed to the Special Use Permit, the Byron-Oregon Sportsman & Conservation Club not abiding by deed restrictions, decline in surrounding property values, and safety.

Mr. Janes asked for further discussion. Mr. Hopkins called for the question.

Mr. Janes asked Mr. Reibel to read the roll. Mr. Reibel re-stated the motion as made by Mr. Colson and seconded by Mr. O'Brien, and read the roll. The roll call vote was as follows: Hopkins - no; Simms - yes; Fritz - yes; McKinney - no; Colson - yes; Janes - yes; O'Brien - yes; Meyers - no; Welty - abstain; motion carried 5 yes; 3 no; 1 abstain.

B. MOBILE HOME APPLICATIONS (CONSIDERATION AND POSSIBLE ACTION)

There were no mobile home applications for consideration.

9. SUBDIVISION PLATS (CONSIDERATION AND POSSIBLE ACTION)

There were no subdivision plats for consideration.

10. CONSIDERATION OF MONTHLY BILLS OF PLANNING & ZONING DEPARTMENT, AND ACTION

Monthly bills of the Planning & Zoning Department were presented to the Committee for consideration. The bills total \$283.64. Mr. Hopkins the motion to approve the payment of the bills in the amount of \$283.64; seconded by Mr. McKinney. The motion carried by a voice vote.

11. REFERRAL OF NEW PETITIONS TO THE ZONING BOARD OF APPEALS FOR PUBLIC HEARING

**#13-15 VARIATION – Eileen L. Moore, 987 W. IL Rte. 64, Oregon, IL** for a Variation to allow an accessory building to be constructed 20' from a front property line in lieu of 80' as required pursuant to the *Ogle County Amendatory Zoning Ordinance* on property described as follows and owned by the petitioner:

Part of Lot 2 Oak Knolls Subdivision located in part of G.L. 4 & 5 in fractional Section 4 Oregon-Nashua Township 23N, R10E of the 4<sup>th</sup> P.M., Ogle County, IL, 1.0 acre, more or less  
Property Identification Number: 16-04-103-009  
Common Location: 987 W. IL Rte. 64

Mr. McKinney made a motion to refer the petitions to the ZBA for public hearing; seconded by Mr. Hopkins. The motion carried via voice vote.

12. OTHER BUSINESS (CONSIDERATION AND POSSIBLE ACTION)

Mr. Reibel handed out the "Calendar Year 2015 Statistics" that are compile annually for the Committee to review.

13. PUBLIC COMMENT

Mr. Dave Eder read a statement regarding #2-15SU and asked for the County Board to deny the request.

Mr. Jon Mickle addressed the Committee regarding Petition #2-15SU and asked for the County Board to deny #2-15SU.

Mr. O.K. Welty II thanked the Committee and Mr. Reibel for their time and effort regarding #2-15SU.

14. ADJOURN

Mr. Welty declared the meeting adjourned at 10:59 A.M. The next regular meeting of the Supervisor of Assessments and Planning & Zoning Committee will be Tuesday, February 18, 2016 at 10:00 A.M.

Respectfully submitted,



Michael Reibel  
Planning & Zoning Administrator



SECTION TWO: Based on the findings of fact set forth above, the petition of Byron-Oregon Sportsman & Conservation Club, Inc. for a Special Use Permit in the AG-1 Agricultural District (Petition No. 2-15SU) to allow a shooting range on property located at 1509 E. Townline Road in Rockvale Township and legally described as shown in Exhibit "A" attached hereto, is hereby approved subject to the following conditions:

1. All proposals and representations made by the applicant and/or their representative shall be conditions of the Special Use Permit.
2. As contained herein, the following words and terms shall have the respective meanings ascribed to them:

**Bullet:** A single projectile fired from a firearm.

**Firearm(s):** A term used to describe any gun, usually small, from which a bullet is propelled by means of hot gasses generated by burning powder (usually smokeless or black powder).

**Firing line:** A line parallel to the targets from where firearms are discharged.

**Firing position (point):** An area directly behind the firing line having a specified width and depth that is occupied by a shooter, his or her equipment and, if appropriate, an instructor or coach.

**Pistol:** A firearm capable of being held, aimed and fired with one hand. Also known as a handgun.

**Rifle:** A modern firearm designed to be fired from the shoulder. Its main characteristic is a rifled (grooved) barrel that imparts a spin to a single projectile as it travels through the bore. Some rifles designed for military or law enforcement use may have a pistol grip stock instead of a shoulder stock. For purposes herein, "rifles" shall also include black powder and other muzzle loading firearms, some of which may have rifled barrels.

**Safety fan:** The safety fan of a shooting range consists of three parts: the direct fire zone, the safety zone, and the ricochet zone. The direct fire zone is that area into which all shots are fired during the normal course of shooting. This zone includes all directions and angles of fire used on a shooting range while shooting at a specific target, either stationary or moving, from a specific firing point. The length of the direct fire zone extends to the maximum range of the ammunition and firearm used on the firing range, but can be shortened by physical barriers or other devices which reduce the maximum distance of a bullet's trajectory. The safety zone extends 10 degrees to the left and right of the direct fire zone and protects against errant bullets caused by cross fire or accidental discharge of a firearm. The ricochet zone is that area 45 degrees to the left and right of the firing line, and extended a certain distance dependent on the type of firearm and ammunition allowed on the range (i.e., 85 yards for air guns, and up to 1,200 yards for high-powered rifles). The line is then extended parallel to each side of the safety zone downrange to the intersection of a line extended from the terminus of the direct fire zone through the outer corner of the safety zone.

**Shooting Range(s):** An area designed and improved to encompass shooting stations or firing lines, target areas, berms and baffles, and other related components.

**Shooting Range Facility:** A facility including individual Shooting Ranges, safety fans, Structures, parking area(s), and other associated improvements, designed for the purpose of providing a place for the discharge of various types of Firearms.

**Shotgun:** A firearm designed to be fired from the shoulder with a smoothbore barrel that fires shot shells possessing a varying number of round pellets. Some barrels are designed

to be used with rifled slugs, most generally having smoothbores, but in some cases may be rifled. Law enforcement and military shotguns may have a pistol grip stock instead of a shoulder stock.

**Structure(s):** A walled and roofed building that is principally above ground or any other permanent, manmade facilities.

**Surface Danger Zone:** Any area that may reasonably expect projectile impact resulting from direct fire, including misdirected and accidental discharges, and ricochets from any Firearm, which takes into consideration all mitigation efforts as submitted by the applicant and determined by a qualified licensed design professional with experience in outdoor shooting range planning and design.

3. The shooting range facility shall be designed by a qualified licensed design professional (**engineer, architect, etc.**) with experience in outdoor shooting range planning and design. The shooting range shall be designed in accordance with the most current edition of the Range Source Book (published by the National Rifle Association) or other industry-accepted shooting range design criteria as deemed acceptable by the Ogle County Planning & Zoning Administrator, provided alternative design criteria are at least as or more restrictive than the Range Source Book. The shooting range facility shall be designed to ensure that all projectiles are contained within the vertical projection of the ~~property lines~~ **shooting range (range containment structure and shooting range building)**.
4. All applicable local, state and/or federal laws, ordinance and requirements shall be met in the design, construction and operation of the shooting range facility, including but not limited to the following: Ogle County, IL Comprehensive Stormwater Management Ordinance, the Ogle County Health Code, the Illinois Accessibility Code, and *20 ILCS 3105-10.09-1 (Adoption of building code; enforcement)*.
5. The design and operation of the shooting range facility shall incorporate best management practices for managing lead from fired rounds that meet or exceed the recommendations and/or standards set forth in Best Management Practices for Lead at Outdoor Shooting Ranges (U.S. Environmental Protection Agency).
6. The design and operation of the shooting range facility shall incorporate best management practices for managing and controlling erosion and sedimentation on the site.
7. The shooting range facility shall provide a minimum of one (1) parking space for each shooting position, plus two (2) additional parking spaces.
8. No construction activity shall commence until a Zoning Certificate is issued by the Planning & Zoning Administrator, and the shooting range shall not commence operation until an Occupancy Certificate has been issued by the Planning & Zoning Administrator. The Planning & Zoning Administrator shall not issue an Occupancy Certificate until the following has been submitted: A) Certificate of Inspection for all buildings/structures pursuant to *20 ILCS 3105-10.09-1 (Adoption of building code; enforcement)*; B) Letter of compliance from the County Engineer that the site is in compliance with the Ogle County, IL Comprehensive Stormwater Management Ordinance; C) Certification from the shooting range design professional of record that the shooting range has been constructed substantially in conformance with the design plans.

9. The entire perimeter of the outdoor shooting range safety fan(s) shall be fenced and signed to reduce the potential for trespass into the safety fan(s). Warning signs identifying the range shall be posted around the perimeter of the parcel or parcels on which the shooting range is located such that each sign is visible and legible from the next. The same signs shall be posted similarly on the security fencing surrounding the safety fan(s).
10. Only firearms chambered in handgun calibers (.45 caliber and smaller) shall be allowed to be utilized on the shooting range.
11. No exploding or explosive targets shall be utilized.
12. Hours of operation shall be limited to 9:00 A.M. to the earlier of one-half hour before sunset or 8:00 P.M. Monday through Saturday, and 11:00 A.M. to the earlier of one-half hour before sunset or 8:00 P.M. on Sunday. Sunset shall be as indicated in the Sunrise-Sunset Tables as published by the Illinois Department Natural Resources.
13. Pursuant to the recommendation of the Illinois Department of Natural Resources, no trees greater than three inches in diameter shall be removed or disturbed in the design, construction and operation of the shooting range facility between April 1 and October 1 in order to protect summer habitat for the endangered **Indiana Bat**, *Myotis sodalis*, and the threatened **Northern Long-Eared Bat**, *Myotis septentrionalis*.
14. ~~The shooting range shall be supervised at all times during operation by an NRA-certified Range Safety Officer.~~ A "range safety manager" shall be present inside the shooting range and supervising shooting activities at all times that the shooting range is in use. A "range safety manager" is a person 21 years of age or older that has been trained by a National Rifle Association (NRA) Certified Instructor or an NRA-certified Chief Range Safety Officer. Such training shall be similar to the training that an NRA Range Safety Officer would receive, and shall include range safety manager's roles and responsibilities, range standard operating procedures, range inspection and range rules, firearm stoppages and malfunctions, and emergency procedures.
15. The enclosed shooting facility building shall be provided with an electronic access control system so that access to said shooting range may be obtained only by authorized persons. In addition, the shooting range security enclosure and enclosed shooting facility shall be monitored by both internal (inside any building within said enclosure and within the range area) and external video surveillance cameras.
16. The shooting range shall comply with Illinois noise regulations pursuant to Title 35: Environmental Protection, Subtitle H: Noise, Chapter I: Pollution Control Board. This condition shall apply to the shooting range as authorized pursuant to Special Use No. 2-15SU, and shall not be applicable to the pre-existing operation of the trap shooting range located on the same real property.
17. There shall be no parking of vehicles within the right-of-way of Townline Road.

18. There shall be no intoxicating substances or intoxicated persons (persons under the influence of drugs and/or alcohol) within the shooting range or within adjacent parking areas.
19. Any and all persons utilizing the shooting range shall comply with all federal and state firearm/gun laws.
20. An inspection of the shooting range facility shall be conducted not less than annually by an Illinois-licensed engineer or architect to determine continued range compliance with the approved range design criteria. Said inspection shall be conducted within 30 days of the anniversary date of the issuance of the Occupancy Certificate for the shooting range facility, and a copy of said inspection report submitted to the Ogle County Planning & Zoning Department. If any corrective actions and/or repairs to the shooting range are noted in the aforementioned inspection report, said corrective actions and/or repairs shall be completed within sixty (60) days, and if any conditions exist that are deemed to be unsafe, the shooting range shall not be utilized until corrective actions and/or repairs are made and the inspecting engineer or architect has verified that said corrective actions and/or repairs have been satisfactorily made.
21. The owner and/or operator of the shooting range facility shall, at its expense, maintain a broad form comprehensive coverage policy of public liability insurance in an amount not less than one million U.S. dollars (\$1,000,000) of combined single limit liability coverage per occurrence, accident or incident, with a two million (U.S.) dollar (\$2,000,000) per aggregate.

**Calendar Year 2015 Statistics**  
**Compiled by the Ogle County Planning & Zoning Department**

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- TABLE: *2015 Township Dwelling Starts and Percent of Total - Unincorporated Ogle County*
- MAP: *Dwelling Starts In Calendar Year 2015, Ogle County, IL (Unincorporated)*
- TABLE: *Zoning Certificates Issued 1970-2015 - Unincorporated Ogle County*
- CHART: *Zoning Certificates Issued 1970-2015 - Unincorporated Ogle County*
- CHART: *Dwelling Starts 1970-2015 - Unincorporated Ogle County*

Miscellaneous Statistical Information:

- ▶ Total Number of Zoning Certificates Issued: **362 (Non-Agricultural = 323; Agricultural = 39)**
- ▶ Estimated Value of Dwelling Starts: \$10,059,400.00
- ▶ Average Estimated Value per Dwelling: \$245,351.22
- ▶ Number of Map Amendment Petitions Filed: **10**
- ▶ Number of Special Use Permit Petitions Filed: **4**
- ▶ Number of Variation Petitions Filed: **13**
- ▶ Number of Zoning Ordinance Violation Notices Issued: **12**

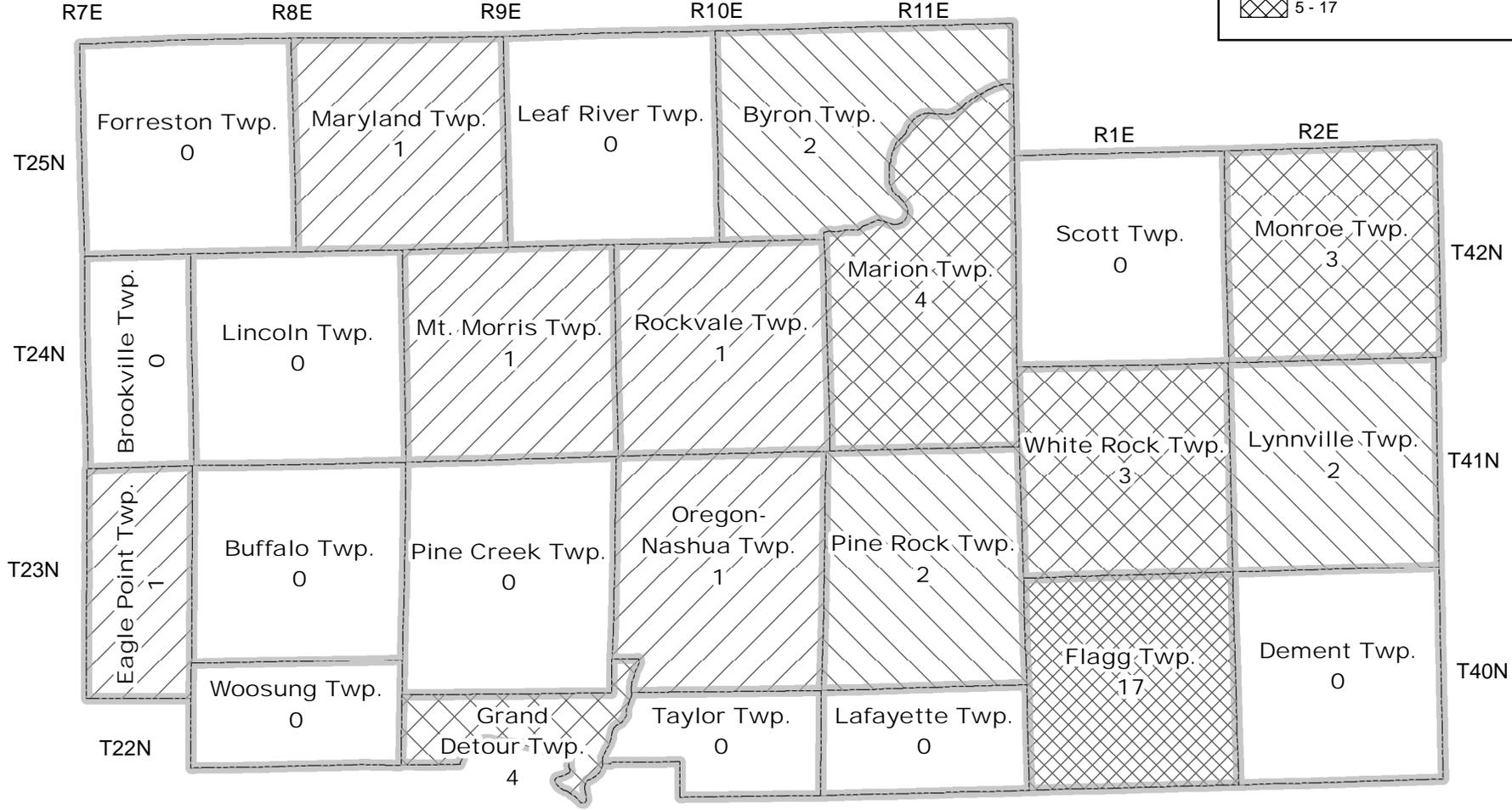
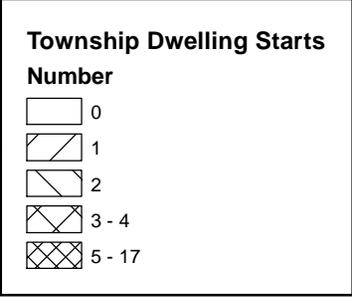
**2015 Township Dwelling Starts and Percent of Total  
Unincorporated Ogle County**

<b>Township</b>	<b>Dwelling Starts</b>	<b>% of Total</b>
Flagg	17	40.0%
Grand Detour	4	9.6%
Marion	4	9.6%
Monroe	3	7.2%
White Rock	3	7.2%
Byron	2	4.8%
Lynnville	2	4.8%
Pine Rock	2	4.8%
Eagle Point	1	2.4%
Maryland	1	2.4%
Mt. Morris	1	2.4%
Oregon-Nashua	1	2.4%
Rockvale	1	2.4%
Brookville	0	0%
Buffalo	0	0%
Dement	0	0%
Forreston	0	0%
Lafayette	0	0%
Leaf River	0	0%
Lincoln	0	0%
Pine Creek	0	0%
Scott	0	0%
Taylor	0	0%
Woosung	0	0%
<b>Total:</b>	<b>42</b>	<b>100%</b>

Source: Ogle County Planning & Zoning Department

# Township Dwelling Starts in Calender Year 2015

## Unincorporated Ogle County, Illinois



Source: Ogle County Planning & Zoning Department, January 2016

**ZONING CERTIFICATES ISSUED 1970-2015  
UNINCORPORATED OGLE COUNTY**

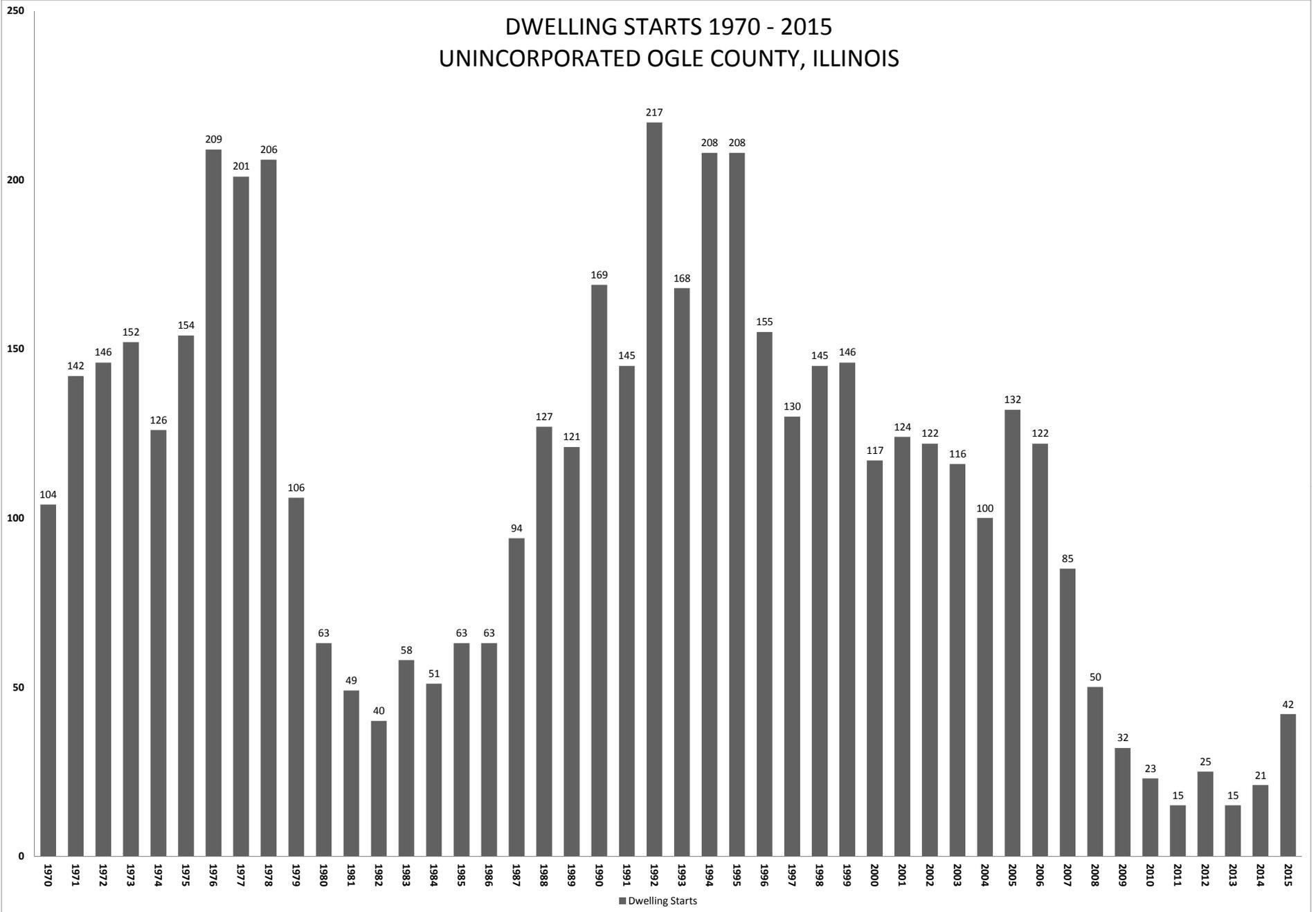
<b>Year</b>	<b>Non-Agricultural</b>	<b>Agricultural</b>	<b>Dwellings</b>
1970	221	227	104
1971	299	212	142
1972	229	270	146
1973	209	282	152
1974	189	217	126
1975	226	190	154
1976	262	224	209
1977	256	249	201
1978	228	246	206
1979	213	139	106
1980	135	102	63
1981	127	151	49
1982	138	84	40
1983	162	71	58
1984	169	49	51
1985	189	46	63
1986	198	72	63
1987	231	66	94
1988	296	69	127
1989	309	83	121
1990	347	110	169
1991	344	71	145
1992	476	105	217
1993	440	80	168
1994	526	83	208
1995	585	109	208
1996	526	96	157

<b>ZONING CERTIFICATES ISSUED 1970-2015 UNINCORPORATED OGLE COUNTY</b>			
1997	461	88	130
1998	485	96	145
1999	491	84	146
2000	524	91	117
2001	468	80	124
2002	491	68	122
2003	521	52	116
2004	468	33	100
2005	491	26	132
2006	457	54	122
2007	421	44	85
2008	287	52	50
2009	291	58	32
2010	224	46	23
2011	240	71	15
2012	303	47	25
2013	241	40	15
2014	281	43	21
2015	323	39	42

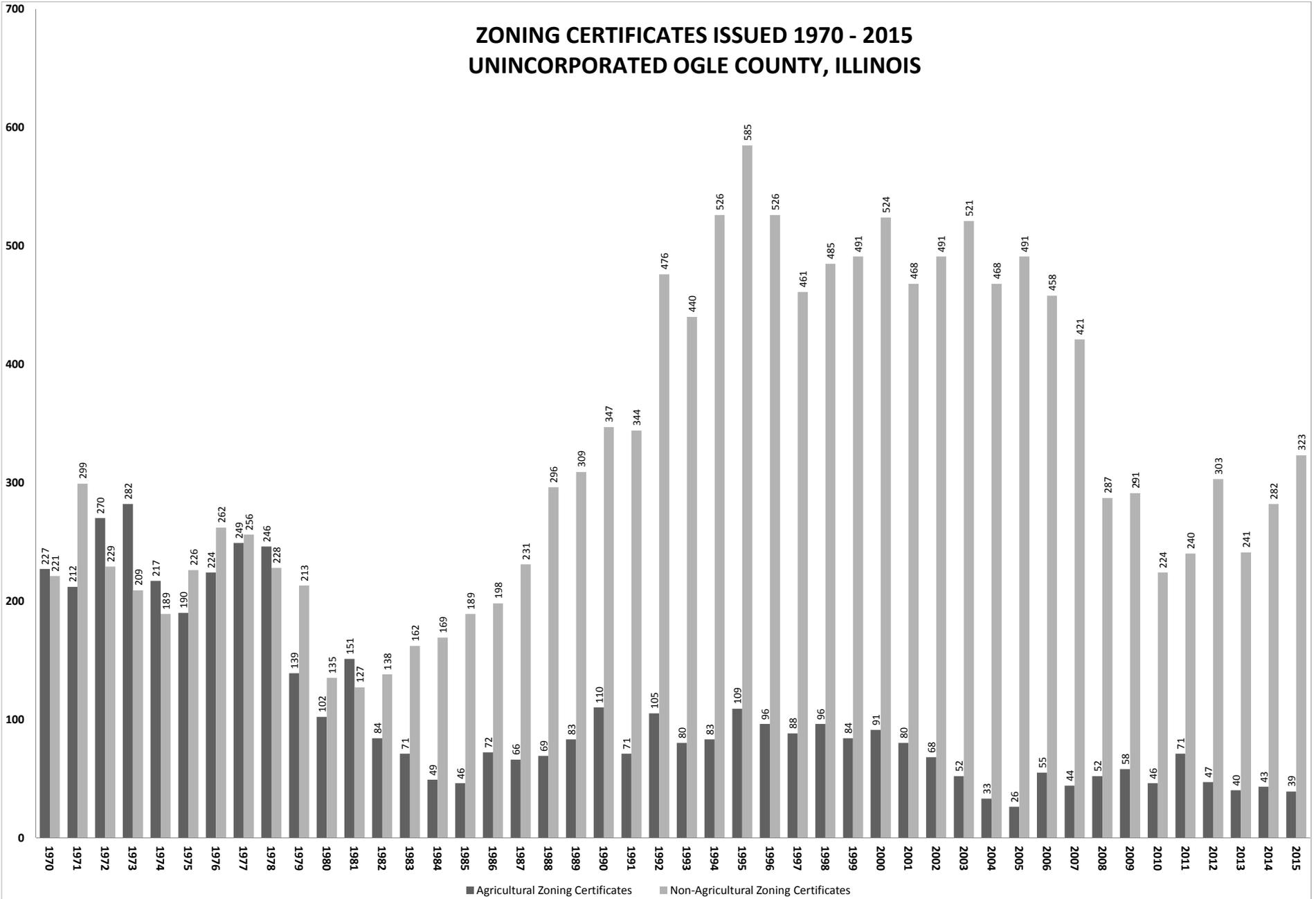
Source: Ogle County Planning & Zoning Department

# DWELLING STARTS 1970 - 2015

## UNINCORPORATED OGLE COUNTY, ILLINOIS



## ZONING CERTIFICATES ISSUED 1970 - 2015 UNINCORPORATED OGLE COUNTY, ILLINOIS



STATE OF ILLINOIS )  
 ) SS  
COUNTY OF OGLE )

ORDINANCE NO. 2016-0101

AN ORDINANCE APPROVING A SPECIAL USE PERMIT ON PROPERTY  
LOCATED AT 1509 E. TOWNLINE ROAD IN ROCKVALE TOWNSHIP

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WHEREAS, Byron-Oregon Sportsman & Conservation Club, Inc. has filed a petition for a Special Use Permit in the AG-1 Agricultural District (Petition No. 2-15SU) to allow a shooting range on property located at 1509 E. Townline Road in Rockvale Township and legally described as shown in Exhibit “A” attached hereto; and

WHEREAS, following due and proper notice by publication in the Ogle County Life at least fifteen (15) days prior thereto, and by mailing notice to all owners of property abutting the subject property at least fifteen (15) days prior thereto, the Ogle County Zoning Board of Appeals conducted a public hearing on September 24, 2015, at which the petitioner presented evidence, testimony, and exhibits in support of the requested Special Use Permit, and eight (8) member(s) of the public spoke in opposition to the petition; and

WHEREAS, the Zoning Board of Appeals, having considered the evidence, testimony and exhibits presented has made its findings of fact and recommended that the requested Special Use Permit be granted as set forth in the *Findings of Fact and Recommendation of the Ogle County Zoning Board of Appeals* dated September 24, 2015, a copy of which is appended hereto as Exhibit “B”; and

WHEREAS, the Planning & Zoning Committee of the Ogle County Board has reviewed the testimony and exhibits presented at the public hearing and has considered the findings of fact and recommendation of the Zoning Board of Appeals, and has forwarded a recommendation to the Ogle County Board that the requested Special Use Permit be granted subject to twenty-one conditions; and

WHEREAS, the Ogle County Board has considered the findings of fact and recommendation of the Zoning Board of Appeals and the recommendation of the Planning & Zoning Committee, and has determined that granting the Special Use Permit in the AG-1 Agricultural District (Petition No. 2-15SU) to allow a shooting range would be consistent with the requirements established by Section 16-9-8C of the *Ogle County Amendatory Zoning Ordinance*;

NOW, THEREFORE, BE IT ORDAINED BY THE COUNTY BOARD OF OGLE COUNTY, ILLINOIS, as follows:

SECTION ONE: The report of the Ogle County Zoning Board of Appeals, Exhibit “B” attached hereto, is hereby accepted and the findings set forth therein are hereby adopted as the findings of fact and conclusions of the Ogle County Board.

SECTION TWO: Based on the findings of fact set forth above, the petition of Byron-Oregon Sportsman & Conservation Club, Inc. for a Special Use Permit in the AG-1 Agricultural District (Petition No. 2-15SU) to allow a shooting range on property located at 1509 E. Townline Road in Rockvale Township and legally described as shown in Exhibit “A” attached hereto, is hereby approved subject to the following conditions:

1. All proposals and representations made by the applicant and/or their representative shall be conditions of the Special Use Permit.

2. As contained herein, the following words and terms shall have the respective meanings ascribed to them:

**Bullet:** A single projectile fired from a firearm.

**Firearm(s):** A term used to describe any gun, usually small, from which a bullet is propelled by means of hot gasses generated by burning powder (usually smokeless or black powder).

**Firing line:** A line parallel to the targets from where firearms are discharged.

**Firing position (point):** An area directly behind the firing line having a specified width and depth that is occupied by a shooter, his or her equipment and, if appropriate, an instructor or coach.

**Pistol:** A firearm capable of being held, aimed and fired with one hand. Also known as a handgun.

**Rifle:** A modern firearm designed to be fired from the shoulder. Its main characteristic is a rifled (grooved) barrel that imparts a spin to a single projectile as it travels through the bore. Some rifles designed for military or law enforcement use may have a pistol grip stock instead of a shoulder stock. For purposes herein, "rifles" shall also include black powder and other muzzle loading firearms, some of which may have rifled barrels.

**Safety fan:** The safety fan of a shooting range consists of three parts: the direct fire zone, the safety zone, and the ricochet zone. The direct fire zone is that area into which all shots are fired during the normal course of shooting. This zone includes all directions and angles of fire used on a shooting range while shooting at a specific target, either stationary or moving, from a specific firing point. The length of the direct fire zone extends to the maximum range of the ammunition and firearm used on the firing range, but can be shortened by physical barriers or other devices which reduce the maximum distance of a bullet's trajectory. The safety zone extends 10 degrees to the left and right of the direct fire zone and protects against errant bullets caused by cross fire or accidental discharge of a firearm. The ricochet zone is that area 45 degrees to the left and right of the firing line, and extended a certain distance dependent on the type of firearm and ammunition allowed on the range (i.e., 85 yards for air guns, and up to 1,200 yards for high-powered rifles). The line is then extended parallel to each side of the safety zone downrange to the intersection of a line extended from the terminus of the direct fire zone through the outer corner of the safety zone.

**Shooting Range(s):** An area designed and improved to encompass shooting stations or firing lines, target areas, berms and baffles, and other related components.

**Shooting Range Facility:** A facility including individual Shooting Ranges, safety fans, Structures, parking area(s), and other associated improvements, designed for the purpose of providing a place for the discharge of various types of Firearms.

**Shotgun:** A firearm designed to be fired from the shoulder with a smoothbore barrel that fires shot shells possessing a varying number of round pellets. Some barrels are designed to be used with rifled slugs, most generally having smoothbores, but in some cases may be rifled. Law enforcement and military shotguns may have a pistol grip stock instead of a shoulder stock.

**Structure(s):** A walled and roofed building that is principally above ground or any other permanent, manmade facilities.

**Surface Danger Zone:** Any area that may reasonably expect projectile impact resulting from direct fire, including misdirected and accidental discharges, and ricochets from any Firearm, which takes into consideration all mitigation efforts as submitted by the applicant and determined by a qualified licensed design professional with experience in outdoor shooting range planning and design.

3. The shooting range facility shall be designed by a qualified licensed design professional (engineer, architect, etc.) with experience in outdoor shooting range planning and design. The shooting range shall be designed in accordance with the most current edition of the Range Source Book (published by the National Rifle Association) or other industry-accepted shooting range design criteria as deemed acceptable by the Ogle County Planning & Zoning Administrator, provided alternative design criteria are at least as or more restrictive than the Range Source Book. The shooting range facility shall be designed to ensure that all projectiles are contained within the vertical projection of the shooting range (range containment structure and shooting range building).
4. All applicable local, state and/or federal laws, ordinance and requirements shall be met in the design, construction and operation of the shooting range facility, including but not limited to the following: Ogle County, IL Comprehensive Stormwater Management Ordinance, the Ogle County Health Code, the Illinois Accessibility Code, and 20 ILCS 3105-10.09-1 (Adoption of building code; enforcement).
5. The design and operation of the shooting range facility shall incorporate best management practices for managing lead from fired rounds that meet or exceed the recommendations and/or standards set forth in Best Management Practices for Lead at Outdoor Shooting Ranges (U.S. Environmental Protection Agency).
6. The design and operation of the shooting range facility shall incorporate best management practices for managing and controlling erosion and sedimentation on the site.
7. The shooting range facility shall provide a minimum of one (1) parking space for each shooting position, plus two (2) additional parking spaces.
8. No construction activity shall commence until a Zoning Certificate is issued by the Planning & Zoning Administrator, and the shooting range shall not commence operation until an Occupancy Certificate has been issued by the Planning & Zoning Administrator. The Planning & Zoning Administrator shall not issue an Occupancy Certificate until the following has been submitted: A) Certificate of Inspection for all buildings/structures pursuant to 20 ILCS 3105-10.09-1 (Adoption of building code; enforcement); B) Letter of compliance from the County Engineer that the site is in compliance with the Ogle County, IL Comprehensive Stormwater Management Ordinance; C) Certification from the shooting range design professional of record that the shooting range has been constructed substantially in conformance with the design plans.
9. The entire perimeter of the outdoor shooting range safety fan(s) shall be fenced and signed to reduce the potential for trespass into the safety fan(s). Warning signs identifying the range shall be posted around the perimeter of the parcel or parcels on which the shooting range is located such that each sign is visible and legible from the next. The same signs shall be posted similarly on the security fencing surrounding the safety fan(s).
10. Only firearms chambered in handgun calibers (.45 caliber and smaller) shall be allowed to be utilized on the shooting range.
11. No exploding or explosive targets shall be utilized.

12. Hours of operation shall be limited to 9:00 A.M. to the earlier of one-half hour before sunset or 8:00 P.M. Monday through Saturday, and 11:00 A.M. to the earlier of one-half hour before sunset or 8:00 P.M. on Sunday. Sunset shall be as indicated in the Sunrise-Sunset Tables as published by the Illinois Department Natural Resources.
13. Pursuant to the recommendation of the Illinois Department of Natural Resources, no trees greater than three inches in diameter shall be removed or disturbed in the design, construction and operation of the shooting range facility between April 1 and October 1 in order to protect summer habitat for the endangered **Indiana Bat**, *Myotis sodalis*, and the threatened **Northern Long-Eared Bat**, *Myotis septentrionalis*.
14. A "range safety manager" shall be present inside the shooting range and supervising shooting activities at all times that the shooting range is in use. A "range safety manager" is a person 21 years of age or older that has been trained by a National Rifle Association (NRA) Certified Instructor or an NRA-certified Chief Range Safety Officer. Such training shall be similar to the training that an NRA Range Safety Officer would receive, and shall include range safety manager's roles and responsibilities, range standard operating procedures, range inspection and range rules, firearm stoppages and malfunctions, and emergency procedures.
15. The enclosed shooting facility building shall be provided with an electronic access control system so that access to said shooting range may be obtained only by authorized persons. In addition, the shooting range security enclosure and enclosed shooting facility shall be monitored by both internal (inside any building within said enclosure and within the range area) and external video surveillance cameras.
16. The shooting range shall comply with Illinois noise regulations pursuant to Title 35: Environmental Protection, Subtitle H: Noise, Chapter I: Pollution Control Board. This condition shall apply to the shooting range as authorized pursuant to Special Use No. 2-15SU, and shall not be applicable to the pre-existing operation of the trap shooting range located on the same real property.
17. There shall be no parking of vehicles within the right-of-way of Townline Road.
18. There shall be no intoxicating substances or intoxicated persons (persons under the influence of drugs and/or alcohol) within the shooting range or within adjacent parking areas.
19. Any and all persons utilizing the shooting range shall comply with all federal and state firearm/gun laws.
20. An inspection of the shooting range facility shall be conducted not less than annually by an Illinois-licensed engineer or architect to determine continued range compliance with the approved range design criteria. Said inspection shall be conducted within 30 days of the anniversary date of the issuance of the Occupancy Certificate for the shooting range facility, and a copy of said inspection report submitted to the Ogle County Planning & Zoning Department. If any corrective actions and/or repairs to the shooting range are noted in the aforementioned inspection report, said corrective actions and/or repairs shall be completed within sixty (60) days, and if any conditions exist that are deemed to be unsafe, the shooting range shall not be utilized until corrective actions and/or repairs are made and the inspecting engineer or architect has verified that said corrective actions and/or repairs have been satisfactorily made.

21. The owner and/or operator of the shooting range facility shall, at its expense, maintain a broad form comprehensive coverage policy of public liability insurance in an amount not less than one million U.S. dollars (\$1,000,000) of combined single limit liability coverage per occurrence, accident or incident, with a two million (U.S.) dollar (\$2,000,000) per aggregate.

SECTION THREE: This Ordinance shall be in full force and effect upon its adoption by the County Board of Ogle County, Illinois and attestation by the Ogle County Clerk. Pursuant to Section 16-9-8F1 of the *Ogle County Amendatory Zoning Ordinance*, the Special Use Permit granted pursuant to this Ordinance shall be valid for a period not longer than two (2) years from the date of such ordinance unless the erection of a building or structure is started or the use is commenced within such a period, unless such time period is extended through appeal to and approval by the Supervisor of Assessments and Planning & Zoning Committee of the Ogle County Board. If no appeal is made, or no extension of time is received or granted, the permit shall immediately terminate upon expiration of the two (2) year period.

SECTION FOUR: Failure of the owners or other party in interest or a subsequent owner or other party in interest to comply with the terms of this Ordinance, after execution of such Ordinance, shall subject the owners or party in interest to the penalties set forth in Section 16-9-10 of the *Ogle County Amendatory Zoning Ordinance*.

PASSED BY THE COUNTY BOARD THIS 19<sup>TH</sup> DAY OF JANUARY 2016 A.D.

---

Kim P. Gouker, Chairman of the Ogle County Board

ATTEST:

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Rebecca Huntley, Ogle County Clerk and  
Ex Officio Clerk of the Ogle County Board

**EXHIBIT "A"**  
**LEGAL DESCRIPTION**

The north 957 feet of the West one-half (W $\frac{1}{2}$ ) of the West one-half (W $\frac{1}{2}$ ) of the West one-half (W $\frac{1}{2}$ ) of the Northeast one-quarter (NE $\frac{1}{4}$ ) of Section 2, T24N, R10E of the 3<sup>rd</sup> P.M.; AND the north 957 feet of the east 577.5 feet of the Northwest one-quarter (NW  $\frac{1}{4}$ ) Section 2, T24N, R10E of the 3<sup>rd</sup> P.M.

Property Identification Number (PIN): 09-02-126-002

Common Location: 1509 E. Townline Road

**EXHIBIT "B"**

**FINDINGS OF FACT AND RECOMMENDATION  
OF THE ZONING BOARD OF APPEALS**

# Ogle County Zoning Board of Appeals

911 W. Pines Road  
Oregon, IL 61061  
815.732.1190  
Fax: 815.732.2229

## FINDINGS OF FACT AND RECOMMENDATION OF THE OGLE COUNTY ZONING BOARD OF APPEALS

This is the findings of fact and the recommendation of the Ogle County Zoning Board of Appeals concerning an application of Byron-Oregon Sportsman & Conservation Club, Inc. c/o O.K. Welty III, 1509 E. Townline Rd., P.O. Box 742, Byron, IL, in case #2-15SU. The applicant is requesting a Special Use Permit in the AG-1 Agricultural District to allow a shooting range on part of Parcel Identification No. 09-02-126-002, a 19.93 acre parcel which is part of Section 2, Township 24N, Range 10E of the 4<sup>th</sup> Principal Meridian and is located in Rockvale Township at 1509 E. Townline Road.

After due notice as required by law, the Zoning Board of Appeals held a public hearing in this case on September 24, 2015 in the County Board Room, 3<sup>rd</sup> Floor, Ogle County Courthouse, Oregon, Illinois and hereby report their findings of fact and their recommendation as follows:

**SITE INFORMATION:** See Staff Report (attached herewith).

**ANALYSIS OF SIX STANDARDS:** After considering all the evidence and testimony presented at the public hearing, this Board makes the following analysis of the six standards listed in Section 9.08(C) (Standards for Special Use Permits) of the *Ogle County Amendatory Zoning Ordinance* that must all be found in the affirmative prior to recommending granting of the petition.

1. That the proposed special use will not be unreasonably detrimental to the value of other property in the neighborhood in which it is to be located or the public health, safety, morals, comfort or general welfare at large. **If properly designed, constructed and operated to ensure that no projectiles or bullets leave the shooting range facility or property, the proposed shooting range facility will not be unreasonably detrimental to the value of other property in the neighborhood in which it is to be located or the public health, safety, morals, comfort or general welfare at large. STANDARD MET.**
2. That the location and size of the special use, the nature and intensity of the operation involved in or conducted in connection with it, and the location of the site with respect to streets giving access to it are such that the special use will not dominate the immediate neighborhood so as to prevent development and use of neighboring property in accordance with the applicable zoning district regulations. In determining whether the special use will so dominate the immediate neighborhood, consideration shall be given to:
  - a. The location, nature and height of building, structures, walls and fences on the site; and,
  - b. The nature and extent of proposed landscaping and screening on the proposed site.

**If properly designed, constructed and operated to ensure that no projectiles or bullets leave the shooting range facility or property, the proposed shooting range facility will not dominate the immediate neighborhood so as to prevent development and use of neighboring property. STANDARD MET.**

3. That off-street parking and loading areas will be provided in accordance with the standards set forth in these regulations. **The site is large enough so that adequate off-street parking and loading areas can be provided. STANDARD MET.**
4. That adequate utilities, ingress/egress to the site, access roads, drainage and other such necessary facilities have been or will be provided. **Adequate utilities, ingress/egress to the site from E. Townline Road, access roads, drainage and other such necessary facilities have been or will be provided. STANDARD MET.**
5. That the proposed use can be operated in a manner that is not detrimental to the permitted developments and uses in the zoning district; can be developed and operated in a manner that is visually compatible with the permitted uses in the surrounding area; and is deemed essential or desirable to preserve and promote the public health, safety and general welfare of Ogle County. **The proposed shooting range, if designed, constructed and operated so that no projectiles leave the shooting range facility or property, can be operated in a manner that is not detrimental to the permitted developments and uses in the AG-1 Agricultural district. Due to its location in mature timber the proposed shooting range facility can be operated in a manner that is visually compatible with the existing will be visually compatible with the permitted uses in the surrounding area. Due to the growing popularity of shooting sports and the need for shooting ranges to train shooter in firearm safety and accuracy, the proposed shooting range is deemed essential and desirable to preserve and promote the public health, safety and general welfare of Ogle County. STANDARD MET.**
6. That the proposed special use complies with all provisions of the applicable district regulations. **The proposed special use appears to comply with all provisions of the AG-1 zoning district regulations. STANDARD MET.**

**RECOMMENDATION:** After considering all the evidence and testimony presented, this Board finds that the application meets all the standards as found in Section 6-9-8C of the *Ogle County Amendatory Zoning Ordinance*.

Therefore, the Zoning Board of Appeals hereby recommends that a Special Use Permit in the AG-1 Agricultural District be granted to allow a shooting range subject to the following conditions:

1. All proposals and representations made by the applicant and/or their representative shall be conditions of the Special Use Permit.
2. As contained herein, the following words and terms shall have the respective meanings ascribed to them:

**Bullet:** A single projectile fired from a firearm.

**Firearm(s):** A term used to describe any gun, usually small, from which a bullet is propelled by means of hot gasses generated by burning powder (usually smokeless or black powder).

**Firing line:** A line parallel to the targets from where firearms are discharged.

**Firing position (point):** An area directly behind the firing line having a specified width and depth that is occupied by a shooter, his or her equipment and, if appropriate, an instructor or coach.

**Pistol:** A firearm capable of being held, aimed and fired with one hand. Also known as a handgun.

**Rifle:** A modern firearm designed to be fired from the shoulder. Its main characteristic is a rifled (grooved) barrel that imparts a spin to a single projectile as it travels through the bore. Some rifles designed for military or law enforcement use may have a pistol grip stock instead of a shoulder stock. For purposes herein, "rifles" shall also include black powder and other muzzle loading firearms, some of which may have rifled barrels.

**Safety fan:** The safety fan of a shooting range consists of three parts: the direct fire zone, the safety zone, and the ricochet zone. The direct fire zone is that area into which all shots are fired during the normal course of shooting. This zone includes all directions and angles of fire used on a shooting range while shooting at a specific target, either stationary or moving, from a specific firing point. The length of the direct fire zone extends to the maximum range of the ammunition and firearm used on the firing range, but can be shortened by physical barriers or other devices which reduce the maximum distance of a bullet's trajectory. The safety zone extends 10 degrees to the left and right of the direct fire zone and protects against errant bullets caused by cross fire or accidental discharge of a firearm. The ricochet zone is that area 45 degrees to the left and right of the firing line, and extended a certain distance dependent on the type of firearm and ammunition allowed on the range (i.e., 85 yards for air guns, and up to 1,200 yards for high-powered rifles). The line is then extended parallel to each side of the safety zone downrange to the intersection of a line extended from the terminus of the direct fire zone through the outer corner of the safety zone.

**Shooting Range(s):** An area designed and improved to encompass shooting stations or firing lines, target areas, berms and baffles, and other related components.

**Shooting Range Facility:** A facility including individual Shooting Ranges, safety fans, Structures, parking area(s), and other associated improvements, designed for the purpose of providing a place for the discharge of various types of Firearms.

**Shotgun:** A firearm designed to be fired from the shoulder with a smoothbore barrel that fires shot shells possessing a varying number of round pellets. Some barrels are designed to be used with rifled slugs, most generally having smoothbores, but in some cases may be rifled. Law enforcement and military shotguns may have a pistol grip stock instead of a shoulder stock.

**Structure(s):** A walled and roofed building that is principally above ground or any other permanent, manmade facilities.

**Surface Danger Zone:** Any area that may reasonably expect projectile impact resulting from direct fire, including misdirected and accidental discharges, and ricochets from any Firearm, which takes into consideration all mitigation efforts as submitted by the applicant and determined by a qualified licensed design professional with experience in outdoor shooting range planning and design.

3. The shooting range facility shall be designed by a qualified licensed design professional with experience in outdoor shooting range planning and design. The shooting range shall be designed

in accordance with the most current edition of the Range Source Book (published by the National Rifle Association) or other industry-accepted shooting range design criteria as deemed acceptable by the Ogle County Planning & Zoning Administrator, provided alternative design criteria are at least as or more restrictive than the Range Source Book. The shooting range facility shall be designed to ensure that all projectiles are contained within the vertical projection of the property lines.

4. All applicable local, state and/or federal laws, ordinance and requirements shall be met in the design, construction and operation of the shooting range facility, including but not limited to the following: Ogle County, IL Comprehensive Stormwater Management Ordinance, the Ogle County Health Code, the Illinois Accessibility Code, and 20 ILCS 3105-10.09-1 (Adoption of building code; enforcement).
5. The design and operation of the shooting range facility shall incorporate best management practices for managing lead from fired rounds that meet or exceed the recommendations and/or standards set forth in Best Management Practices for Lead at Outdoor Shooting Ranges (U.S. Environmental Protection Agency).
6. The design and operation of the shooting range facility shall incorporate best management practices for managing and controlling erosion and sedimentation on the site.
7. The shooting range facility shall provide a minimum of one (1) parking space for each shooting position, plus two (2) additional parking spaces.
8. No construction activity shall commence until a Zoning Certificate is issued by the Planning & Zoning Administrator, and the shooting range shall not commence operation until an Occupancy Certificate has been issued by the Planning & Zoning Administrator. The Planning & Zoning Administrator shall not issue an Occupancy Certificate until the following has been submitted: A) Certificate of Inspection for all buildings/structures pursuant to 20 ILCS 3105-10.09-1 (Adoption of building code; enforcement); B) Letter of compliance from the County Engineer that the site is in compliance with the Ogle County, IL Comprehensive Stormwater Management Ordinance; C) Certification from the shooting range design professional of record that the shooting range has been constructed substantially in conformance with the design plans.
9. The entire perimeter of the outdoor shooting range safety fan(s) shall be fenced and signed to reduce the potential for trespass into the safety fan(s). Warning signs identifying the range shall be posted around the perimeter of the parcel or parcels on which the shooting range is located such that each sign is visible and legible from the next. The same signs shall be posted similarly on the security fencing surrounding the safety fan(s).
10. Only firearms chambered in handgun calibers (.45 caliber and smaller) shall be allowed to be utilized on the shooting range.
11. No exploding or explosive targets shall be utilized.

12. Hours of operation shall be limited to 9:00 A.M. to the earlier of one-half hour before sunset or 8:00 P.M. Monday through Saturday, and 11:00 A.M. to the earlier of one-half hour before sunset or 8:00 P.M. on Sunday. Sunset shall be as indicated in the Sunrise-Sunset Tables as published by the Illinois Department Natural Resources.
13. Pursuant to the recommendation of the Illinois Department of Natural Resources, no trees greater than three inches in diameter shall be removed or disturbed in the design, construction and operation of the shooting range facility between April 1 and October 1 in order to protect summer habitat for the endangered **Indiana Bat**, *Myotis sodalis*, and the threatened **Northern Long-Eared Bat**, *Myotis septentrionalis*.
14. The shooting range shall be supervised at all times during operation by an NRA-certified Range Safety Officer.

**ROLL CALL VOTE:** The roll call vote was 3 members for the motion to recommend granting, 2 opposed.

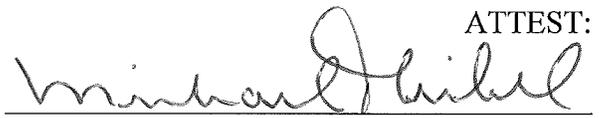
Respectfully submitted this 24<sup>th</sup> day of September 2015 by the Ogle County Zoning Board of Appeals.

**Randy Ocken, Chairman**  
**Maynard Stivers**  
**David Williams**  
**Paul Soderholm**  
**Dennis Williams**

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Randy Ocken, Chairman

ATTEST:

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Michael Reibel, Secretary