HIGHLANDS COUNTY BOARD OF COUNTY COMMISSIONERS
Tuesday, February 06, 2024
9:00 AM
600 S. Commerce Ave. Sebring, FL 33870
AGENDA

1 MEETING CALLED TO ORDER: Invitation to fill out "COMMENTS BY THE PUBLIC" forms.
Please silence all cell phones and devices.

2 INVOCATION

3 PLEDGE OF ALLEGIANCE

4 ANNOUNCEMENTS

The Highlands County Construction Licensing, Enforcement and Appeals Board will hold a regular meeting on Tuesday, February 6, 2024, at 7:00 p.m., in the Board Room, 600 S. Commerce Ave., Sebring, FL

Highlands County Code Enforcement Special Magistrate will hold a hearing on Wednesday, February 7, 2024, at 1:30 p.m., in the Board Room, 600 S. Commerce Ave., Sebring, FL

The Value Adjustment Board will hold their 2023 Organizational meeting on Thursday, February 8, 2024, at 9:00 a.m., in the Board Room, 600 S. Commerce Ave., Sebring, FL

A Public Hearing of the Highlands County Planning & Zoning Commission and Local Planning Agency and the Zoning Board of Adjustment will be held at 3:00 p.m., on Tuesday, February 13, 2024, in the Board Room, 600 S. Commerce Ave., Sebring, FL

The Recreation & Parks Advisory Committee will hold a regular meeting on Thursday, February 15, 2024, at 2:00 p.m., in the Highlands County Multi-Sports Complex, at 216 Sheriff's Tower Road, Sebring, FL

5 CONSTITUTIONAL OFFICERS – ANNOUNCEMENTS:

6 RECOGNITIONS, PRESENTATIONS AND PROCLAMATIONS:

6.A *Recognition of Randy Payne, Emergency Coordinator for the Amateur Radio Emergency Services (ARES) 20 years of service.*
Corey Amundsen, Emergency Management Manager
No fiscal impact

6.B *Tourist Development Council (TDC) End of Year Update to the Highlands County Board of County Commissioners.*

Casey Hartt, Lead Marketing Consultant
There is no fiscal Impact.
Tourism whole agenda item.pdf

7 PUBLIC COMMENT

8 CONSENT AGENDA

8.A *Request approval to declare 317 County owned properties as surplus.*
Tanya Cannady, Business Services Director
All proceeds from the sale will result in revenue to the General Fund.
CountyOwnedVacant lots for surplus 1-24-24 final.pdf

8.B *Request adoption of Resolution 23-24-49 to establish a public hearing date of March 19, 2024, to discuss and consider closing the platted portion of roadway name Hickory Street (Currently Abilene Street).*
J.D. Langford, P.E., County Engineer
There is no fiscal impact.
Resolution 23-24-49 Roadway closure request.Golden Key - Hickory Street - Currently Abilene St.sgs.pdf

8.C *Request approval for the renewal agreement for financial advisory services with PFM Financial Advisors LLC.*
Tanya Cannady, Business Services Director
David Nitz, OMB Manager
There is no fiscal impact by approving Amendment 1 to the piggyback agreement between Highlands County and PFM Financial Advisors, LLC unless the county determines there is a need to request their services.
PFM Financial Advisors.Amendment1 2024 (unexecuted).pdf

8.D *Request approval of the elimination of the Mechanic I job description and revision of the Mechanic II job description.*
Jonathan Harrison, Road & Bridge Director
The fiscal impact is an increase of $6,019.19 to Fund 110 to reflect the difference in pay grade. Funds for this revision are already budgeted within Fund 110/Cost Center 4102 to accommodate the increase.
Mechanic II (0961) 2.6.2024.pdf
Mechanic I (0960) ELIMINATION.pdf

8.E *Request approval of Budget Amendment 23-24-044 to add additional funding to the Nuisance Abatement Cost Center from Reserve for Contingency.*
Eric Longshore, Building Official
The fiscal impact is a decrease to the reserves for contingency cost center 9990 of $61,700.00 and an increase to Nuisance Abatement cost center 6306 of $61,700.00 for a net fiscal impact of $0.00.
23-24-044 Nuisance Abatement Add'l Funding_Reserve (BA).pdf
23-24-044 Nuisance Abatement Add'l Funding (Reserve).pdf

8.F *Request adoption of Resolution 23-24-59 for Budget Amendment 23-24-041 for the 2023-2024 Emergency Management Performance Grant (EMPG).*
Corey Amundsen, Emergency Management Manager

The fiscal impact will be an increase to Fund 005 (General) in the amount of $59,517 and is used to supplement cost center 3991 (Local Emergency Mgmt) expenditures.

23-24-041 Project 23015 EMPA 23-24 (Resolution).pdf

23-24-041 Project 23015 EMPA 23-24 (BA).pdf

8.G *Request adoption of Resolution 23-24-58 for Budget Amendment 23-24-045 to realign funds for Sun N Lake Preserve Improvements.*
Jonathan Harrison, Road and Bridge Director
The net fiscal impact is an increase in the amount of $47,805.89 to Project #23016 (Sun N Lake Preserve Improvements).

23-24-045R Realign Funds to Proj 23016 SNL Preserve Improvements (Resolution).pdf

23-24-045 Realign Funds to Proj 23016 SNL Preserve Improvements (BA).pdf

8.H *Request approval of Budget Amendment 23-24-047 to appropriate Road Reconstruct funds for Project #22082, #23019 and #23050.*
Jonathan Harrison, Road and Bridge Director
The net fiscal impact of $125,699.56 in Fund 151 (Infrastructure Surtax) is being transferred from cost center 4102A (Transportation Projects), account 56300Z (Project Improvements) to Project #23019 Vale Ct, #22082 Jack Weisser Blvd, and #23050 Maxanna Ave in the amounts of $69,071.00, $1,628.56, and $55,000.00, respectively for a net fiscal impact of $0.00.

23-24-047 Xfer Funds to Project 22082_23019_23050 (BA).pdf

8.I *Request adoption of Resolution 23-24-62 for budget amendment 23-24-049 to appropriate fund balance brought forward to provide additional funding to purchase adjacent office building.*
Tanya Cannady, Business Services Director
The fiscal impact is an increase to Fund 151 (Infrastructure Surtax) in the amount of $5,000 that is being appropriated to Project 23014 (County Expansion Office Bldg), cost center 2672A (Facilities Mgmt 151), account 56200Z (Project Buildings).

23-24-049 Proj 23014 Bldg Purchase Add'l Funding (BA).pdf

23-24-049R Proj 23014 Bldg Purchase Add'l Funding (Resolution).pdf

8.J *Request to donate surplus land located at 8901 Castile Road, Sebring, Florida, to Spring Lake Improvement District (Spring Lake).*
Laurie A. Hurner, County Administrator
Sherry G. Sutphen, County Attorney

The value of the Property according to the Highlands County Property Appraiser is $18,500; however, the Property is currently not generating ad valorem taxes for the County since it is owned by the County. By transferring the Property to another government entity, it will remain exempt from ad valorem taxes; thus, there will be no financial change to the County with respect to the Property.

Spring Lake Property Donation Map.docx

County Deed.Spring Lake.Castile Road.SGS.docx

8.K *Request approval of Payment of NAFECO Invoice # 231222 without Purchase Order.*
James K. Duppenthaler, Interim Fire Chief
Fiscal impact is an increase to cost center 3217 (Fire Assessments), account 55200 (Operating supplies) in the amount of $6,896.76, and cost center 5105 (Emergency Medical Services), account 55200 (operating Supplies) in the amount of $10,345.15, for

a total net impact of $17,241.91.
Pay without PO NAFECO.pdf

8.L *Request adoption of Resolution 23-24-63 for Budget Amendment 23-24-052 to appropriate Settlement funds received from the State of Florida*
David Nitz, OMB Manager
Tanya Cannady, Business Services Director
Ingra Gardner, Community Programs Director
The fiscal impact is an increase to Fund 005 (General) and the overall budget in the amount of $199,615.96 which is being appropriated in cost center 5103 (Mental Health), account 53442Z (Substance Abuse Treatments Project), project 23053 (Opioid Settlement Funds).
FL Opioid Allocation_Agreement 2.pdf
23-24-052 Proj 23053 Opioid Settlement Funds (BA).pdf
23-24-052R Proj 23053 Opioid Settlement Funds (Resolution).pdf

8.M *Request approval of the minutes from the November 7, 2023 Regular Meeting of the Board.*
110723REG.pdf

8.N *Court-related and Other Miscellaneous Funds Revenue and Expenditures for the Board of County Commissioners*
Highlands County Clerk of Courts Accounting Manager Jackie Gabrus, CGFM
FY 2024 Court-Related and Other Misc Funds Memo Dec 2023.pdf

9 COMMITTEE ASSIGNMENTS:

9.A *Request appointment of Lidia Capote of TRU by Hilton/ Residence by Marriott as a Regular Member to the Tourist Development Council with term expiring May 2027, fulfilling the Owners/Operators of Tourist Accommodation vacancy.*
Leah Sauls, Development Services Director
There is no fiscal impact.
L. Capote TDC Application.pdf
FL Tourism Statute 125.0104.pdf

10 PUBLIC HEARING

10.A *Public Hearing to consider approval of Lifefleet Southeast Inc. d/b/a American Medical Response application for a Class 2 and 3 Certificate of Public Convenience and Necessity (COPCN).*
Dustin Fitch, Interim Deputy Chief
There is no fiscal impact.
Application 12.06.23.pdf
Ad 1.pdf
COPCN - Class 2 & 3.pdf

10.B *Public Hearing to consider approval of Affordable Transport, Inv. application for a Class 1, Class 2 and 3 Certificate of Public Convenience and Necessity (COPCN).*
Dustin Fitch, Interim Deputy Chief
There is no fiscal impact.

Application 11.29.23.pdf
ATI notice.pdf
COI.PDF
COPCN - Class 1.pdf
COPCN - Class 2 & 3.pdf

10.C *Public Hearing to consider approval of Atlantic Palm Beach, Inc. d/b/a AMR application for a Class 1, Class 2 and 3 Certificate of Public Convenience and Necessity (COPCN).*
Dustin Fitch, Interim Deputy Chief
There is no fiscal impact.
Application.pdf
notice AMR.pdf
COPCN - Class 1.pdf
COPCN - Class 2 & 3 -.pdf

10.D *Public Hearing to consider approval of Positive Mobility Inc. d/b/a Elite Medical Response application for a Class 2 and 3 Certificate of Public Convenience and Necessity (COPCN).*
Dustin Fitch, Interim Deputy Chief
There is no fiscal impact.
Postive . Elite Medical 11.15.2023.pdf
COPCN - Class 2 & 3.pdf
Cert of Ins Work Comp Elite 1-24-24.pdf
Elite aff.pdf

11 ACTION AGENDA

11.A *Request direction related to future mobile home development standards, code changes and/or process changes.*
Laurie Hurner, County Administrator
Sherry Sutphen, County Attorney
Mobile_Home_Workshop_Presentation.pdf

12 COUNTY ADMINISTRATOR AND LEGAL

12.A *County Attorney Status Report.*
Sherry G. Sutphen, County Attorney
There is no fiscal impact.
Legal_Long_Range_Log.docx

12.B *Commissioner's Priorities and the Project Status Report.*
Laurie Hurner, County Administrator
There is no fiscal impact.

13 COMMISSIONERS

14 INFORMATIONAL

14.A *Board payables from to December 19, 2023, to February 5, 2024*

15 ADJOURN

Any person who decides to appeal any decision made by this Board of County Commissioners of Highlands County, Florida, in public hearing or meeting is hereby advised that he or she will need a record of the proceedings, and that, for such purpose, he or she may need to ensure that a verbatim record of the proceedings is made, which record will include the testimony and evidence upon which such appeal is to be based.

The Board of County Commissioners of Highlands County, Florida, does not discriminate upon the basis of any individual's disability status. This non-discrimination policy involves every aspect of the Board's functions, including one's access to, participation, employment or treatment in its programs or activities. "Anyone requiring reasonable accommodation as provided for in the Americans With Disabilities Act or Section 286.26 Florida Statutes should contact Human Resources, ADA Coordinator at: 863-402-6509 (voice), or via Florida Rely Service 711, or by e-mail: hrmanager@highlandsfl.gov." Requests for CART or interpreter services should be made as soon as possible but no later than 48 hours in advance to permit coordination of the service.

Please note our new website address: www.highlandsfl.gov/

Any invocation that may be offered before the official start of the Commission meeting shall be the voluntary offering of a private citizen, to and for the benefit of the Commission. The views or beliefs expressed by the invocation speaker have not been previously reviewed or approved by the Commission, and the Commission is not allowed by law to endorse the religious beliefs or views of this, or any other speaker.

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER: **Corey Amundsen, Emergency Management Manager**

SUBJECT/TITLE: **Recognition of Randy Payne, Emergency Coordinator for the Amateur Radio Emergency Services (ARES) 20 years of service.**

STATEMENT OF ISSUE

Randy Payne has been a member of the Amateur Radio Emergency Services (ARES) team for the Emergency Operations Center in Highlands County since 2003. In 2005 he assumed the role of Emergency Coordinator, which he has held since then. Randy has been through several activations with the County to include Hurricanes, Wildfires, Hazmat Incidents, and more. He is stepping down as Emergency Coordinator but will still support the operations of our ARES team. Taking his place is Jeff Bronsing who has several years in the Amateur Radio Emergency Services.

RECOMMENDED ACTION

Recognize Randy Payne, Emergency Coordinator for ARES.

FISCAL IMPACT

No fiscal impact

Attachments:

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER: **Casey Hartt, Lead Marketing Consultant**

SUBJECT/TITLE: **Tourist Development Council (TDC) End of Year Update to the Highlands County Board of County Commissioners.**

STATEMENT OF ISSUE

Casey Hartt, Lead Marketing Consultant, to give a brief presentation and provide an update on the Tourist Development Council's accomplishments of 2023.

RECOMMENDED ACTION

None. This is being provided for informational purposes only.

FISCAL IMPACT

There is no fiscal Impact.

Attachments: Tourism whole agenda item.pdf

VISIT Sebring
AVON PARK & LAKE PLACID, FL

Highlands Co. Tourist Development Council's Sports Tourism Assessment & Study History

2020-2024

Why is Sports Tourism Important?

- With the pandemic over, sports tourism has garnered a bigger seat at the "tourism table." Given the positive impact sports had on the overall tourism marketplace during those challenging times, destinations now realize that what we have been saying for decades is actually true.....
  Sports tourism is immune to nearly every negative thing our country could encounter.

- No matter what challenges we have, we are never going to cheat our kids out of the chance to compete. While meetings and conventions are still trying to recover, the sports tourism industry is thriving above all other tourism sectors.

Sports Tourism Trends for 2024

Leadership – Impactful destinations and destination marketing/management organizations (DMOs) are leading the facility development conversation in their communities. This is especially true from a planning and funding perspective. If you want tourism driving facility assets developed, the tourism community needs to take the reins.

Tourism Improvement Districts (TIDs) – This is a tool that many of the destinations are putting in place to help develop tourism driving sports facilities (and convention centers as well). Hotels assess themselves some amount (usually 2%) to use for the specific purpose the TID was created for, which is usually some mix of business development and facility creation. This is worth exploring at the state and local levels for destinations of all sizes.



Sports Tourism Trends for 2024

Highest Best Use – The three biggest parks/city trends we see across the country on the facility side are: (1) get pools off our books, (2) get golf courses off our books, and (3) convert tennis courts to pickleball. The theme here is what is our highest and best use of the real estate and facilities we have?

Expanding Scope – The skills to help put on a sporting event are not that different from producing a festival or special event. Many of our destination partners are adding special events to the job description of the staff responsible for sports tourism.

Sports Tourism Trends for 2024

Leisure Sports – Somewhat of a carryover from last year, silent sports are booming (canoe, kayak, paddleboard, archery, cycling, hiking, etc.). Many of the destinations are asking about how they look to promote their natural assets in addition to their sports complexes, specifically for leisure (non-competition) travelers.

Data – There has never been more research and data specific to the sports tourism industry than there is today. Those that lean into it will be able to make intentional and intelligent decisions on where they invest their time and money.

Step 1: January-August 2020
Sports Tourism Assessment & Destination Audit

PURPOSE: Assess future sports tourism, venue/facilities, and event development.

- The report includes:
  - SWOT analysis, an overview and evaluation of the venue inventory in Highlands County.
  - Recommendations to enhance the current sports tourism efforts of Visit Sebring and organizational development enhancements that would drive additional overnight stays and economic impact to Highlands County.
- Highlands County's Sports Tourism Index score in January 2020: 21.48

Step 1: January-August 2020
Sports Tourism Assessment & Destination Audit

Short-Term Recommendations

- Explore created sporting event opportunities. (CGT Ladies, MLGT & recruited events)
- Add bench strength to support current staff in sports marketing and business development. (Airstream Ventures added in 2021)
- Focus on sports facility enhancement. (Parking lot expansion at Istokpoga Park + Applied for & received State grant for Facility Evaluation in 2023)
- Strengthen community alignment. (Ongoing Stakeholder Group & Individual Meetings)

Long-Term Recommendations

- Develop a sustainable sporting venue funding source and expand business development efforts. (3rd penny category & 1% increase to 5% in 2023)
- Collaborate to identify specific sports venue development opportunities. (Sports Facility Feasibility Study in 2023)

*Text in red indicates what TDC has done since recommendations.

Step 2: May 2023
Sports Tourism Facility Evaluation
(Venue Audit)

PURPOSE: To evaluate where our biggest opportunities are with sports tourism driving facilities. And to use industry benchmarks to narrow down the venues that Highlands County should focus on to drive sports tourism. The study concluded:

- There is a desire to grow sports tourism/recreation opportunities in Highlands County.
- The area lacks the necessary anchor facilities to drive tourism, particularly during the shoulder and off-peak seasons.
- The regional competition is fierce; there's a focus on facility investment throughout Florida mostly in larger markets.
- Many of Highlands County recreation facilities are underdeveloped or unkept, particularly for a growing community, and lack the ability to serve as tourism-driving venues.
- Highlands County's Sports Tourism Index score in May 2023: 45.60 (Up by +24.12 points)

Step 2: May 2023 Sports Tourism Facility (Venue Audit)

Venue Audit Recommendations:

- **New or Enhanced Diamond Facility** – Currently, the highest scoring diamond facilities in Highlands County are the Highlands County Sports Complex and the Max Long Baseball Fields. However, even as the highest scoring and most tournament-ready facilities in the area, both fall below the national average of diamond facility scores.

- **New or Enhanced Flat Field Facility** – As with diamonds, the highest scoring flat field facility in the area are the Highlands County Sports Complex, but the complex also scores below the national average and lacks the adequate number of fields and level of amenities needed to be considered a "tournament-friendly" facility.

- **New Indoor Multipurpose/Hardwood Court Facility** - Indoor sport focused facilities in the region are limited, lack the number of courts that event owners demand, and have local user groups that often control the event calendar and limit availability. During the venue audit, the Consultant Team did not visit any "tournament friendly" or "anchor" indoor hardwood court venues. Could also be used for indoor pickleball.

- **Waterway Enhancement** – Despite boasting numerous lakes ideal for fishing and other water/beach activities, it became apparent to the Consultant Team during the site visit and in speaking with those interviewed that the area lacked the infrastructure needed to truly take advantage of the county's water resources. While the area does host a few fishing tournaments each year, the lack of facilities and entry points limits the size of events that can be hosted. This results in potentially hundreds of thousands of dollars in lost revenue from participant and spectator lodging, dining, shopping, fueling, etc.

Step 3: November 2023
Sports Tourism Facility Feasibility Study
(Feasibility Study)

- In August 2023, Synergy Sports Global was hired to complete a Sports Tourism Facility Feasibility Study. This study provides a market summary, programming recommendations, facility size and budget recommendations, as well as projected economic impact and visitor expectations.
>Highlands County would be focused on expanding the community's access to sports and recreation, as well as driving new visitor spending to the County with sports tournaments and events.

- Due to existing infrastructure and proximity to schools/downtown hub, Synergy recommended the development of the proposed 3-court facility at the Highlands County Fairgrounds (adding to existing Alan Jay Arena) plus the expansion of the outdoor fields at the Sports Complex. The spaces reflected in the facility program are what experts believe are right sized to the regional market opportunity for sports tourism and the Project Team's definitions of success.

- The proposed facility will be able to achieve the Project Team's definition of success of creating a self-sustaining business model while also maximizing the opportunity to draw non-local visitors from the region through sports tourism events.

Step 3: November 2023
Sports Tourism Facility Feasibility Study
(Feasibility Study)

- Recommend the Project Team consider a P3/ private developer funding model to reduce the total amount of municipal capital required to create a successful facility. To maximize the impact of the proposed facility and minimize the exposure of the County in which it's located, Synergy recommends a privately developed facility with a municipality/TDC leaseback.

- STATUS: The fairgrounds project is currently on hold. The Fair Board applied for a $4 million state grant to help fund this $7 million project. If the funds are awarded, the Fair Board will consider where the additional $3 million will come from. TDC & Legal are assessing if TDT funds can be used if the TDC desires to co-fund this project. If the Fair Board does not get the $4 million grant, this project will be halted due to funding.

Step 4: Proposed in 2024 Business Plan & Financial Model for Indoor, Multi-Use Facility (Business Plan)

- In early January 2024, a developer/landowner began serious discussions with TDC staff and TDC consultants about donating a significant portion of land to the County.

- The donation would be connected to the TDC's ability and desire to develop a Multi-Use Facility that could be used for sports tourism.

- The Business Financial Plan and renderings created could be used on any property; they would not be tied to this developer's property.

- Property is located on SR 66 close to Highway 27

Step 4: Proposed in 2024

Business Plan & Financial Model for Indoor, Multi-Use Facility (Business Plan)

Business Plan will include:

- Creation of 5-year financial projections for operations to include Income Statement, Statement of Cash Flows, Balance Sheet, and supporting details (number and costs for programs, meets, events, etc.)
- Creation of an Economic Impact Analysis to show jobs created or supported, dollars coming into the area, additional hotel stays, restaurant visits, etc.
- Creation of a User Impact Summary to show the number of additional visitors to the area, youth participants, etc. based on a newly designed sports asset
- Initial Conceptual Architecture
- Conceptual Floor Plan and Site Plan including aerial views
- 3-5 Exterior & 3-5 Interior Renderings
- Development of a digital presentation deck + presentations to elected officials and TDC
- Development of a preliminary cost estimate for construction, surfacing, equipment, etc., and provide an optional phasing plan
- Provide a summary of financing and funding options

Next Step

- Funds for Step #4 already approved in TDC Budget by TDC & BOCC
  - Special Projects Budget - $130,000
    C) Sports Audit & Facility Study Follow Up Steps

- On Jan. 25, TDC re-confirmed to staff that they want to continue this sports tourism facility development path. They feel that the County needs a modern, multi-use facility that can serve both the residents and visitors as a tourism-driving asset.

VISIT Sebring
AVON PARK & LAKE PLACID, FL

SPORTS TOURISM
PRESENTATION

BOCC QUARTERLY REPORT- FEBRUARY 2024

BUSINESS. SPORTS. TOURISM
Airstream Ventures
EST. 2018

ASSOCIATION TRIPS

4/24	**SPORTS ETA** (Portland, OR)
5/24	**FLA SPORTS FNDTN** (Panama City, FL)
9/24	**TEAMS** (Anaheim, CA)
10/24	**ACES** (Huntsville, AL)
10/24	**SPORTS** (Wichita, KS)

EVENTS

BOOKED EVENTS

- CTG Open (Nov 23)
- Spartan Race (Dec 23)
- CGT Ladies Invitational (Dec 23)
- AJGA Golf Event (April 24)
- Pro Watercross (May 24)
- Youth LAX Event (May 24)
- USA LAX All Star and Hall of Fame (May 24)
- Youth LAX Extreme Event (June 24)
- ACL State Championship (June 24)
- US Fast Pitch
  - 12 Events
- MotoSurf (Aug/Sept 24)
- United Flag Football League (Sept 24)
- Youth LAX Showcase (Sept/Oct 24)
- Visit Sebring Classic (Oct 24)
- CGT Open (Nov 24)
- Spartan Race (Dec 24)
- CGT Ladies Invitational (Dec 24)

IN SERIOUS TALKS

- Kid's Triathlon
- Drag Boat Racing
- BassMasters

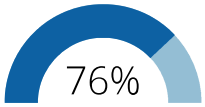
CONVERSATIONS

- USA Flag Football (2025)
- Professional Disc Golf Championship (2024/25)
- US Cycling (2025/26)
- 7 v 7 Football (2024/25)

ANNUAL CONTRACT

OCT 2023- SEPT 2024

TOTAL VALUE
$2.6 Million



(Room night values, impact values, marketing values)

EVENTS
GOAL: 15
ACTUAL: 3

ROOM NIGHTS
GOAL: 10,000
ACTUAL: 7,150

TOURISM IMPACT
GOAL: $3.4 MIL
ACTUAL: $ 2.6 MIL


VISIT
Sebring
Avon Park & Lake Placid, FL
MADDEN
CONNECT PEOPLE TO PLACES
BOCC MEETING
February 6, 2024
20

FY Marketing Performance

October '23 – December '23

WEBSITE TRAFFIC

77,184

Total Users
53% paid / 47% organic

89%

Engagement Rate

Top Visited Pages

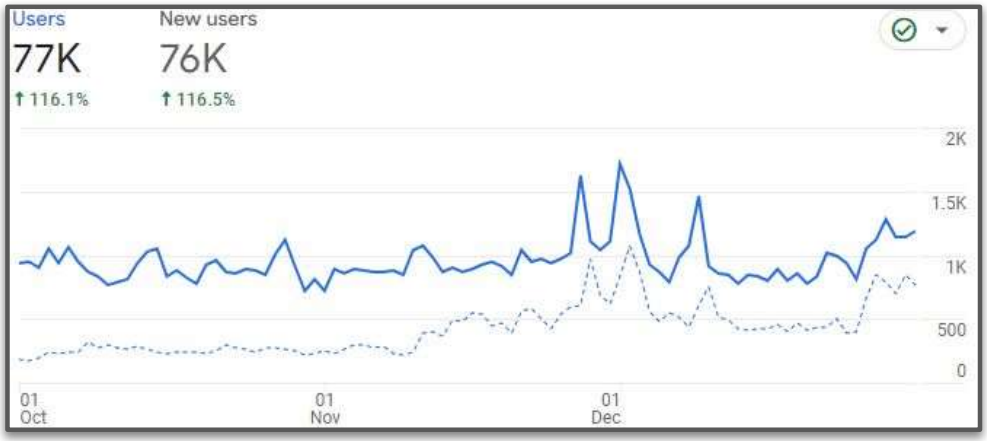
1. Homepage
2. Events
3. Citrus Golf Trail Ladies Invitational
4. Lake Placid Christmas Parade
5. Local Dining

Top Origin Cities

1. Sebring
2. Tampa
3. Miami
4. Atlanta
5. Orlando

Website Insights

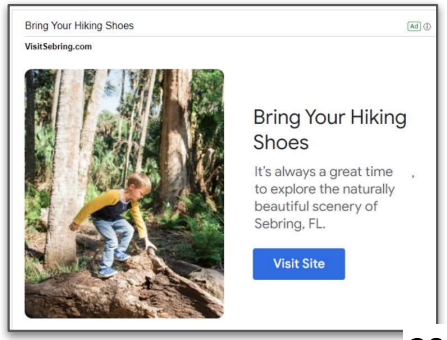
- Traffic has **doubled** YoY
- **Over 50%** of users came from Paid Media
- Website traffic from Miami, **increased more than 3x** with NYC **increasing 8x** YoY
- **Double** the amount of Outbound link clicks, 13,000 clicks
- **Quadruple** the amount of Accommodation partners outbound link clicks, 1,500 clicks
- Paid media drove **1,100 clicks** off to accommodation partner pages which is **70% of all Stay page partner outbound clicks**











23

PAID MEDIA
AD CAMPAIGN OVERVIEW

4.04M

Total Impressions

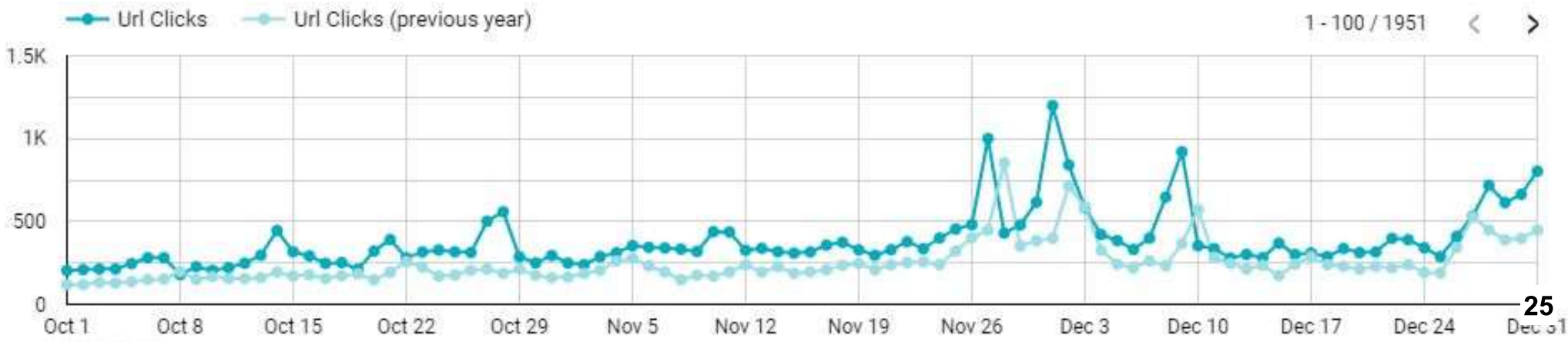
61,350

Total Ad Clicks

SEARCH ENGINE OPTIMIZATION OVERVIEW

- Sitewide organic clicks are **up 48%** year over year
- In Google there are currently **352 keywords** ranking in positions 1-3 and 1,143 ranking in positions 4-10.
- Year over year new users to your website are **up 43%**





TOP PERFORMANCE & INSIGHTS

GOOGLE SEARCH

- **Accommodations** and **events** keywords garnering most engagement with nearly 18% CTRs
- Top markets include Tampa, Orlando and Miami

GOOGLE DISPLAY

- **Culinary** and **Fishing** focused ads are garnering most engagement
- Top markets include NYC, Miami, San Francisco

GOOGLE DISCOVERY

- **Downtown** focused ads are garnering most engagement
- Top markets include Tampa, NYC, Orlando

META

- **Arts & Culture** focused ads are garnering most engagement
- Top markets include Tampa, NYC, Chicago

HAPPY FAMILY BLOG + VISIT SEBRING

In Market: December 20-23, 2023

- Deliverables:
  - Stories
  - 2 Instagram Reels
  - One blog post

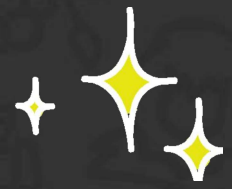
- Metrics:
  - 59 posts (10 in-feed)
  - 7 Bonus Location Tags
  - 37,382 Impressions
  - 13,715 Engagements
  - 11.45% Instagram Engagement Rate
  - $29,279.26 Earned Media Value



Cristy Harfmann // @happyfamilyblog

THANKS!

WE'RE ALL DONE NOW.





HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER: **Tanya Cannady, Business Services Director**

SUBJECT/TITLE: **Request approval to declare 317 County owned properties as surplus.**

STATEMENT OF ISSUE

The sale of surplus property owned by the County is authorized by Ordinance 16-17-08. 315 of the 317 lots are located in Sun 'n Lake of Sebring Improvement District.

The sale will be administered by the Purchasing Division through Gov Deals, which is an online auction company. Gov Deals charges a commission of 12.5% to the buyer and will remit the net proceeds collected to the County. All bidders will require a deposit with Gov Deals to participate in the auction and the deposit will be applied to the purchase price if they are the winning bid. If the winning bid does not provide the purchase price by the date specified then the deposit will be lost and the bid will be offered to the second highest bidder. Once the auction is complete, the lots sold and buyer information will be presented to the Board for approval before the deed is transferred. The minimum bid agrees to the just value of the property as of January 1, 2024 as set forth by the Property Appraiser.

RECOMMENDED ACTION

Move to approve 317 County owned properties as surplus.

FISCAL IMPACT

All proceeds from the sale will result in revenue to the General Fund.

Attachments: CountyOwnedVacant lots for surplus 1-24-24 final.pdf

	ParcelNo	Address			City	Zip	Assessed Price
1	C04342811020800200	6502	AGUERO	AVE	SEBRING	33872	$ 14,000
2	C04342811019400170	6257	ALCALA	AVE	SEBRING	33872	$ 14,000
3	C04342811019400180	6309	ALCALA	AVE	SEBRING	33872	$ 14,000
4	C04342811019400320	6511	ALCALA	AVE	SEBRING	33872	$ 14,000
5	C04342811019400350	6549	ALCALA	AVE	SEBRING	33872	$ 14,000
6	C04342811019500760	5820	ALCALA	AVE	SEBRING	33872	$ 14,000
7	C04342811019500770	5810	ALCALA	AVE	SEBRING	33872	$ 14,000
8	C04342811020500080	6808	ALCALA	AVE	SEBRING	33872	$ 14,000
9	C04342811020600200	6803	ALCALA	AVE	SEBRING	33872	$ 14,000
10	C04342811019400280	6429	ALCALA	AVE	SEBRING	33872	$ 14,000
11	C04342811019400390	6637	ALCALA	AVE	SEBRING	33872	$ 14,000
12	C04342811019400080	6035	ALCALA	AVE	SEBRING	33872	$ 14,000
13	C04342811019400100	6133	ALCALA	AVE	SEBRING	33872	$ 14,000
14	C04342811019400230	6347	ALCALA	AVE	SEBRING	33872	$ 14,000
15	C04342811019400250	6407	ALCALA	AVE	SEBRING	33872	$ 14,000
16	C04342811019500510	6346	ALCALA	AVE	SEBRING	33872	$ 14,000
17	C04342811019500680	6008	ALCALA	AVE	SEBRING	33872	$ 14,000
18	C04342811019400240	6355	ALCALA	AVE	SEBRING	33872	$ 14,000
19	C04342811019400260	6411	ALCALA	AVE	SEBRING	33872	$ 14,000
20	C04342811019400300	6441	ALCALA	AVE	SEBRING	33872	$ 14,000
21	C04342811020500110	6836	ALCALA	AVE	SEBRING	33872	$ 14,000
22	C04342811019400060	6015	ALCALA	AVE	SEBRING	33872	$ 14,000
23	C04342811019400270	6423	ALCALA	AVE	SEBRING	33872	$ 14,000
24	C04342811019400310	6505	ALCALA	AVE	SEBRING	33872	$ 14,000
25	C04342811020500030	6724	ALCALA	AVE	SEBRING	33872	$ 14,000
26	C04342811020600170	6825	ALCALA	AVE	SEBRING	33872	$ 14,000
27	C04342811019400220	6339	ALCALA	AVE	SEBRING	33872	$ 14,000
28	C04342811020600150	6843	ALCALA	AVE	SEBRING	33872	$ 14,000
29	C04342811019400010	5837	ALCALA	AVE	SEBRING	33872	$ 14,000
30	C04342811019400340	6537	ALCALA	AVE	SEBRING	33872	$ 14,000
31	C04342811020500050	6748	ALCALA	AVE	SEBRING	33872	$ 14,000
32	C04342811019500670	6016	ALCALA	AVE	SEBRING	33872	$ 14,000
33	C04342811019500570	6250	ALCALA	AVE	SEBRING	33872	$ 14,000
34	C04342811020600180	6819	ALCALA	AVE	SEBRING	33872	$ 14,000
35	C04342811020300130	6401	ALMANSA	ST	SEBRING	33872	$ 14,000
36	C04342811020200220	8065	ALTARA	ST	SEBRING	33872	$ 14,000
37	C04342811020400040	7618	ALTARA	ST	SEBRING	33872	$ 14,000
38	C04342811020500400	8022	ALTARA	ST	SEBRING	33872	$ 14,000
39	C04342811020200300	7927	ALTARA	ST	SEBRING	33872	$ 14,000
40	C04342811020200370	7723	ALTARA	ST	SEBRING	33872	$ 14,000
41	C04342811020500290	7714	ALTARA	ST	SEBRING	33872	$ 14,000
42	C04342811020500350	7904	ALTARA	ST	SEBRING	33872	$ 14,000
43	C04342811020200340	7801	ALTARA	ST	SEBRING	33872	$ 14,000
44	C04342811020400050	7624	ALTARA	ST	SEBRING	33872	$ 14,000
45	C04342811020200280	7943	ALTARA	ST	SEBRING	33872	$ 14,000
46	C04342811020200270	7949	ALTARA	ST	SEBRING	33872	$ 14,000

	ParcelNo	Address			City	Zip	Assessed Price
47	C04342811020200290	7935	ALTARA	ST	SEBRING	33872	$ 14,000
48	C04342811018400050	7535	ANCHA	ST	SEBRING	33872	$ 14,000
49	C04342810262100130	9102	BARQUERA	DR	SEBRING	33872	$ 14,000
50	C04342811019500260	6427	BENEVENTO	AVE	SEBRING	33872	$ 14,000
51	C04342811019600220	6318	BENEVENTO	AVE	SEBRING	33872	$ 14,000
52	C04342811019500300	6517	BENEVENTO	AVE	SEBRING	33872	$ 14,000
53	C04342811019600360	6104	BENEVENTO	AVE	SEBRING	33872	$ 14,000
54	C04342811019600300	6158	BENEVENTO	AVE	SEBRING	33872	$ 14,000
55	C04342811019600320	6140	BENEVENTO	AVE	SEBRING	33872	$ 14,000
56	C04342811019500030	6013	BENEVENTO	AVE	SEBRING	33872	$ 14,000
57	C04342811019600190	6338	BENEVENTO	AVE	SEBRING	33872	$ 14,000
58	C04342811020500500	6727	BENEVENTO	AVE	SEBRING	33872	$ 14,000
59	C04342811019600230	6302	BENEVENTO	AVE	SEBRING	33872	$ 14,000
60	C04342811019600290	6200	BENEVENTO	AVE	SEBRING	33872	$ 14,000
61	C04342811019600310	6146	BENEVENTO	AVE	SEBRING	33872	$ 14,000
62	C04342811019600340	6128	BENEVENTO	AVE	SEBRING	33872	$ 14,000
63	C04342811019600350	6120	BENEVENTO	AVE	SEBRING	33872	$ 14,000
64	C04342811018900260	7936	CABO	DR	SEBRING	33872	$ 14,000
65	C04342811018900270	7944	CABO	DR	SEBRING	33872	$ 14,000
66	C04342811020600620	6425	CALBIRA	AVE	SEBRING	33872	$ 14,000
67	C04342811020600640	6409	CALBIRA	AVE	SEBRING	33872	$ 14,000
68	C04342811020600630	6417	CALBIRA	AVE	SEBRING	33872	$ 14,000
69	C04342811020600650	6401	CALBIRA	AVE	SEBRING	33872	$ 14,000
70	C04342811020600050	8006	CAMPO SANO	ST	SEBRING	33872	$ 14,000
71	C04342811020600060	8014	CAMPO SANO	ST	SEBRING	33872	$ 14,000
72	C04342811020600090	8108	CAMPO SANO	ST	SEBRING	33872	$ 14,000
73	C04342811020600660	7822	CAMPO SANO	ST	SEBRING	33872	$ 14,000
74	C04342811020500140	8107	CAMPO SANO	ST	SEBRING	33872	$ 14,000
75	C04342811020600110	8126	CAMPO SANO	ST	SEBRING	33872	$ 14,000
76	C04342811020600130	8140	CAMPO SANO	ST	SEBRING	33872	$ 14,000
77	C04342811020600040	7924	CAMPO SANO	ST	SEBRING	33872	$ 14,000
78	C04342811020500150	8031	CAMPO SANO	ST	SEBRING	33872	$ 14,000
79	C04342811020600120	8134	CAMPO SANO	ST	SEBRING	33872	$ 14,000
80	C04342811020600140	8146	CAMPO SANO	ST	SEBRING	33872	$ 14,000
81	C04342811020500200	7917	CAMPO SANO	ST	SEBRING	33872	$ 14,000
82	C04342811020600070	8022	CAMPO SANO	ST	SEBRING	33872	$ 14,000
83	C04342811020500190	7923	CAMPO SANO	ST	SEBRING	33872	$ 14,000
84	C04342811020500210	7909	CAMPO SANO	ST	SEBRING	33872	$ 14,000
85	C04342811020500260	7813	CAMPO SANO	ST	SEBRING	33872	$ 14,000
86	C04342811020500280	7745	CAMPO SANO	ST	SEBRING	33872	$ 14,000
87	C04342811020600010	6401	CAMPO SANO	CT	SEBRING	33872	$ 14,000
88	C04342811020600100	8116	CAMPO SANO	ST	SEBRING	33872	$ 14,000
89	C04342811020600690	6416	CAMPO SANO	CT	SEBRING	33872	$ 14,000
90	C04342816033700250	5531	CASTANIA	DR	SEBRING	33872	$ 22,500
91	C04342816033600270	5900	CORTEZ	BLVD	SEBRING	33872	$ 15,900
92	C04342806006500270	3917	CORTEZ	BLVD	SEBRING	33872	$ 14,500

	ParcelNo	Address			City	Zip	Assessed Price
93	C04342806007300450	4317	CORTEZ	BLVD	SEBRING	33872	$ 14,500
94	C04342811020700190	7073	CORTEZ	BLVD	SEBRING	33872	$ 14,000
95	C04342811020800340	6533	CORTEZ	BLVD	SEBRING	33872	$ 14,000
96	C04342811020700330	6923	CORTEZ	BLVD	SEBRING	33872	$ 14,000
97	C04342811020800300	6635	CORTEZ	BLVD	SEBRING	33872	$ 14,000
98	C04342811020800370	6439	CORTEZ	BLVD	SEBRING	33872	$ 14,000
99	C04342811020700270	7003	CORTEZ	BLVD	SEBRING	33872	$ 14,000
100	C04342811020700290	6941	CORTEZ	BLVD	SEBRING	33872	$ 14,000
101	C04342811020800260	6701	CORTEZ	BLVD	SEBRING	33872	$ 14,000
102	C04342811020800350	6513	CORTEZ	BLVD	SEBRING	33872	$ 14,000
103	C04342811020700260	7001	CORTEZ	BLVD	SEBRING	33872	$ 14,000
104	C04342811020700280	6953	CORTEZ	BLVD	SEBRING	33872	$ 14,000
105	C04342811020800250	6717	CORTEZ	BLVD	SEBRING	33872	$ 14,000
106	C04342811020700310	6933	CORTEZ	BLVD	SEBRING	33872	$ 14,000
107	C04342811020800320	6551	CORTEZ	BLVD	SEBRING	33872	$ 14,000
108	C04342811020800390	6418	CORTEZ	BLVD	SEBRING	33872	$ 14,000
109	C04342811020700300	6939	CORTEZ	BLVD	SEBRING	33872	$ 14,000
110	C04342811020800290	6647	CORTEZ	BLVD	SEBRING	33872	$ 14,000
111	C04342811020800310	6603	CORTEZ	BLVD	SEBRING	33872	$ 14,000
112	C04342811020800400	6405	CORTEZ	BLVD	SEBRING	33872	$ 14,000
113	C04342811020300180	6249	CORTEZ	BLVD	SEBRING	33872	$ 11,600
114	C04342805005500050	3832	DURANGO	AVE	SEBRING	33872	$ 13,050
115	C04342810017800430	4419	GERONA	AVE	SEBRING	33872	$ 14,000
116	C04342811019400460	4348	GERONA	AVE	SEBRING	33872	$ 14,000
117	C04342811019400420	4364	GERONA	AVE	SEBRING	33872	$ 14,000
118	C04342811019400570	4304	GERONA	AVE	SEBRING	33872	$ 14,000
119	C04342811019400430	4360	GERONA	AVE	SEBRING	33872	$ 14,000
120	C04342811019400580	4300	GERONA	AVE	SEBRING	33872	$ 14,000
121	C04342811019400450	4352	GERONA	AVE	SEBRING	33872	$ 14,000
122	C04342811019400560	4308	GERONA	AVE	SEBRING	33872	$ 14,000
123	C04342807008900060	7924	GRANADA	BLVD	SEBRING	33872	$ 14,000
124	C04342811019000130	7304	HAPPYFACE	ST	SEBRING	33872	$ 14,000
125	C04342811019000200	7332	HAPPYFACE	ST	SEBRING	33872	$ 14,000
126	C04342811019000310	7376	HAPPYFACE	ST	SEBRING	33872	$ 14,000
127	C04342811019000380	7404	HAPPYFACE	ST	SEBRING	33872	$ 14,000
128	C04342811019000370	7400	HAPPYFACE	ST	SEBRING	33872	$ 14,000
129	C04342811019000180	7324	HAPPYFACE	ST	SEBRING	33872	$ 14,000
130	C04342811018900530	7369	HAPPYFACE	ST	SEBRING	33872	$ 14,000
131	C04342811019000170	7320	HAPPYFACE	ST	SEBRING	33872	$ 14,000
132	C04342811019200220	7412	HAPPYFACE	ST	SEBRING	33872	$ 14,000
133	C04342811019000290	7368	HAPPYFACE	ST	SEBRING	33872	$ 14,000
134	C04342811019000210	7336	HAPPYFACE	ST	SEBRING	33872	$ 14,000
135	C04342811019000300	7372	HAPPYFACE	ST	SEBRING	33872	$ 14,000
136	C04342805005900030	3916	HARLANDO	AVE	SEBRING	33872	$ 13,050
137	C04342805005900080	4020	HARLANDO	AVE	SEBRING	33872	$ 13,050
138	C04342811019000410	7817	LAGUNA	ST	SEBRING	33872	$ 14,000

	ParcelNo	Address			City	Zip	Assessed Price
139	C04342811019000590	7335	LAGUNA	ST	SEBRING	33872	$ 14,000
140	C04342811019200010	7318	LAGUNA	ST	SEBRING	33872	$ 14,000
141	C04342811019200080	7540	LAGUNA	ST	SEBRING	33872	$ 14,000
142	C04342811019000390	7837	LAGUNA	ST	SEBRING	33872	$ 14,000
143	C04342811019000480	7649	LAGUNA	ST	SEBRING	33872	$ 14,000
144	C04342811019000520	7541	LAGUNA	ST	SEBRING	33872	$ 14,000
145	C04342811019200040	7424	LAGUNA	ST	SEBRING	33872	$ 14,000
146	C04342811019200060	7522	LAGUNA	ST	SEBRING	33872	$ 14,000
147	C04342811019200210	7836	LAGUNA	ST	SEBRING	33872	$ 14,000
148	C04342811019200140	7728	LAGUNA	ST	SEBRING	33872	$ 14,000
149	C04342811019000490	7637	LAGUNA	ST	SEBRING	33872	$ 14,000
150	C04342811019000510	7615	LAGUNA	ST	SEBRING	33872	$ 14,000
151	C04342811019000530	7525	LAGUNA	ST	SEBRING	33872	$ 14,000
152	C04342811019200050	7510	LAGUNA	ST	SEBRING	33872	$ 14,000
153	C04342811019000400	7829	LAGUNA	ST	SEBRING	33872	$ 14,000
154	C04342811019000470	7717	LAGUNA	ST	SEBRING	33872	$ 14,000
155	C04342811019000650	7213	LAGUNA	ST	SEBRING	33872	$ 14,000
156	C04342811019200100	7628	LAGUNA	ST	SEBRING	33872	$ 14,000
157	C04342811019000620	7245	LAGUNA	ST	SEBRING	33872	$ 14,000
158	C04342811019200090	7614	LAGUNA	ST	SEBRING	33872	$ 14,000
159	C04342808010000110	7837	LEONARDO	ST	SEBRING	33872	$ 14,000
160	C04342808011100050	5100	LEVANTE	DR	SEBRING	33872	$ 14,000
161	C04342808011000170	5111	LEVANTE	DR	SEBRING	33872	$ 14,000
162	C04342808011000220	5009	LEVANTE	DR	SEBRING	33872	$ 14,000
163	C04342810017400250	8615	LUCY	DR	SEBRING	33872	$ 14,000
164	C04342811019200290	7825	MAGGIORE	ST	SEBRING	33872	$ 14,000
165	C04342811019300210	7938	MAGGIORE	ST	SEBRING	33872	$ 14,000
166	C04342811019300220	8000	MAGGIORE	ST	SEBRING	33872	$ 14,000
167	C04342811019300180	7906	MAGGIORE	ST	SEBRING	33872	$ 14,000
168	C04342811019300250	8036	MAGGIORE	ST	SEBRING	33872	$ 14,000
169	C04342811019200340	7727	MAGGIORE	ST	SEBRING	33872	$ 14,000
170	C04342811019200360	7707	MAGGIORE	ST	SEBRING	33872	$ 14,000
171	C04342811019300170	7842	MAGGIORE	ST	SEBRING	33872	$ 14,000
172	C04342811019300240	8026	MAGGIORE	ST	SEBRING	33872	$ 14,000
173	C04342811019200400	7609	MAGGIORE	ST	SEBRING	33872	$ 14,000
174	C04342811019200410	7547	MAGGIORE	ST	SEBRING	33872	$ 14,000
175	C04342811019300120	7748	MAGGIORE	ST	SEBRING	33872	$ 14,000
176	C04342811019300140	7818	MAGGIORE	ST	SEBRING	33872	$ 14,000
177	C04342811019300230	8010	MAGGIORE	ST	SEBRING	33872	$ 14,000
178	C04342811019300060	7634	MAGGIORE	ST	SEBRING	33872	$ 14,000
179	C04342811019700030	5834	MALAGA	AVE	SEBRING	33872	$ 14,000
180	C04342811019700040	5900	MALAGA	AVE	SEBRING	33872	$ 14,000
181	C04342811019700110	6024	MALAGA	AVE	SEBRING	33872	$ 14,000
182	C04342811019700130	6048	MALAGA	AVE	SEBRING	33872	$ 14,000
183	C04342811019700020	5822	MALAGA	AVE	SEBRING	33872	$ 14,000
184	C04342811019500840	6013	MALAGA	AVE	SEBRING	33872	$ 14,000

	ParcelNo	Address			City	Zip	Assessed Price
185	C04342811019500860	6037	MALAGA	AVE	SEBRING	33872	$ 14,000
186	C04342811019700100	6012	MALAGA	AVE	SEBRING	33872	$ 14,000
187	C04342811019700120	6036	MALAGA	AVE	SEBRING	33872	$ 14,000
188	C04342811019500820	5939	MALAGA	AVE	SEBRING	33872	$ 14,000
189	C04342810017800080	8128	MANTUA	AVE	SEBRING	33872	$ 14,000
190	C04342810018100200	8101	MANTUA	AVE	SEBRING	33872	$ 14,000
191	C04342810017000150	8256	MANTUA	AVE	SEBRING	33872	$ 14,000
192	C04342811019000010	7303	MAR	ST	SEBRING	33872	$ 14,000
193	C04342811019000660	7301	MAR	ST	SEBRING	33872	$ 14,000
194	C04342808260500020	8119	MARIN	ST	SEBRING	33872	$ 14,000
195	C04342806006700140	4132	PALERMO	AVE	SEBRING	33872	$ 14,000
196	C04342811019300350	7947	PARADELA	DR	SEBRING	33872	$ 14,000
197	C04342811019400670	8120	PARADELA	DR	SEBRING	33872	$ 14,000
198	C04342811019300320	8027	PARADELA	DR	SEBRING	33872	$ 14,000
199	C04342811019300500	7627	PARADELA	DR	SEBRING	33872	$ 14,000
200	C04342811019400710	8058	PARADELA	DR	SEBRING	33872	$ 14,000
201	C04342811019300510	7615	PARADELA	DR	SEBRING	33872	$ 14,000
202	C04342811019400760	7958	PARADELA	DR	SEBRING	33872	$ 14,000
203	C04342811019300270	8139	PARADELA	DR	SEBRING	33872	$ 14,000
204	C04342811019300460	7769	PARADELA	DR	SEBRING	33872	$ 14,000
205	C04342811019300410	7837	PARADELA	DR	SEBRING	33872	$ 14,000
206	C04342811019400700	8064	PARADELA	DR	SEBRING	33872	$ 14,000
207	C04342811019300330	8015	PARADELA	DR	SEBRING	33872	$ 14,000
208	C04342811019400790	7922	PARADELA	DR	SEBRING	33872	$ 14,000
209	C04342811019400650	8130	PARADELA	DR	SEBRING	33872	$ 14,000
210	C04342811019400660	8126	PARADELA	DR	SEBRING	33872	$ 14,000
211	C04342811019400750	8014	PARADELA	DR	SEBRING	33872	$ 14,000
212	C04342811020100650	7402	PUERTA	ST	SEBRING	33872	$ 14,000
213	C04342806006900150	4125	ROSARO	AVE	SEBRING	33872	$ 14,000
214	C04342816035700110	6685	SAN BRUNO	DR	SEBRING	33872	$ 22,950
215	C04342808010800140	5223	SAN JUAN	DR	SEBRING	33872	$ 14,000
216	C04342811020300010	7000	SAQUNA	ST	SEBRING	33872	$ 14,000
217	C04342808010300140	7847	SUN N LAKE	BLVD	SEBRING	33872	$ 14,000
218	C04342808010300110	7927	SUN N LAKE	BLVD	SEBRING	33872	$ 14,000
219	C04342808010300100	7939	SUN N LAKE	BLVD	SEBRING	33872	$ 14,000
220	C04342808010300120	7915	SUN N LAKE	BLVD	SEBRING	33872	$ 14,000
221	C04342808010300160	7821	SUN N LAKE	BLVD	SEBRING	33872	$ 14,000
222	C04342808010500390	5148	TREVINO	AVE	SEBRING	33872	$ 14,000
223	C04342808010300210	7900	TREVINO	AVE	SEBRING	33872	$ 14,000
224	C04342811019100260	5840	VIRTUDES	ST	SEBRING	33872	$ 14,000
225	C04342811019100440	5524	VIRTUDES	ST	SEBRING	33872	$ 14,000
226	C04342811020100560	6237	VIRTUDES	ST	SEBRING	33872	$ 14,000
227	C04342811020400220	6505	VIRTUDES	ST	SEBRING	33872	$ 14,000
228	C04342811020700040	6642	VIRTUDES	ST	SEBRING	33872	$ 14,000
229	C04342811020700180	6856	VIRTUDES	ST	SEBRING	33872	$ 14,000
230	C04342811020800160	6548	VIRTUDES	ST	SEBRING	33872	$ 14,000

	ParcelNo	Address			City	Zip	Assessed Price
231	C04342810018200180	7240	VIRTUDES	ST	SEBRING	33872	$ 14,000
232	C04342811019100290	5818	VIRTUDES	ST	SEBRING	33872	$ 14,000
233	C04342811019000030	5819	VIRTUDES	ST	SEBRING	33872	$ 14,000
234	C04342811019000050	5741	VIRTUDES	ST	SEBRING	33872	$ 14,000
235	C04342811019100390	5638	VIRTUDES	ST	SEBRING	33872	$ 14,000
236	C04342811019100280	5826	VIRTUDES	ST	SEBRING	33872	$ 14,000
237	C04342811019100420	5602	VIRTUDES	ST	SEBRING	33872	$ 14,000
238	C04342811020300120	6316	VIRTUDES	ST	SEBRING	33872	$ 14,000
239	C04342811020400180	6541	VIRTUDES	ST	SEBRING	33872	$ 14,000
240	C04342811020400250	6421	VIRTUDES	ST	SEBRING	33872	$ 14,000
241	C04342811020700080	6738	VIRTUDES	ST	SEBRING	33872	$ 14,000
242	C04342811020800050	6418	VIRTUDES	ST	SEBRING	33872	$ 14,000
243	C04342811020800120	6522	VIRTUDES	ST	SEBRING	33872	$ 14,000
244	C04342811019700220	5967	VIRTUDES	ST	SEBRING	33872	$ 14,000
245	C04342811020800130	6530	VIRTUDES	ST	SEBRING	33872	$ 14,000
246	C04342811020800150	6542	VIRTUDES	ST	SEBRING	33872	$ 14,000
247	C04342811019100300	5806	VIRTUDES	ST	SEBRING	33872	$ 14,000
248	C04342811019100320	5734	VIRTUDES	ST	SEBRING	33872	$ 14,000
249	C04342811020100630	6135	VIRTUDES	ST	SEBRING	33872	$ 14,000
250	C04342811020300040	6204	VIRTUDES	ST	SEBRING	33872	$ 14,000
251	C04342811020300060	6224	VIRTUDES	ST	SEBRING	33872	$ 14,000
252	C04342811020800090	6438	VIRTUDES	ST	SEBRING	33872	$ 14,000
253	C04342811020800110	6516	VIRTUDES	ST	SEBRING	33872	$ 14,000
254	C04342811020100570	6225	VIRTUDES	ST	SEBRING	33872	$ 14,000
255	C04342811020700020	6624	VIRTUDES	ST	SEBRING	33872	$ 14,000
256	C04342811020700030	6636	VIRTUDES	ST	SEBRING	33872	$ 14,000
257	C04342811020800170	6552	VIRTUDES	ST	SEBRING	33872	$ 14,000
258	C04342811020800180	6556	VIRTUDES	ST	SEBRING	33872	$ 14,000
259	C04342811020100620	6147	VIRTUDES	ST	SEBRING	33872	$ 14,000
260	C04342811020300050	6216	VIRTUDES	ST	SEBRING	33872	$ 14,000
261	C04342811020400320	6315	VIRTUDES	ST	SEBRING	33872	$ 14,000
262	C04342811020700090	6742	VIRTUDES	ST	SEBRING	33872	$ 14,000
263	C04342811020700110	6802	VIRTUDES	ST	SEBRING	33872	$ 14,000
264	C04342811020800080	6432	VIRTUDES	ST	SEBRING	33872	$ 14,000
265	C04342811020800100	6504	VIRTUDES	ST	SEBRING	33872	$ 14,000
266	C04342811020300030	6160	VIRTUDES	ST	SEBRING	33872	$ 14,000
267	C04342811020700060	6716	VIRTUDES	ST	SEBRING	33872	$ 14,000
268	C04342811020700130	6826	VIRTUDES	ST	SEBRING	33872	$ 14,000
269	C04342811020800070	6428	VIRTUDES	ST	SEBRING	33872	$ 14,000
270	C04342811020800140	6536	VIRTUDES	ST	SEBRING	33872	$ 14,000
271	C04342811020100580	6217	VIRTUDES	ST	SEBRING	33872	$ 14,000
272	C04342811020300110	6310	VIRTUDES	ST	SEBRING	33872	$ 14,000
273	C04342811020400190	6535	VIRTUDES	ST	SEBRING	33872	$ 14,000
274	C04342811020400240	6429	VIRTUDES	ST	SEBRING	33872	$ 14,000
275	C04342811020400280	6347	VIRTUDES	ST	SEBRING	33872	$ 14,000
276	C04342811020700050	6704	VIRTUDES	ST	SEBRING	33872	$ 14,000

	ParcelNo	Address			City	Zip	Assessed Price
277	C04342811020700070	6730	VIRTUDES	ST	SEBRING	33872	$ 14,000
278	C04342811020800040	6410	VIRTUDES	ST	SEBRING	33872	$ 14,000
279	C04342811020800060	6422	VIRTUDES	ST	SEBRING	33872	$ 14,000
280	C04342811019600070	7815	VITTORIO	ST	SEBRING	33872	$ 14,000
281	C04342811019500870	7605	VITTORIO	ST	SEBRING	33872	$ 14,000
282	C04342811019600180	8025	VITTORIO	ST	SEBRING	33872	$ 14,000
283	C04342811019600130	7927	VITTORIO	ST	SEBRING	33872	$ 14,000
284	C04342811019600150	8001	VITTORIO	ST	SEBRING	33872	$ 14,000
285	C04342811019600170	8017	VITTORIO	ST	SEBRING	33872	$ 14,000
286	C04342811019600140	7939	VITTORIO	ST	SEBRING	33872	$ 14,000
287	C04342811019600160	8009	VITTORIO	ST	SEBRING	33872	$ 14,000
288	C04342811020000090	7806	WYNN	ST	SEBRING	33872	$ 14,000
289	C04342811020100230	7926	YUMURI	ST	SEBRING	33872	$ 14,000
290	C04342811020100220	7918	YUMURI	ST	SEBRING	33872	$ 14,000
291	C04342811020100250	8016	YUMURI	ST	SEBRING	33872	$ 14,000
292	C04342811020000290	7917	YUMURI	ST	SEBRING	33872	$ 14,000
293	C04342811020100190	7858	YUMURI	ST	SEBRING	33872	$ 14,000
294	C04342811020100370	7901	ZAMBRANA	ST	SEBRING	33872	$ 14,000
295	C04342811020200080	7814	ZAMBRANA	ST	SEBRING	33872	$ 14,000
296	C04342811020200090	7828	ZAMBRANA	ST	SEBRING	33872	$ 14,000
297	C04342811020100340	7939	ZAMBRANA	ST	SEBRING	33872	$ 14,000
298	C04342811020100520	7611	ZAMBRANA	ST	SEBRING	33872	$ 14,000
299	C04342811020200050	7722	ZAMBRANA	ST	SEBRING	33872	$ 14,000
300	C04342811020200190	8026	ZAMBRANA	ST	SEBRING	33872	$ 14,000
301	C04342811020100330	8003	ZAMBRANA	ST	SEBRING	33872	$ 14,000
302	C04342811020200110	7844	ZAMBRANA	ST	SEBRING	33872	$ 14,000
303	C04342811020200430	7600	ZAMBRANA	ST	SEBRING	33872	$ 14,000
304	C04342811020100290	8047	ZAMBRANA	ST	SEBRING	33872	$ 14,000
305	C04342811020100310	8029	ZAMBRANA	ST	SEBRING	33872	$ 14,000
306	C04342811020100480	7639	ZAMBRANA	ST	SEBRING	33872	$ 14,000
307	C04342811020200150	7924	ZAMBRANA	ST	SEBRING	33872	$ 14,000
308	C04342811020200170	8000	ZAMBRANA	ST	SEBRING	33872	$ 14,000
309	C04342811020100320	8015	ZAMBRANA	ST	SEBRING	33872	$ 14,000
310	C04342811020100490	7631	ZAMBRANA	ST	SEBRING	33872	$ 14,000
311	C04342811020100360	7913	ZAMBRANA	ST	SEBRING	33872	$ 14,000
312	C04342811020100500	7623	ZAMBRANA	ST	SEBRING	33872	$ 14,000
313	C04342811020200100	7836	ZAMBRANA	ST	SEBRING	33872	$ 14,000
314	C04342811020200200	8038	ZAMBRANA	ST	SEBRING	33872	$ 14,000
315	C04342808010000190	7942	ZAMORA	AVE	SEBRING	33872	$ 14,000
316	C22373060002600040	258	HIGHLANDS	BLVD	LAKE PLACID	33852	$ 39,950
317	S33342907000000560	4716	FOURTH	ST	SEBRING	33870	$ 1,790
	Total						$ 4,466,840

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER: **J.D. Langford, P.E., County Engineer**

SUBJECT/TITLE: **Request adoption of Resolution 23-24-49 to establish a public hearing date of March 19, 2024, to discuss and consider closing the platted portion of roadway name Hickory Street (Currently Abilene Street).**

STATEMENT OF ISSUE

Attached is Resolution 23-24-49 to set a public hearing date as March 19, 2024, for the Board to discuss and consider vacating that portion of road more particularly described as:
THAT PORTION OF HICKORY STREET (CURRENTLY ABILENE STREET) LYING BETWEEN BLOCKS 2 AND 3, BEING BOUNDED ON THE SOUTH BY SEABOARD AIRLINE RAILROAD (CURRENTLY CSX TRANSPORTATION RAILROAD) AND BOUNDED ON THE NORTH BY THE WESTERLY PROLONGATION OF THE NORTH BOUNDARY OF SAID BLOCK 3, ALL AS SHOWN ON THE PLAT OF HICKORY VILLA, RECORDED IN PLAT BOOK 8, PAGE 47 OF THE PUBLIC RECORDS OF HIGHLANDS COUNTY, FLORIDA.
Such resolution is a necessary procedure of the Board's policy for a road closing in addition to being a statutory requirement.

RECOMMENDED ACTION

Move to adopt Resolution 23-24-49 to set a Public Hearing Date for March 19, 2024, to discuss and consider the request to close the platted roadway Hickory Street (Currently Abilene Street).

FISCAL IMPACT

There is no fiscal impact.

Attachments: Resolution 23-24-49 Roadway closure request.Golden Key - Hickory Street - Currently Abilene St.sgs.pdf

RESOLUTION NO. 23-24-49

A RESOLUTION OF HIGHLANDS COUNTY, FLORIDA PERTAINING TO THE REQUEST BY GOLDEN KEY WAREHOUSE, LLC, AND SERAFIN CORTES, JR., AND ELIZABETH RULLAN ARCELAY TO VACATE A CERTAIN PLATTED COUNTY ROADWAY; PROVIDING FOR LEGISLATIVE FINDINGS AND INTENT; PROVIDING FOR NOTICE OF PUBLIC HEARING TO CONSIDER ROAD VACATION; PROVIDING FOR THE IMPLEMENTATION OF ADMINISTRATIVE ACTIONS; PROVIDING A SAVINGS CLAUSE; PROVIDING FOR SCRIVENER'S ERRORS; PROVIDING FOR CONFLICTS; PROVIDING FOR SEVERABILITY; AND PROVIDING AN EFFECTIVE DATE.

WHEREAS, pursuant to Florida Statues, Section 336.09, Highlands County is empowered, among other actions, to vacate, abandon, discontinue and close any existing street, road, highway or other place used for travel, or any portion thereof; and

WHEREAS, the County has received a Petition, attached as **Exhibit "A"**, from Golden Key Warehouse, LLC, and Serafin Cortes, Jr., and Elizabeth Rullan Arcelay, requesting to close a certain platted roadway under the control of Highlands County; and

WHEREAS, Florida Statutes, Section 336.09, requires that the County adopt a resolution declaring the time and place that it will hold a public hearing for the purpose of considering the requested roadway closure.

NOW, THEREFORE, BE IT RESOLVED BY HIGHLANDS COUNTY AS FOLLOWS:

SECTION 1. Legislative Findings and Intent. Highlands County has complied with all requirements and procedures of Florida law in processing this Resolution. The above recitals are hereby adopted.

SECTION 2. Notice of Public Hearing to Consider Road Vacation. A public hearing shall be held on **Tuesday, March 19, 2024, at 9:00 a.m.**, or as soon thereafter as possible, for the Highlands County Board of County Commissioners to consider the petition to vacate that roadway described as follows:

THAT PORTION OF HICKORY STREET (CURRENTLY ABILENE STREET) LYING BETWEEN BLOCKS 2 AND 3, BEING BOUNDED ON THE SOUTH BY SEABOARD AIRLINE RAILROAD (CURRENTLY CSX TRANSPORTATION RAILROAD) AND BOUNDED ON THE NORTH BY THE WESTERLY PROLONGATION OF THE NORTH BOUNDARY OF SAID BLOCK 3, ALL AS SHOWN ON THE PLAT OF HICKORY VILLA, RECORDED IN PLAT BOOK 8, PAGE 47 OF THE PUBLIC RECORDS OF HIGHLANDS COUNTY, FLORIDA.

SECTION 3. Implementation of Administrative Actions. The County Administrator is hereby authorized and directed to take such actions as deemed necessary and appropriate in order to implement the provisions of this Resolution. The County Administrator may, as deemed appropriate, necessary and convenient, delegate the powers of implementation as herein set forth to such County employees as deemed effectual and prudent.

SECTION 4. Savings Clause. All prior actions of Highlands County pertaining to the request by Golden Key Warehouse, LLC, and Serafin Cortes, Jr., and Elizabeth Rullan Arcelay to close the platted roadway described herein, which is the subject of this Resolution, as well as any and all matters relating thereto, are hereby ratified and affirmed consistent with the provisions of this Resolution.

SECTION 5. Scrivener's Errors. Typographical errors and other matters of a similar nature that do not affect the intent of this Resolution, as determined by the County Administrator and County Attorney, may be corrected.

SECTION 6. Conflicts. All Resolutions or parts of Resolutions in conflict with any of the provisions of this Resolution are hereby repealed.

SECTION 7. Severability. If any Section or portion of a Section of this Resolution proves to be invalid, unlawful, or unconstitutional, it shall not be held to invalidate or impair the validity, force, or effect of any other Section or part of this Resolution.

SECTION 8. Effective Date. This Resolution shall become effective immediately upon its passage and adoption.

PASSED AND ADOPTED this 6th day of February 2024.

HIGHLANDS COUNTY BOARD OF COUNTY COMMISSIONERS

By:

_____

Kevin J. Roberts, Chairperson

ATTEST:

_____

Jerome Kaszubowski, Clerk of Court

EXHIBIT “A”
Request for Roadway Closure

PETITION

TO: HIGHLANDS COUNTY
BOARD OF COUNTY
COMMISSIONERS C/O
ENGINEERING DEPARTMENT
505 SOUTH COMMERCE
AVENUE SEBRING, FLORIDA
33870

FROM: Golden Key Warehouse, LLC

1079 S. Memorial Dr., Suite 1

Avon Park, Florida 33825

This is to Petition the Board of County Commissioners to consider vacating a road, as shown on the attached map, legal description as follows:

That portion of Hickory Street (currently Abilene Street) lying between Blocks 2 and 3, being bounded on the South by Seaboard Airline Railroad (currently CSX Transportation Railroad) and bounded on the North by the Westerly prolongation of the North boundary of said Block 3, all as shown on the plat of HICKORY VILLA, recorded in Plat Book 8, Page 47 of the Public Records of Highlands County, Florida.

The petition is being requested for the following reason:

The right-of-way is substandard in width being only 50' where the County minimum is 60', so the county would have to acquire 10 additional feet on either side of the properties. One of the properties has existing warehouses on it and it would put the required setbacks to the warehouse out of compliance.

I will publish the Notice of Public Hearing in not less than two weekly issues of a newspaper of general circulation in Highlands County prior to the date stated therein for such hearing and will have proof of publication in your office prior to the date of hearing.

Signature of Petitioner

Attachments: (MAP)
Proof of Publication
Certificates Showing Taxes Paid

PETITION

TO: HIGHLANDS COUNTY
BOARD OF COUNTY
COMMISSIONERS C/O
ENGINEERING DEPARTMENT
505 SOUTH COMMERCE
AVENUE SEBRING, FLORIDA
33870

FROM: Serafin Cortes, Jr. and Elizabeth Rullan Arcelay

3509 Village Road

Sebring, Florida 33872

This is to Petition the Board of County Commissioners to consider vacating a road, as shown on the attached map, legal description as follows:

That portion of Hickory Street (currently Abilene Street) lying between Blocks 2 and 3, being bounded on the South by Seaboard Airline Railroad (currently CSX Transportation Railroad) and bounded on the North by the Westerly prolongation of the North boundary of said Block 3, all as shown on the plat of HICKORY VILLA, recorded in Plat Book 8, Page 47 of the Public Records of Highlands County, Florida.

The petition is being requested for the following reason:

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Signature of Petitioner

Attachments: (MAP)
Proof of Publication
Certificates Showing Taxes Paid

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: Feb 6, 2024

PRESENTER:	**Tanya Cannady, Business Services Director** **David Nitz, OMB Manager**
SUBJECT/TITLE:	**Request approval for the renewal agreement for financial advisory services with PFM Financial Advisors LLC.**

STATEMENT OF ISSUE

Whereas the previous agreement expired on November 6, 2023 and a request for approval to continue the Board's relationship with Public Financial Management, Inc. as its financial advisors for current and long term operations and capital financing needs as deemed necessary and that both parties hereto desire to enter into a new agreement (Amendment 1) based on substantially similar terms.

RECOMMENDED ACTION

Move to approve the renewal agreement for financial advisory services with PFM Financial Advisors LLC.

FISCAL IMPACT

There is no fiscal impact by approving Amendment 1 to the piggyback agreement between Highlands County and PFM Financial Advisors, LLC unless the county determines there is a need to request their services.

Attachments: PFM Financial Advisors.Amendment1 2024 (unexecuted).pdf

AMENDMENT 1 TO PIGGYBACK AGREEMENT
BETWEEN HIGHLANDS COUNTY AND
PFM FINANCIAL ADVISORS, LLC

THIS AMENDMENT is made by and between Highlands County, a political subdivision of the State of Florida, 600 South Commerce Avenue, Sebring, Florida 33870, hereinafter referred to as "COUNTY" and PFM Financial Advisors, LLC, 300 South Orange Avenue, Suite 1170, Orlando, Florida 32801, hereinafter referred to as "CONTRACTOR".

WITNESSETH:

WHEREAS, on January 4, 2019, the COUNTY executed an agreement with PFM Financial Advisors, LLC, to provide Financial Advisor Services ("Piggyback Agreement") pursuant to that Request for Proposals #17-52, issued by Bay County and the agreement negotiated therefor ("Cooperative Contract"); and

WHEREAS, the original term of the Cooperative Contract expired on November 7, 2022; and

WHEREAS, Bay County and the Contractor agreed to extend the term of the Cooperative Contract through November 6, 2023, and again through November 6, 2024; and

WHEREAS, the County has determined that it is in the best interest of the citizens of Highlands County for it to further extend the term of its Piggyback Agreement with the Contractor.

NOW, THEREFORE, in consideration of the mutual covenants, terms and provisions contained herein, and for other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the Agreement between the COUNTY and the CONTRACTOR is amended as follows:

1. Paragraph D, Term, of the Piggyback Agreement is hereby amended to extend the term of the Agreement through November 6, 2024.

2. Paragraph I, Resolution of Claims or Disputes, of the Piggyback Agreement is hereby removed in its entirety.

3. The Piggyback Agreement is hereby amended to include the following additional conditions:

A. **EMPLOYMENT ELIGIBILITY VERIFICATION (E-VERIFY).** Pursuant to Florida Statutes, Section 448.095, the Contractor shall be registered with and utilize the U.S. Department of Homeland Security's E-Verify system to verify the employment eligibility status of all employees performing work under this Agreement as well as all newly hired employees. In addition, the Contractor shall require any and all subcontractors performing work in accordance with this Agreement to

register with and utilize the U.S. Department of Homeland Security's E-Verify system to verify the employment eligibility status of all employees performing work under this Agreement as well as all newly hired employees. Any such subcontractor shall provide an affidavit to the Contractor stating that the subcontractor does not employ, contract with or subcontract with any ineligible individuals and the Contractor must keep a copy of said affidavit for the duration of this Agreement. Violation of this section is subject to immediate termination of this Agreement by the County without regard to any notice otherwise required herein. In the event the County incurs costs as a result of the Contractor's breach of this provision, any and all such costs shall be paid by the Contractor immediately upon receipt of notice of the same from the County. Information on registration for and use of the E-Verify Program may be obtained at the Department of Homeland Security website: http://www.dhs.gov/E-Verify.

B. **SOVEREIGN IMMUNITY.** The County expressly retains all rights, benefits and immunities of sovereign immunity in accordance with Section 768.28, Florida Statutes. Notwithstanding anything set forth in any section, article or paragraph of this Agreement to the contrary, nothing in this Agreement shall be deemed as a waiver of sovereign immunity or limits of liability which may have been adopted by the Florida Legislature or may be adopted by the Florida Legislature, and the cap on the amount and liability of the County for damages, attorney fees and costs, regardless of the number or nature of claims in tort, equity or contract, shall not exceed the dollar amount set by the Florida Legislature for tort. Nothing in this Agreement shall inure to the benefit of any third party for the purpose of allowing any claim against the County which would otherwise be barred under the Doctrine of Sovereign Immunity or operation of law. This section shall not limit any remedies as specifically contained in this Agreement.

C. **FUND AVAILABILITY AND USE OF CONTRACTOR.** Services to be performed in accordance with this Agreement are subject to the annual appropriation of funds by the County. In its sole discretion, the County reserves the right to forego use of the Contractor for any project which may fall within the scope of services listed herein.

4. This document may be executed in multiple counterparts, each one of which shall be deemed an original, but all of which together shall constitute the same document. Electronic signatures shall be valid and sufficient to bind any party to this document. Signatures to this document transmitted by email or other electronic transmission (for example, through the use of a Portable Document Format or "pdf" file) shall be valid and effective to bind the party so signing. All such signatures will be deemed to be original signatures for all purposes.

5. All of the terms and conditions of the original Piggyback Agreement, or any modification thereof shall remain in full force and effect, and to the extent of any conflict between this Amendment and the original Agreement, or any modification thereof, this Amendment shall prevail.

IN WITNESS WHEREOF, the parties hereto, by their duly authorized representatives, have executed this Amendment effective the _____day of _, 2024.

HIGHLANDS COUNTY

_____
Kevin J. Roberts, Chairman

ATTEST:

_____
Jerome Kaszubowski, Clerk

CONTRACTOR

By: _____
Print: _____
Title: _____

STATE OF _____
COUNTY OF _____

The foregoing instrument was acknowledged before me by means of [ ] physical presence or [ ] online notarization of _____ as _____ of _____, who personally swore or affirmed that he/she is authorized to execute this Agreement and thereby bind the Contractor, and who is personally known to me or who produced _____ as identification, and who did/did not take an oath this ____day of _____, 2024.

(stamp)

_____
NOTARY PUBLIC

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER: **Jonathan Harrison, Road & Bridge Director**

SUBJECT/TITLE: **Request approval of the elimination of the Mechanic I job description and revision of the Mechanic II job description.**

STATEMENT OF ISSUE

Due to the pending retirement/resignation of the only active employee within that lone position, we are taking this opportunity to upgrade the Mechanic I position to the Mechanic II designation and retain the same responsibilities and duties as they are identical to the Mechanic II. Also, we are making a revision of the Mechanic II job description to reflect the current needs and requirements of the Department. Included is the revised job description of the Mechanic II with the categories highlighted that received revisions. Adequate funds are currently budgeted for the single Mechanic I position to be upgraded. Also, the incoming employee will be hired at a salary less than the tenured, retiring employee so no additional funds will be expended.

RECOMMENDED ACTION

Move to approve the elimination of the Mechanic I job description and revision of the Mechanic II job description.

FISCAL IMPACT

The fiscal impact is an increase of $6,019.19 to Fund 110 to reflect the difference in pay grade. Funds for this revision are already budgeted within Fund 110/Cost Center 4102 to accommodate the increase.

Attachments: Mechanic II (0961) 2.6.2024.pdf
Mechanic I (0960) ELIMINATION.pdf

HIGHLANDS COUNTY BOARD OF COUNTY COMMISSIONERS
JOB DESCRIPTION

REGULAR ☒ **SENIOR MANAGEMENT SERVICE** ☐ **OPS/OTHER** ☐ _____

POSITION INFORMATION

Position Type
Admin ☐ **Director** ☐ **Manager** ☐ **Supervisor** ☐ **Non-Supervisor** ☒

Job Title: Mechanic II	**Division**: Road & Bridge	**Department:** Maint Shop/Warehouse	**Cost Center:** 4104
Job Code: 0961	**Pay Grade**: 108	**Pay Band:** $37,530.61 - $56,295.92	**FTE**: 1.0
Included/Exempt: Included	**Type of Transaction**:		
EMPLOYEE:	**Special Risk**: Yes ☐ No ☒	**Overtime**: Yes ☒ No ☐	

1. This position reports directly to: Job Title Mechanic Shop Supervisor Job Code 1207 Pay Grade 114

2. Job Title, Job Code, and Pay Grade of each position which reports directly to this position:

POSITION DUTIES & RESPONSIBILITIES

General Description:

This is a highly skilled position responsible for the maintenance and repair of automotive, construction and other public works fleet equipment.

Essential Job Functions:

The following statements describe the principal functions of the job and its scope of responsibility but should not be considered an all-inclusive list of work requirements. Individuals may perform other duties as assigned.

- Responsible for all routine services and preventative maintenance on most light duty passenger vehicles.
- May be required to diagnose and repair trucks, bulldozers, graders and other equipment.
- Communicates the need to repair or replace engines and transmissions in light duty passenger vehicles and/or heavy construction equipment.
- Rebuilds, repairs and installs electrical automotive apparatus, voltage regulators and other special equipment. Repairs hydraulic systems.
- Diagnoses and replaces defective components to include brakes, axles, electrical parts, driveline components, engine components, etc.
- Prepares records and reports on work accomplished in a timely manner to be entered into the Work Order Program.
- Provides general assistance to other mechanics when required.
- Serves as the fuel truck operator.
- Responds productively to change and performs all other related tasks as required and as directed.
- Maintains a professional and safe unit and work area adhering to established safety policies and the image desired for the organization.
- Consistently follows Board policies and procedures.
- Responds productively to change and performs all other related tasks as directed.

Knowledge, Skills, and Abilities:

- Knowledge of the methods, materials, tools and standard practices of the automotive mechanics trades.
- Knowledge of the occupational hazards and safety precautions of the trade.
- Knowledge of the operating and repair characteristics of a wide variety of public works equipment.
- Knowledge of automotive electrical systems.
- Skill in the use of tools, machines and testing instruments of the trade.
- Ability to diagnose troubles in automotive and other public works equipment.
- Ability to understand and communicate oral and written instructions.
- Ability to follow automotive diagrams.
- Ability to maintain effective working relationships with co-workers, supervisors, managers, directors, Elected Officials, vendors, and the general public.

Physical Skills:

Must be able to remain in a stationary position for 10% of the time. Frequently operates various types of equipment to include, but not limited to hand and power tools. Frequently ascends/descends stairs, ladders and scaffolding. The person in this position frequently communicates with the public, vendors and co-workers. Must be able to exchange accurate information in these situations. Frequently moves materials and office equipment weighing up to 40 lbs. Occasionally works in outdoor weather conditions. Operates motor vehicle for up to eight (8) hours; of which four (4) may be continuous. Must be able to frequently position self to work under or around various items to perform maintenance tasks. Constantly inspects and assesses equipment, buildings and materials to complete daily tasks. Frequent exposure to moderately high noise levels. Frequently works indoor in an automotive repair shop. Potential exposure to chemicals associated with automotive exhaust and automotive repair in general.

MINIMUM QUALIFICATIONS

Education & Experience:

Degree Required: Yes ☒ No ☐ If yes: High School Diploma/GED ☒ Associates ☐ Bachelors ☐ Masters ☐ Doctorate ☐
Experience:

Graduation from an accredited high school or possession of an acceptable equivalent diploma. Four (4) years of Journeyman level experience as a mechanic.

Licenses, Certifications, or Registrations:

Must possess and maintain a Florida Commercial Driver's License (CDL), Class B with no restrictions. Must possess a H-HazMat and N-Tanker endorsement.

Other job related requirements:

Disaster Essential.

Working hours: (A) Daily from to (B) Total hours in workweek 40 hours (C) (split shift, rotation, etc.)

I confirm I have read the above job description, fully understand the requirements of the job, and agree that I have the ability to perform my duties accordingly.

Employee Signature:		Date:
Discussed with Employee: Yes ☐ No ☐ Supervisor/Director Signature:	Title:	Date:

Internal Use Only:

Check those that apply: Uniforms ☒ Drug Screening ☐ Background Check ☒ Background & fingerprint required ☐ Cell Phone ☐ Vehicle ☐ Other:

Approval of Human Resources:	Title: Human Resources Manager	Date:

HIGHLANDS COUNTY BOARD OF COUNTY COMMISSIONERS
JOB DESCRIPTION

REGULAR ☒ **SENIOR MANAGEMENT SERVICE** ☐ **OPS/OTHER** ☐ _____

POSITION INFORMATION

Position Type
Admin ☐ **Director** ☐ **Manager** ☐ **Supervisor** ☐ **Non-Supervisor** ☒

Job Title: Mechanic I	**Division**: Road & Bridge	**Department:** Maint Shop/Warehouse	**Cost Center:** 4104
Job Code: 0960	**Pay Grade**: 105	**Pay Band:** $31,511.42 - $47,267.14	**FTE**: 1.0
Included/Exempt: Included	**Type of Transaction**:		
EMPLOYEE:	**Special Risk**: Yes ☐ No ☒	**Overtime**: Yes ☒ No ☐	

1. This position reports directly to: Job Title Mechanic Shop Supervisor Job Code 1207 Pay Grade 114

2. Job Title, Job Code, and Pay Grade of each position which reports directly to this position:

POSITION DUTIES & RESPONSIBILITIES

General Description:

This is a highly skilled position responsible for the maintenance and repair of automotive, construction and other public works fleet equipment.

Essential Job Functions:

The following statements describe the principal functions of the job and its scope of responsibility but should not be considered an all-inclusive list of work requirements. Individuals may perform other duties as assigned.

- Responsible for all routine services and preventative maintenance on most light duty passenger vehicles.
- May be required to diagnose and repair trucks, bulldozers, graders and other equipment.
- Communicates the need to repair or replace engines and transmissions in light duty passenger vehicles and/or heavy construction equipment.
- Rebuilds, repairs and installs electrical automotive apparatus, voltage regulators and other special equipment. Repairs hydraulic systems.
- Diagnoses and replaces defective components to include brakes, axles, electrical parts, driveline components, engine components, etc.
- Prepares records and reports on work accomplished in a timely manner to be entered into the Work Order Program.
- Provides general assistance to other mechanics when required.
- Responds productively to change and performs all other related tasks as required and as directed.
- Maintains a professional and safe unit and work area adhering to established safety policies and the image desired for the organization.
- Consistently follows Board policies and procedures.
- Responds productively to change and performs all other related tasks as directed.

Knowledge, Skills, and Abilities:

- Knowledge of the methods, materials, tools and standard practices of the automotive mechanics trades.
- Knowledge of the occupational hazards and safety precautions of the trade.
- Knowledge of the operating and repair characteristics of a wide variety of public works equipment.
- Knowledge of automotive electrical systems.
- Skill in the use of tools, machines and testing instruments of the trade.
- Ability to diagnose troubles in automotive and other public works equipment.
- Ability to understand and communicate oral and written instructions.
- Ability to follow automotive diagrams.
- Ability to maintain effective working relationships with co-workers, supervisors, managers, directors, Elected Officials, vendors, and the general public.

Physical Skills:

Must be able to remain in a stationary position for 10% of the time. Frequently operates various types of equipment to include, but not limited to hand and power tools. Frequently ascends/descends stairs, ladders and scaffolding. The person in this position frequently communicates with the public, vendors and co-workers. Must be able to exchange accurate information in these situations. Frequently moves materials and office equipment weighing up to 40 lbs. Occasionally works in outdoor weather conditions. Operates motor vehicle for up to eight (8) hours; of which four (4) may be continuous. Must be able to frequently position self to work under or around various items to perform maintenance tasks. Constantly inspects and assesses equipment, buildings and materials to complete daily tasks. Frequent exposure to moderately high noise levels. Frequently works indoor in an automotive repair shop. Potential exposure to chemicals associated with automotive exhaust and automotive repair in general.

MINIMUM QUALIFICATIONS

Education & Experience:

Degree Required: Yes ☒ No ☐ If yes: High School Diploma/GED ☒ Associates ☐ Bachelors ☐ Masters ☐ Doctorate ☐
Experience:

Graduation from an accredited high school or possession of an acceptable equivalent diploma. Two (2) years of Journeyman level experience as a mechanic.

Licenses, Certifications, or Registrations:

Possession of a valid Florida Commercial Drivers License, Class B, by the end of the probationary period.

Other job related requirements:

Disaster Essential.

Working hours: (A) Daily from to (B) Total hours in workweek 40 hours (C) (split shift, rotation, etc.)

I confirm I have read the above job description, fully understand the requirements of the job, and agree that I have the ability to perform my duties accordingly.

Employee Signature:		Date:
Discussed with Employee: Yes ☐ No ☐ Supervisor/Director Signature:	Title:	Date:

Internal Use Only:

Check those that apply: Uniforms ☒ Drug Screening ☐ Background Check ☒ Background & fingerprint required ☐ Cell Phone ☐ Vehicle ☐ Other:

Approval of Human Resources:	Title: Human Resources Manager	Date:

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2023

PRESENTER: **Eric Longshore, Building Official**

SUBJECT/TITLE: **Request approval of Budget Amendment 23-24-044 to add additional funding to the Nuisance Abatement Cost Center from Reserve for Contingency.**

STATEMENT OF ISSUE

This Budget Amendment is requesting to add funds in the amount of $61,700.00 from Reserve for Contingency to Nuisance Abatement. Code Enforcement has performed 14 abatement cases to clean up the community in the first quarter of 2024, in accordance with magistrate hearings and orders. Based on the number of abatement cases in the first quarter, Code Enforcement is projecting a need of $61,700.00 for the balance of the fiscal year. The Contractual Services account in the Nuisance Abatement cost center is depleted. Additional funds will allow continued cleanup of nuisances for the next three quarters.

RECOMMENDED ACTION

Move to approve Budget Amendment 23-24-044 to add additional funding to the Nuisance Abatement Cost Center from Reserve for Contingency.

FISCAL IMPACT

The fiscal impact is a decrease to the reserves for contingency cost center 9990 of $61,700.00 and an increase to Nuisance Abatement cost center 6306 of $61,700.00 for a net fiscal impact of $0.00.

Attachments: 23-24-044 Nuisance Abatement Add'l Funding_Reserve (BA).pdf
23-24-044 Nuisance Abatement Add'l Funding (Reserve).pdf

REVIEWED
O.M.B DEPARTMENT
January 22, 2024
BOARD OF COUNTY COMMISSIONERS
HIGHLANDS COUNTY FLORIDA

BOARD OF COUNTY COMMISSIONERS

BUDGET AMENDMENTS
(Transfers over $5,000 require Board approval)

DATE: **1/12/2024** SUBMITTED BY: **Beverly Singley**

FUND(S): **005** FUND TITLE(S): **General** COST CENTER(S) #: **6306, 9990**

PROJECT(S) #: _____ PROJECT TITLE(S): _____ COST CENTER TITLE(S): **Nuisance Abatement, Budgetary Expenditure AC/005**
*list additional cost centers on reverse side of form

TYPE	FUND	COST CENTER	ACCOUNT	ACCOUNT NAME	ACTIVITY	BUDGET	INCREASE	DECREASE	REVISED BUDGET
E	**005**	**6306**	**53400**	**Contractual Services**		**34,875.00**	**61,700.00**		**96,575.00**
E	**005**	**9990**	**59900**	**Reserve for Contingency**		**405,107.00**		**61,700.00**	**343,407.00**
									0.00
									0.00
									0.00
									0.00
									0.00

REASON: **Code Enforcement has preformed 14 abatement cases in the first quarter, depleating the Contractual Services account in the Nusiance Abatement cost center. Additional funds will allow continued cleanup of nusiances for next 3 quarters in FY 23-24.**

OFFICE USE ONLY

OMB RECOMMENDATION:

_____ Approval

_____ Denial

REQUEST # **23-24-044**

ACTION:
Board _____ Approved _____ Denied
County Administrator _____ Approved _____ Denied

SIGNATURE: _____

DATE: ____ / ____ / ____

Signature: _____

TRANSFER TYPE:

_____ ITEM TO ITEM
XX RESERVE
_____ BY RESOLUTION
_____ SUPPLEMENTAL BUDGET

Posted by Clerk: _____

Form Revised 08/05/2020

HIGHLANDS COUNTY
BOARD OF COUNTY COMMISSIONERS
RESERVE FOR CONTINGENCY ADJUSTMENTS

GENERAL FUND - 005 (9990)

FISCAL YEAR 2023-2024

DATE INTENDED	BCC APPROVED	B.A.#	AMOUNT	BALANCE	DESCRIPTION
10/01/23		BEGINNING BALANCE		**$450,000.00**	
10/03/23	10/03/23	23-24-004	($50,311.00)	$399,689.00	To add funding for the Supervisor of Elections and Property Appraiser for salary/operating adjustments.
12/05/23	12/05/23	23-24-021	$30,418.00	$430,107.00	To add back budget funds due to the VOCA grant not requiring match funds for FY24.
01/18/24	01/18/24	23-24-033	($25,000.00)	$405,107.00	To fund Proj 23043 OSTDS Remediation Plan.
02/06/24		23-24-044	($61,700.00)	$343,407.00	To provide add'l funding for Nuisance Abatement cleanups.
REVISED TOTAL:				**$343,407.00**	

CONTINUED ON NEXT PAGE

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER: **Corey Amundsen, Emergency Management Manager**

SUBJECT/TITLE: **Request adoption of Resolution 23-24-59 for Budget Amendment 23-24-041 for the 2023-2024 Emergency Management Performance Grant (EMPG).**

STATEMENT OF ISSUE

The 2023-2024 Emergency Management Performance Grant (EMPG) is for $59,517. This is a recurring federal grant for Emergency Management to assist in operational funding. This grant is part of BASE grant funding for Emergency Management.

RECOMMENDED ACTION

Move to adopt Resolution 23-24-59 for Budget Amendment 23-24-041 for the 2023-2024 Emergency Management Performance Grant (EMPG).

FISCAL IMPACT

The fiscal impact will be an increase to Fund 005 (General) in the amount of $59,517 and is used to supplement cost center 3991 (Local Emergency Mgmt) expenditures.

Attachments: 23-24-041 Project 23015 EMPA 23-24 (Resolution).pdf
23-24-041 Project 23015 EMPA 23-24 (BA).pdf

RESOLUTION NO. 23-24-59

A RESOLUTION OF HIGHLANDS COUNTY, FLORIDA PERTAINING TO BUDGET AMENDMENT 23-24-041 TO THE GENERAL FUND; PROVIDING FOR LEGISLATIVE FINDINGS AND INTENT; PROVIDING FOR APPROVAL OF BUDGET AMENDMENT; PROVIDING FOR THE IMPLEMENTATION OF ADMINISTRATIVE ACTIONS; PROVIDING A SAVINGS CLAUSE; PROVIDING FOR SCRIVENER'S ERRORS; PROVIDING FOR CONFLICTS; PROVIDING FOR SEVERABILITY; AND PROVIDING AN EFFECTIVE DATE.

WHEREAS, Florida Statutes, Section 129.06, (Execution and Amendment of Budget) provides that the Board of County Commissioners may by resolution amend its budget; and

WHEREAS, Highlands County has determined that the following budget amendment is necessary and proper within the General Fund.

NOW, THEREFORE, BE IT RESOLVED BY HIGHLANDS COUNTY, FLORIDA AS FOLLOWS:

SECTION 1. **Legislative Findings and Intent.** Highlands County has complied with all requirements and procedures of Florida law in processing this Resolution. The above recitals are hereby adopted.

SECTION 2. **Approval of Budget Amendment.** Budget Amendment 23-24-041 is hereby approved and authorized to appropriate grant funds into Project 23015 - EMPG for the 2023/2024 Emergency Management Preparedness Base Grant Program that were awarded to Highlands County for an increase in the amount of $59,517.00.

SECTION 3. **Implementation of Administrative Actions.** The County Administrator is hereby authorized and directed to take such action as may be deemed necessary and appropriate in order to implement the provisions of this Resolution. The County Administrator may, as deemed appropriate, necessary and convenient, delegate the powers of implementation as herein set forth to such County employees as deemed effectual and prudent.

SECTION 4. **Savings Clause.** All prior actions of Highlands County pertaining to the budget amendment approved hereby, as well as any and all matters relating thereto, are hereby ratified and affirmed consistent with the provisions of this Resolution.

SECTION 5. **Scrivener's Errors.** Typographical errors and other matters of a similar nature that do not affect the intent of this Resolution, as determined by the County Administrator and County Attorney, may be corrected.

SECTION 6. **Conflicts.** All Resolutions or parts of Resolutions in conflict with any of the provisions of this Resolution are hereby repealed.

SECTION 7. **Severability.** If any Section or portion of a Section of this Resolution proves to be invalid, unlawful, or unconstitutional, it shall not be held to invalidate or impair the validity, force, or effect of any other Section or part of this Resolution.

SECTION 8. **Effective Date.** This Resolution shall take effect immediately upon adoption.

PASSED AND ADOPTED this 6th day of February 2024.

HIGHLANDS COUNTY, FLORIDA

By:_____
Kevin J. Roberts, Chairperson

ATTEST:

_____
Jerome Kaszubowski, Clerk of Court

REVIEWED
O.M.B DEPARTMENT
January 04, 2024
BOARD OF COUNTY COMMISSIONERS
HIGHLANDS COUNTY FLORIDA

BOARD OF COUNTY COMMISSIONERS

BUDGET AMENDMENTS
(Transfers over $5,000 require Board approval)

DATE: **12/22/2023** SUBMITTED BY: **C.Amundsen**

FUND(S): **005** FUND TITLE(S): **General** COST CENTER(S) #: **3991**

PROJECT(S) #: **23015** PROJECT TITLE(S): **EMPG FY 23-24** COST CENTER TITLE(S): **Emergency Management**
*list additional cost centers on reverse side of form

TYPE	FUND	COST CENTER	ACCOUNT	ACCOUNT NAME	ACTIVITY	BUDGET	INCREASE	DECREASE	REVISED BUDGET
R	005		3312550Z	Proj Emerg Mgmt Prepare - F		58,752.00		58,752.00	0.00
E	005	3991	51200	Regular Salaries & Wages		278,593.00		58,752.00	219,841.00
R	005		3312550Z	Proj Emerg Mgmt Prepare - F	23015	0.00	59,517.00		59,517.00
E	005	3991	51200Z	Project Regular Salaries & Wages	23015	0.00	42,214.54		42,214.54
E	005	3991	52100Z	Project FICA Taxes	23015	0.00	2,590.53		2,590.53
E	005	3991	52200Z	Project Retirement Contributions	23015	0.00	11,004.35		11,004.35
E	005	3991	52300Z	Project Life & Health Insurance	23015	0.00	1,968.28		1,968.28
E	005	3991	52400Z	Project Workers Compensation	23015	0.00	1,739.30		1,739.30

REASON: **To revise the budget based on the correct amount to be reimbursed by the EMPA grant.**

OFFICE USE ONLY

OMB RECOMMENDATION:

_____ Approval

_____ Denial

REQUEST # **23-24-041**

ACTION:
Board _____ Approved _____ Denied
County Administrator _____ Approved _____ Denied

SIGNATURE: _____

DATE: ____/____/____

TRANSFER TYPE:

_____ ITEM TO ITEM
_____ RESERVE
XX BY RESOLUTION
_____ SUPPLEMENTAL BUDGET

Signature: _____

Posted by Clerk: _____

Form Revised 08/05/2020

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER: **Jonathan Harrison, Road and Bridge Director**

SUBJECT/TITLE: **Request adoption of Resolution 23-24-58 for Budget Amendment 23-24-045 to realign funds for Sun N Lake Preserve Improvements.**

STATEMENT OF ISSUE

Budget Amendment 23-24-045 is hereby approved and authorized to rollover project funds from Project 22052 Post Frame Buildings in the amount of $47,805.89 into Project #23016 Sun N Lake Preserve Improvements with a net fiscal impact of $0.00. The reason for the transference is so that the purchase of the Post Frame building for the Preserve can all be completed under the Preserve project with the remainder of the improvements.

RECOMMENDED ACTION

Move to adopt Resolution 23-24-58 for Budget Amendment 23-24-045 to realign funds for Sun N Lake Preserve Improvements.

FISCAL IMPACT

The net fiscal impact is an increase in the amount of $47,805.89 to Project #23016 (Sun N Lake Preserve Improvements).

Attachments: 23-24-045R Realign Funds to Proj 23016 SNL Preserve Improvements (Resolution).pdf
23-24-045 Realign Funds to Proj 23016 SNL Preserve Improvements (BA).pdf

RESOLUTION NO. 23-24-58

A RESOLUTION OF HIGHLANDS COUNTY, FLORIDA PERTAINING TO BUDGET AMENDMENT 23-24-045 TO THE LOCAL GOVT INFRASTRUCTURE SURTAX FUND; PROVIDING FOR LEGISLATIVE FINDINGS AND INTENT; PROVIDING FOR APPROVAL OF BUDGET AMENDMENT; PROVIDING FOR THE IMPLEMENTATION OF ADMINISTRATIVE ACTIONS; PROVIDING A SAVINGS CLAUSE; PROVIDING FOR SCRIVENER'S ERRORS; PROVIDING FOR CONFLICTS; PROVIDING FOR SEVERABILITY; AND PROVIDING AN EFFECTIVE DATE.

WHEREAS, Florida Statutes, Section 129.06, (Execution and Amendment of Budget) provides that the Board of County Commissioners may by resolution amend its budget; and

WHEREAS, Highlands County has determined that the following budget amendment is necessary and proper within the Local Govt Infrastructure Surtax Fund.

NOW, THEREFORE, BE IT RESOLVED BY HIGHLANDS COUNTY, FLORIDA AS FOLLOWS:

SECTION 1. **Legislative Findings and Intent.** Highlands County has complied with all requirements and procedures of Florida law in processing this Resolution. The above recitals are hereby adopted.

SECTION 2. **Approval of Budget Amendment.** Budget Amendment 23-24-045 is hereby approved and authorized to rollover project funds from Project 22052 Post Frame Buildings in the amount of $47,805.89 into Project #23016 Sun N Lake Preserve Improvements with a net fiscal impact of $0.00.

SECTION 3. **Implementation of Administrative Actions.** The County Administrator is hereby authorized and directed to take such action as may be deemed necessary and appropriate in order to implement the provisions of this Resolution. The County Administrator may, as deemed appropriate, necessary and convenient, delegate the powers of implementation as herein set forth to such County employees as deemed effectual and prudent.

SECTION 4. **Savings Clause.** All prior actions of Highlands County pertaining to the budget amendment approved hereby, as well as any and all matters relating thereto, are hereby ratified and affirmed consistent with the provisions of this Resolution.

SECTION 5. **Scrivener's Errors.** Typographical errors and other matters of a similar nature that do not affect the intent of this Resolution, as determined by the County Administrator and County Attorney, may be corrected.

SECTION 6. **Conflicts.** All Resolutions or parts of Resolutions in conflict with any of the provisions of this Resolution are hereby repealed.

SECTION 7. **Severability.** If any Section or portion of a Section of this Resolution proves to be invalid, unlawful, or unconstitutional, it shall not be held to invalidate or impair the validity, force, or effect of any other Section or part of this Resolution.

SECTION 8. **Effective Date.** This Resolution shall take effect immediately upon adoption.

PASSED AND ADOPTED this 6th day of February 2024.

HIGHLANDS COUNTY, FLORIDA

By: _____
Kevin J. Roberts, Chairperson

ATTEST:

_____
Jerome Kaszubowski, Clerk of Court

REVIEWED
O.M.B DEPARTMENT
January 22, 2024
BOARD OF COUNTY COMMISSIONERS
HIGHLANDS COUNTY FLORIDA

BOARD OF COUNTY COMMISSIONERS

BUDGET AMENDMENTS
(Transfers over $5,000 require Board approval)

DATE: **1/17/2024**

SUBMITTED BY: **Road and Bridge**

FUND(S): **151**

FUND TITLE(S): **Infrastructure Surtax**

COST CENTER(S) #: **4102A / 6303A**

PROJECT(S) #: **22052 / 23016**

PROJECT TITLE(S): **Post Frame Buildings / Sun N Lake Preserve Improvements**

COST CENTER TITLE(S): **Transportation Projects / Natural Resources 151**

*list additional cost centers on reverse side of form

TYPE	FUND	COST CENTER	ACCOUNT	ACCOUNT NAME	ACTIVITY	BUDGET	INCREASE	DECREASE	REVISED BUDGET
R	151		3999100Z	Project Fund Balance Forward	22052	84,373.08		47,805.89	36,567.19
E	151	4102A	56200Z	Project Buildings	22052	177,624.76		47,805.89	129,818.87
R	151		3999100Z	Project Fund Balance Forward	23016	0.00	47,805.89		47,805.89
E	151	6303A	56301Z	Project Capital Infrastructure	23016	240,000.00	47,805.89		287,805.89
									0.00
									0.00
									0.00

REASON: **To transfer funds from Project 22052 to Project 23016 Sun N Lake Preserve Improvements, Post Frame Building added.**

OFFICE USE ONLY

OMB RECOMMENDATION:

_____ Approval

_____ Denial

REQUEST # **23-24-045**

ACTION:

Board _____ Approved _____ Denied

County Administrator _____ Approved _____ Denied

SIGNATURE: _____

DATE: ____ / ____ / ____

TRANSFER TYPE:

_____ ITEM TO ITEM
_____ RESERVE
XX BY RESOLUTION
_____ SUPPLEMENTAL BUDGET

Signature: _____

Posted by Clerk: _____

Form Revised 08/05/2020

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER: **Jonathan Harrison, Road and Bridge Director**

SUBJECT/TITLE: **Request approval of Budget Amendment 23-24-047 to appropriate Road Reconstruct funds for Project #22082, #23019 and #23050.**

STATEMENT OF ISSUE

Budget Amendment 23-24-047 is hereby approved and authorized to appropriate additional funds from Project Improvements (Road Reconstruction) in the amount of $125,699.56 into Project #23019 Vale Ct and #22082 Jack Weisser Blvd to complete, and Project #23050 Maxanna Ave as an additional roadway needed on the Road Construction list, with a net fiscal impact of $0.00. The funding will be used to close out projects 23019, 22082 and create 23050.

RECOMMENDED ACTION

Move to approve Budget Amendment 23-24-047 to appropriate Road Reconstruct funds for Project #22082, #23019 and #23050.

FISCAL IMPACT

The net fiscal impact of $125,699.56 in Fund 151 (Infrastructure Surtax) is being transferred from cost center 4102A (Transportation Projects), account 56300Z (Project Improvements) to Project #23019 Vale Ct, #22082 Jack Weisser Blvd, and #23050 Maxanna Ave in the amounts of $69,071.00, $1,628.56, and $55,000.00, respectively for a net fiscal impact of $0.00.

Attachments: 23-24-047 Xfer Funds to Project 22082_23019_23050 (BA).pdf

REVIEWED
O.M.B DEPARTMENT
January 25, 2024
BOARD OF COUNTY COMMISSIONERS
HIGHLANDS COUNTY FLORIDA

BOARD OF COUNTY COMMISSIONERS

BUDGET AMENDMENTS
(Transfers over $5,000 require Board approval)

DATE: **1/24/2024**

SUBMITTED BY: **Road and Bridge**

FUND(S): **151**

FUND TITLE(S): **Local Govt Infrastructure Surtax**

COST CENTER(S) #: **4102A**

PROJECT(S) #: **22082, 23019, 23050**

PROJECT TITLE(S): **Jack Weisser Blvd, Vale Ct, Maxanna Ave**

COST CENTER TITLE(S): **Transportation Projects**

*list additional cost centers on reverse side of form

TYPE	FUND	COST CENTER	ACCOUNT	ACCOUNT NAME	ACTIVITY	BUDGET	INCREASE	DECREASE	REVISED BUDGET
E	**151**	**4102A**	**56300Z**	**Project Improvements**		**2,660,877.21**		**125,699.56**	**2,535,177.65**
E	**151**	**4102A**	**56301Z**	**Project Capital Infrastructure**	**22082**	**179,707.61**	**1,628.56**		**181,336.17**
E	**151**	**4102A**	**56301Z**	**Project Capital Infrastructure**	**23019**	**25,000.00**	**69,071.00**		**94,071.00**
E	**151**	**4102A**	**56301Z**	**Project Capital Infrastructure**	**23050**	**0.00**	**55,000.00**		**55,000.00**
									0.00
									0.00
									0.00
									0.00
									0.00
									0.00
									0.00

REASON: **Appropriate FY 23/24 CFS Road Reconstruction funds to complete existing projects and reconstruct additional roadways.**

OFFICE USE ONLY

OMB RECOMMENDATION:

_____ Approval

_____ Denial

REQUEST # **23-24-047**

ACTION:
Board _____ Approved _____ Denied
County Administrator _____ Approved _____ Denied

SIGNATURE: _____

DATE: ____/____/____

TRANSFER TYPE:

XX ITEM TO ITEM
_____ RESERVE
_____ BY RESOLUTION
_____ SUPPLEMENTAL BUDGET

Signature: _____

Posted by Clerk: _____

Form Revised 08/05/2020

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: Feb 6, 2024

PRESENTER:	**Tanya Cannady, Business Services Director**
SUBJECT/TITLE:	**Request adoption of Resolution 23-24-62 for budget amendment 23-24-049 to appropriate fund balance brought forward to provide additional funding to purchase adjacent office building.**

STATEMENT OF ISSUE

The county recently purchased the office building at 618 S. Commerce Ave., Sebring adjacent to the Government Center for future office space needs. The closing occurred on January 22, 2024, for the base purchase price of $280,000 but did not include closing costs. The closing cost were just under $4,000.

RECOMMENDED ACTION

Move to adopt Resolution 23-24-62 for budget amendment 23-24-049 to appropriate fund balance brought forward to provide additional funding to purchase adjacent office building.

FISCAL IMPACT

The fiscal impact is an increase to Fund 151 (Infrastructure Surtax) in the amount of $5,000 that is being appropriated to Project 23014 (County Expansion Office Bldg), cost center 2672A (Facilities Mgmt 151), account 56200Z (Project Buildings).

Attachments: 23-24-049 Proj 23014 Bldg Purchase Add'l Funding (BA).pdf
23-24-049R Proj 23014 Bldg Purchase Add'l Funding (Resolution).pdf

REVIEWED
O.M.B DEPARTMENT
January 26, 2024
BOARD OF COUNTY COMMISSIONERS
HIGHLANDS COUNTY FLORIDA

BOARD OF COUNTY COMMISSIONERS

BUDGET AMENDMENTS
(Transfers over $5,000 require Board approval)

DATE: **1/25/2024** SUBMITTED BY: **OMB**

FUND(S): **151** FUND TITLE(S): **Infrastructure Surtax** COST CENTER(S) #: **2672A**

PROJECT(S) #: **23014** PROJECT TITLE(S): **County Expansion Office Bldg** COST CENTER TITLE(S): **Facilities Mgmt 151**
*list additional cost centers on reverse side of form

TYPE	FUND	COST CENTER	ACCOUNT	ACCOUNT NAME	ACTIVITY	BUDGET	INCREASE	DECREASE	REVISED BUDGET
R	151		3999100	Fund Balance Brought Forward		509,037.00	5,000.00		514,037.00
E	151	2672A	56200Z	Project Buildings	23014	280,000.00	5,000.00		285,000.00
									0.00
									0.00
									0.00
									0.00
									0.00

REASON: **To appropriate fund balance brought forward to provide additional funds for Proj 23014 for building acquisition closing on S. Commerce Ave.**

OFFICE USE ONLY

OMB RECOMMENDATION:

_____ Approval

_____ Denial

REQUEST # **23-24-049**

ACTION:

Board	____ Approved	____ Denied	____	ITEM TO ITEM
			____	RESERVE
County Administrator	____ Approved	____ Denied	XX	BY RESOLUTION
			____	SUPPLEMENTAL BUDGET

TRANSFER TYPE:

SIGNATURE: _____

Signature: _____ DATE: ____ / ____ / ____ Posted by Clerk: _____

Form Revised 08/05/2020

RESOLUTION NO. 23-24-62

A RESOLUTION OF HIGHLANDS COUNTY, FLORIDA PERTAINING TO BUDGET AMENDMENT 23-24-049 TO THE INFRASTRUCTURE SURTAX FUND; PROVIDING FOR LEGISLATIVE FINDINGS AND INTENT; PROVIDING FOR APPROVAL OF BUDGET AMENDMENT; PROVIDING FOR THE IMPLEMENTATION OF ADMINISTRATIVE ACTIONS; PROVIDING A SAVINGS CLAUSE; PROVIDING FOR SCRIVENER'S ERRORS; PROVIDING FOR CONFLICTS; PROVIDING FOR SEVERABILITY; AND PROVIDING AN EFFECTIVE DATE.

WHEREAS, Florida Statutes, Section 129.06, (Execution and Amendment of Budget) provides that the Board of County Commissioners may by resolution amend its budget; and

WHEREAS, Highlands County has determined that the following budget amendment is necessary and proper within the Infrastructure Surtax Fund.

NOW, THEREFORE, BE IT RESOLVED BY HIGHLANDS COUNTY, FLORIDA AS FOLLOWS:

SECTION 1. **Legislative Findings and Intent.** Highlands County has complied with all requirements and procedures of Florida law in processing this Resolution. The above recitals are hereby adopted.

SECTION 2. **Approval of Budget Amendment.** Budget Amendment 23-24-049 is hereby approved and authorized to appropriate Fund Balance Forward in the amount of $5,000.00 to Project 23014 (County Expansion Office Building) for FY23/24, a fiscal impact increase of $5,000.00.

SECTION 3. **Implementation of Administrative Actions.** The County Administrator is hereby authorized and directed to take such action as may be deemed necessary and appropriate in order to implement the provisions of this Resolution. The County Administrator may, as deemed appropriate, necessary and convenient, delegate the powers of implementation as herein set forth to such County employees as deemed effectual and prudent.

SECTION 4. **Savings Clause.** All prior actions of Highlands County pertaining to the budget amendment approved hereby, as well as any and all matters relating thereto, are hereby ratified and affirmed consistent with the provisions of this Resolution.

SECTION 5. **Scrivener's Errors.** Typographical errors and other matters of a similar nature that do not affect the intent of this Resolution, as determined by the County Administrator and County Attorney, may be corrected.

SECTION 6. **Conflicts.** All Resolutions or parts of Resolutions in conflict with any of the provisions of this Resolution are hereby repealed.

SECTION 7. **Severability.** If any Section or portion of a Section of this Resolution proves to be invalid, unlawful, or unconstitutional, it shall not be held to invalidate or impair the validity, force, or effect of any other Section or part of this Resolution.

SECTION 8. **Effective Date.** This Resolution shall take effect immediately upon adoption.

PASSED AND ADOPTED this 6th day of February 2024.

HIGHLANDS COUNTY, FLORIDA

By:_____
Kevin J. Roberts, Chairperson

ATTEST:

_____
Jerome Kaszubowski, Clerk of Court

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER: **Laurie A. Hurner, County Administrator**
Sherry G. Sutphen, County Attorney

SUBJECT/TITLE: **Request to donate surplus land located at 8901 Castile Road, Sebring, Florida, to Spring Lake Improvement District (Spring Lake).**

STATEMENT OF ISSUE

The County owns a parcel of land in Spring Lake located at 8901 Castile Road, Sebring, Florida, identified by the Highlands County Property Appraiser by Parcel ID# C-15-35-30-040-00K0-0200 ("Property") which is currently used for access purposes between the airport, the County's Haywood Taylor Fire Station property and other properties located in Spring Lake which are owned by third parties. Based on the development plans which Spring Lake has for the area, it has been determined that it is more appropriate for Spring Lake to own the Property. Because the County owns its Haywood Taylor Fire Station property, which is connected to Castile Road through the Property, it is imperative that the County maintain an Easement for ingress and egress over the Property. As such, the proposed County Deed transferring the Property to Spring Lake reserves unto the County an Easement for ingress and egress over the Property.

RECOMMENDED ACTION

Move to declare the Property surplus and no longer needed for County purposes and to approve the transfer of the Property to Spring Lake Improvement District by County Deed.

FISCAL IMPACT

The value of the Property according to the Highlands County Property Appraiser is $18,500; however, the Property is currently not generating ad valorem taxes for the County since it is owned by the County. By transferring the Property to another government entity, it will remain exempt from ad valorem taxes; thus, there will be no financial change to the County with respect to the Property.

Attachments: Spring Lake Property Donation Map.docx
County Deed.Spring Lake.Castile Road.SGS.docx


CARROLL SHELBY RD
County Owned Parcel for fire station
Haywood Taylor Blvd
Parcel C-15-35-30-040-00K0-0200
8901 CASTILE RD, SEBRING, FL 33876
Highlands County Owns
CASTILE RD

Prepared By:
Sherry G. Sutphen, Highlands County Attorney
Return To:
Joseph DeCerbo, District Manager
Spring Lake Improvement District
115 Spring Lake Boulevard
Sebring, FL 33876
Parcel ID # C-15-35-30-040-00K0-0200

COUNTY DEED

THIS DEED, made by Highlands County, a political subdivision of the State of Florida, whose address is 600 S. Commerce Avenue, Sebring, Florida 33870, hereinafter "Grantor", and Spring Lake Improvement District, whose address is 115 Spring Lake Boulevard, Sebring, FL 33876, hereinafter "Grantee". (Wherever used herein the terms "Grantor" and "Grantee" shall include all heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

WITNESSETH, the Grantor, for and in consideration of the sum of Ten and No/100s Dollars ($10.00), in hand paid to said Grantee, the receipt of which is hereby acknowledged, does hereby grant, bargain and sell to said Grantee forever, all the right, title, interest and claim which said Grantor has to the following described lot, piece or parcel of land, situate, lying and being in the County of Highlands, State of Florida, to wit:

Lot 20, Block K, SPRING LAKE – VILLAGE IV, according to the Plat thereof recorded in Plat Book 9, Page 75, of the Public Records of Highlands County, Florida. ("Property")

TOGETHER with all tenements, hereditaments and appurtenances thereto and releasing any and all right and/or reservation of any kind to any phosphates, minerals, metals and/or petroleum which may have been inadvertently reserved by the County, in and to the real property described herein, by virtue of Florida Statutes, Section 270.11.

RESERVING unto Highlands County, an Easement for ingress and egress over, across and through the Property.

IN WITNESS WHEREOF, the said Grantor has caused these presents to be executed this _____ day of February, 2024.

HIGHLANDS COUNTY, a political subdivision of the State of Florida

_____
Kevin Roberts, Chairman

ATTEST:

_____
Jerome Kaszubowski, Clerk

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER: **James K. Duppenthaler, Interim Fire Chief**

SUBJECT/TITLE: **Request approval of Payment of NAFECO Invoice # 231222 without Purchase Order.**

STATEMENT OF ISSUE

This is a cleanup matter from FY22/23. Purchase Order #14807 that was issued to NAFECO at the request of the prior Fire Chief, or designee thereof, and was used to purchase uniforms and alternations which were not part of the original quote. After the Purchase Order was closed, the prior Fire Chief, or designee thereof, continued to place orders under the Purchase Order causing its amount to be exceeded. The items purchased under the closed Purchase Order were actually received by the Department.

RECOMMENDED ACTION

Move to approve the Payment of NAFECO Invoice # 231222 without Purchase Order.

FISCAL IMPACT

Fiscal impact is an increase to cost center 3217 (Fire Assessments), account 55200 (Operating supplies) in the amount of $6,896.76, and cost center 5105 (Emergency Medical Services), account 55200 (operating Supplies) in the amount of $10,345.15, for a total net impact of $17,241.91.

Attachments: Pay without PO NAFECO.pdf

HIGHLANDS COUNTY
BOARD OF COUNTY COMMISSIONERS
Purchasing Division

REQUEST FOR PAYMENT FOR INVOICE WITHOUT A PURCHASE ORDER FOR INVOICE GREATER THAN $10,000.00

To: Purchasing Manager

From: HCFR/3217 & 5105 (Department / Division Name) Roxanna Taylor (Requesting Employee's)

Date: January 2, 2024

Purchase order to NAFECO #14807 [Vendor's Name/Number] was not created for the purchase billed on the attached invoice, for the following reason(s):

Past Administration would call the vendor directly and order items and advised the vendor that the Purchase order was an open PO, invoices were received on items that had not been quoted. Items were recieved .

By my signature I certify that:
1.) The goods or services were ordered by a County employee or volunteer approved to request a PO.
2.) The goods or services were received in good order and needed by the Department
3.) Funds are budgeted and available to pay for the goods or services.
4.) Supporting documentation.

Roxanna Taylor 01.02.24
Employee's Signature & Date

1-9-2024
Manager / Director's Signature & Date

Fund/Cost Ctr	Account	Project	Amount
181/3217	55200		$6,896.76

005/5105/55200 $10,345.15

Approval: Total $17,241.91

Highlands County piggybacked Sarasota County Bid 2019-103 for this purchase. (LKD)

No other purchasing rules or procedures would be broken by approving the payment.

Digitally signed by Lori DeLoach
Date: 2024.01.23 16:37:57 -05'00'
Adobe Acrobat version: 2023.008.20470

Purchasing Division - Signature — Date

Funds are available for payment and the amount is greater than $10,000.00.

David Ntz — Jan 24, 2024
OMB Division - Signature — Date
OMB Manager

Approved for payment based on the above information.

Laurie A. Hunner — Jan 26, 2024
County Administrator - Signature County Administrator — Date

Date of Board approval — Requesting Employee's Initials

NAFECO INC.

1515 West Moulton St.
Decatur, AL 35601
1-800-628-6233 fax 256-355-0852

PAGE	1
INVOICE NO.	231222
INVOICE DATE	12/22/23

SOLD TO
HIG173
HIGHLANDS CO FIRE RES/UNIFORMS
4506 KENILWORTH BLVD.
SEBRING, FL 33870
UNITED STATES OF AMERICA

SHIP TO
HIGHLANDS CO FIRE RES/UNIFORMS
4506 KENILWORTH BLVD.
SEBRING, FL 33870

CUSTOMER PO#	SHIP VIA	TERMS	SHIP DATE	PICK TKT NO.	SLMN NO.
	BEST WAY	NET 30			44

SPECIAL INSTRUCTIONS >

ORDERED	SHIPPED	BACKORDERED	U/M	ITEM NO./DESCRIPTION	PRICE	AMOUNT
4.00	4.00	0	EA	A2905 BLACKINTON COLLAR BRASS, GOLD 4 BUGLES, CLUTCHBACK	$29.00	$116.00
8.00	8.00	0	EA	A2906-G BLACKINTON COLLAR BRASS, GOLD, 4 BUGLES, CLUTCHBACK, SOLD EACH	$29.00	$232.00
24.00	24.00	0	EA	A2907 BLACKINTON COLLOAR BRASS, GOLD, 3 CROSSED BUGLES, CLUTCHBACK	$29.00	$696.00
20.00	20.00	0	EA	A2908 BLACKINTON COLLAR BRASS, GOLD, 2 CROSSED BUGLES, CLUTCHBACK	$29.00	$580.00
12.00	12.00	0	EA	A2909-2-G-1187780 BLACKINTON COLLAR BRASS, GOLD, 2 PARRALLEL BUGLES, CLUTCHBACK	$28.10	$337.20
24.00	24.00	0	EA	A2909-GP-1187780 BLACKINTON COLLAR BRASS, GOLD, 1 SINGLE BUGLES	$28.10	$674.40
1000.00	1000.00	0	EA	HIG173LS HIGHLANDS BADGE PATCH L/S A71118-21YW	$2.00	$2,000.00
159.00	159.00	0	EA	A2327-RH BLACKINTON LG LADDER SCRAMBLE RHODIUM, SCREW BACK	$32.00	$5,088.00
10.00	10.00	0	EA	A2859-GP-1187780 HAT BADGE, GOLD PLATE SCREW BACK, 2 CROSSED BUGLES	$32.50	$325.00

LINE ITEM TOTAL	SHIPPING & HANDLING	TAX	SUBTOT-TOTAL	DEPOSIT	BALANCE DUE:

NAFECO INC.
1515 West Moulton St.
Decatur, AL 35601
1-800-628-6233 fax 256-355-0852

PAGE	2
INVOICE NO.	231222
INVOICE DATE	12/22/23

SOLD TO
HIG173
HIGHLANDS CO FIRE RES/UNIFORMS
4506 KENILWORTH BLVD.
SEBRING, FL 33870
UNITED STATES OF AMERICA

SHIP TO
HIGHLANDS CO FIRE RES/UNIFORMS
4506 KENILWORTH BLVD.
SEBRING, FL 33870

CUSTOMER PO#	SHIP VIA	TERMS	SHIP DATE	PICK TKT NO.	SLMN NO.
	BEST WAY	NET 30			44

SPECIAL INSTRUCTIONS >

ORDERED	SHIPPED	BACKORDERED	U/M	ITEM NO /DESCRIPTION	PRICE	AMOUNT
1.00	1.00	0	EA	32278-86-69 FBC PANT, LEGEND, POLY/WOOL LAPD NAVY, SZ: 69R, SPECIAL ORDER	$297.98	$297.98
1.00	1.00	0	EA	34892-86-6-42-R FBC LEGEND DOUBLE BREASTED COAT, LAPD, 6 GOLD FD, SZ: 42-R	$324.38	$324.38
2.00	2.00	0	EA	34892-86-6-S-44-R FBC LEGEND DOUBLE BREASTED COAT. LAPD, 6 GOLD FD, SZ: 44-R	$324.38	$648.76
1.00	1.00	0	EA	34892-86-6-S-64L LEGEND DOUBLE BRESTED, LAPD 6SLVR, FD, SZ:64L, SPECIAL ORDER	$444.38	$444.38
318.00	318.00	0	EA	A2885-RH-1187780 BLACKINTON A2885, RHODIUM, SCRAMBLE, CLUTCHBACK	$16.70	$5,310.63
1.00	1.00	0	EA	34892-86-6-S-46-S FBC LEGEND DOUBLE BREASTED COAT, LAPD, 6 SLVR FD, SZ: 46-S	$324.38	$324.38

****CREDIT MEMO 1237137 HAS BEEN APPLIED TO THIS INVOICE

LINE ITEM TOTAL	SHIPPING & HANDLING	TAX	SUBTOT-TOTAL	DEPOSIT	BALANCE DUE:
$17,399.11	*$114.80*	*$0.00*	*$17,513.91*	*$272.00*	*$17,241.91*

NAFECO
PO Box 2928
Decatur, AL 35602
United States of America
Phone: 800-628-6233 Fax: 256-355-0852

CREDIT MEMO

PAGE	1
INVOICE NO.	1237137
INVOICE DATE	10/25/23

SOLD TO
HIG173
HIGHLANDS CO FIRE RES/UNIFORMS
4506 KENILWORTH BLVD.
SEBRING, FL 33870
United States of America
863-385-1112

SHIP TO
HIGHLANDS CO FIRE RES/UNIFORMS
4506 KENILWORTH BLVD.
SEBRING, FL 33870
United States of America
863-385-1112

We accept all major credit cards. However each transaction is subject to a 3% handling fee.

CUSTOMER PO #	SHIP VIA	TERMS	DATE SHIPPED	PICK TICKET NO.	SLMN 1	SLMN 2
230404-CLASS ?A	Best Way	NET 30	10/25/23	1221007-000	44	

SPECIAL INSTRUCTIONS >

ORDERED	SHIPPED	BACK ORDERED	U/M	ITEM NO. DESCRIPTION	PRICE	AMOUNT
				**** EMAIL INVS TO : firerescuepayables@ highlandsfl.gov****& RTAYLOR@HIGHLANDSFL.GOV		
34.00	34.00	.00	EA	90012-61 Samuel Broome Polyester 3"X16" Dark Navy Tie.Clip-On	8.0000	272.00

LINE ITEM TOTAL	SHIPPING & HANDLING	TAX	SUB-TOTAL	DEPOSIT	BALANCE DUE
272.00	.00	.00	272.00	.00	272.00-

AMENDMENT NO. 3
TO COUNTY CONTRACT NO. 2019-103

This Amendment is made and entered into upon execution by both parties by and between **Sarasota County**, a political subdivision of the State of Florida, hereinafter referred to as the **"County,"** and **North America Fire Equipment Co. Inc, dba NAFECO of Florida**, an Alabama corporation authorized to do business in the State of Florida, hereinafter referred to as **"Contractor."**

WITNESSETH

WHEREAS, the County and the Contractor entered into County Contract No. 2019-103 ("Term Contract") to provide uniforms for the Sarasota County Fire Department, effective January 29, 2019; and

WHEREAS, the parties executed Amendment No. 1 on June 1, 2020 and Amendment No. 2 on September 17, 2021; and

WHEREAS, the parties now wish to further amend the Term Contract.

NOW THEREFORE, the County and the Contractor, in consideration of the mutual covenants contained herein, do agree to amend the Term Contract as follows:

1. The above recitals are true and correct and incorporated herein by reference.

2. The term of the Term Contract is hereby renewed for a period of one (1) year effective January 29, 2023 through January 28, 2024.

3. For services provided during the renewal term, the County shall pay the Contractor in accordance with the terms and conditions of this Term Contract an amount not to exceed $259,413.35.

4. Exhibit B – Fee Schedule is hereby replaced in its entirety with the amended Exhibit B – Fee Schedule, attached and incorporated herein.

5. Except as modified herein, all other terms, covenants, and conditions of the Term Contract shall remain in full force and effect.

IN WITNESS WHEREOF, the parties have executed this Amendment as of the last date written below.

NORTH AMERICA FIRE EQUIPMENT CO. INC, DBA NAFECO OF FLORIDA

BY: DocuSigned by: Ronald Woodall 4C2E4B91DF074EE...

Vice President

01-25-2023

SARASOTA COUNTY

BOARD OF COUNTY COMMISSIONERS
OF SARASOTA COUNTY, FLORIDA

BY: _____ 1/26/2023

Jennifer Slusarz, CPPO, CPPB
Procurement Official

Executed by the Procurement Official pursuant to Chapter 5 of the Sarasota County Procurement Manual

Approved as to form and correctness: BCM

BY: _____

COUNTY ATTORNEY

AMENDMENT NO. 3
EXHIBIT B - FEE SCHEDULE

LINE ITEM	DESCRIPTION	MANUFACTURER ITEM #	UNIT OF MEASURE	SIZES	UNIT PRICE
1	Dress Pants, navy, male, 75% polyester, 25% wool blend, as specified in Attachment 1, Section 1.1.	Flying Cross #47280	Each	28-42	**$72.00**
2	Dress Pants, navy, male, 75% polyester, 25% wool blend, as specified in Attachment 1, Section 1.1.	Flying Cross #47280	Each	44+	**$72.00**
3	Dress Pants, navy, female, 75% polyester, 25% wool blend, as specified in Attachment 1, Section 1.2.	Flying Cross #47280W	Each	4-22	**$72.00**
4	Dress Pants, navy, male, 100% polyester, as specified in Attachment 1, Section 1.3.	Flying Cross #3900	Each	28-42	**$72.00**
5	Dress Pants, navy, male, 100% polyester, as specified in Attachment 1, Section 1.3.	Flying Cross #3900	Each	44+	**$45.00**
6	Dress Pants, navy, female, 100% polyester, as specified in Attachment 1, 1.4.	Flying Cross #3900W	Each	4-22	**$45.00**

AMENDMENT NO. 3
EXHIBIT B - FEE SCHEDULE

7	Pants, any color, male, embroidery **SCFD** on back left pocket, as specified in Attachment 1, Section 1.5. Embroidery as specified in Attachment 1, Section 2.1 A.	VERTX #VTX 8600	Each	28-42	**$63.00**
8	Pants, any color, male, embroidery **SCFD** on back left pocket, as specified in Attachment 1, Section 1.5. Embroidery as specified in Attachment 1, Section 2.1 A.	VERTX #VTX 8600	Each	44+	**$63.00**
9	Pants, any color, female, embroidery **SCFD** on back left pocket, as specified in Attachment 1, Section 1.6. Embroidery as specified in Attachment 1, Section 2.1 A.	VERTX #VTX 8050/8051	Each	4-22	**$63.00**
10	Shorts, any color, male, embroidery **SCFD** on back left pocket, as specified in Attachment 1, Section 1.7. Embroidery as specified in Attachment 1, Section 2.1 A.	TruSpec Ascent #1114	Each	30-44	**$53.96**
11	Bike Shorts, navy, unisex, as specified in Attachment 1, Section 1.8.	Mocean #1081 B	Each	S-XL	**$77.75**
12	Long-sleeved shirt, white, male, apply **Maltese Cross** patch on left arm, as specified in Attachment 1, Section 1.9. Patch as specified in Attachment 1, Section 2.2 B.	Flying Cross #35W54	Each	XS-XL	**$53.35**
13	Long-sleeved shirt, white, male, apply **Maltese Cross** patch on left arm, as	Flying Cross	Each	2X-4X	**$53.35**

AMENDMENT NO. 3
EXHIBIT B - FEE SCHEDULE

	specified in Attachment 1, Section 1.9. Patch as specified in Attachment 1, Section 2.2 B.	#35W54			
14	Long-sleeved shirt, white, female, apply **Maltese Cross** patch on left arm, as specified in Attachment 1, Section 1.10. Patch as specified in Attachment 1, Section 2.2 B.	Flying Cross #126R45	Each	XS-XL	**$53.35**
15	Long-sleeved shirt, white, female, apply **Maltese Cross** patch on left arm, as specified in Attachment 1, Section 1.10. Patch as specified in Attachment 1, Section 2.2 B.	Flying Cross #126R45	Each	2X-4X	**$53.35**
16	Short-sleeved shirt, white, male, apply **Maltese Cross** patch on left arm, apply Specialty patch (**EMT, Paramedic, Special Ops or Reverse Flying Flag**) on right arm, as specified in Attachment 1, Section 1.11. Patches as specified in Attachment 1, Section 2.2.	Flying Cross #85R54	Each	XS-XL	**$43.20**
17	Short-sleeved shirt, white, male, apply **Maltese Cross** patch on left arm, apply specialty patch (**EMT, Paramedic, Special Ops or Reverse Flying Flag**) on right arm, as specified in Attachment 1, Section 1.11. Patches as specified in Attachment 1, Section 2. 2.	Flying Cross #85R54	Each	2X-4X	**$43.20**

AMENDMENT NO. 3
EXHIBIT B - FEE SCHEDULE

18	Short-sleeved shirt, blue, male, apply **Maltese Cross** patch on left arm, apply specialty patch (**EMT, Paramedic, Special Ops or Reverse Flying Flag**) on right arm, as specified in Attachment 1, Section 1.11. Patches as specified in Attachment 1, Section 2.2.	Flying Cross #85R5435	Each	XS-XL	**$43.20**
19	Short-sleeved shirt, blue, male, apply **Maltese Cross** patch on left arm, apply specialty patch (**EMT, Paramedic, Special Ops or Reverse Flying Flag**) on right arm, as specified in Attachment 1, Section 1.11. Patches as specified in Attachment 1, Section 2.2.	Flying Cross #85R5435	Each	2X-4X	**$43.20**
20	Short-sleeved shirt, white, female, apply **Maltese Cross** patch on left arm, apply specialty patch (**EMT, Paramedic, Special Ops or Reverse Flying Flag**) on right arm, as specified in Attachment 1, Section 1.12. Patches as specified in Attachment 1, Section 2.2.	Flying Cross #176R54	Each	XS-XL	**$43.20**
21	Short-sleeved shirt, white, female, apply **Maltese Cross** patch on left arm, apply specialty patch (**EMT, Paramedic, Special Ops or Reverse Flying Flag**) on right arm, as specified in Attachment 1, Section 1.12. Patches as specified in Attachment 1, Section 2.2.	Flying Cross #176R54	Each	2X-4X	**$43.20**

AMENDMENT NO. 3
EXHIBIT B - FEE SCHEDULE

22	Short-sleeved shirt, blue, female, apply **Maltese Cross** patch on left arm, apply specialty patch (**EMT, Paramedic, Special Ops or Reverse Flying Flag**) on right arm, as specified in Attachment 1, Section 1.12. Patches as specified in Attachment 1, Section 2.2.	Flying Cross #176R5435	Each	XS-XL	**$43.20**
23	Short-sleeved shirt, blue, female, apply **Maltese Cross** patch on left arm, apply specialty patch (**EMT, Paramedic, Special Ops or Reverse Flying Flag**) on right arm, as specified in Attachment 1, Section 1.12. Patches as specified in Attachment 1, Section 2.2.	Flying Cross #176R5435	Each	2X-4X	**$43.20**
24	Short-sleeved bike polo shirt, unisex, Color: HiVis Navy/Yellow. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, as specified in Attachment 1, Section 1.13. Embroidery as specified in Attachment 1, Section 2.1B.	Mocean #0354	Each	S-XL	**$58.35**
25	Short-sleeved bike polo shirt, unisex, Color: HiVis Navy/Yellow. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, as specified in Attachment 1, Section 1.13. Embroidery as specified in Attachment 1, Section 2.1B.	Mocean #0354	Each	2X-4X	**$77.75**
26	Polo Shirt, white, unisex, regular torso. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, silkscreen	VERTX	Each	XS-XL	**$67.49**

AMENDMENT NO. 3
EXHIBIT B - FEE SCHEDULE

	Sarasota County Fire Dept. on back, as specified in Attachment 1, Section 1.14. Embroidery as specified in Attachment 1, Section 2.1B; silkscreen as specified in Attachment 1, Section 2.3A.	#4000 Reg			
27	Polo Shirt, white, unisex, regular torso. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, Silkscreen **Sarasota County Fire Dept.** on back, as specified in Attachment 1, Section 1.14. Embroidery as specified in Attachment 1, Section 2.1B; silkscreen as specified in Attachment 1, Section 2.3A.	VERTX #4000 Reg	Each	2X-4X	**$67.49**
28	Polo Shirt, navy, unisex, regular torso. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, Silkscreen **Sarasota County Fire Dept.** on back, as specified in Attachment 1, Section 1.14. Embroidery as specified in Attachment 1, Section 2.1B; silkscreen as specified in Attachment 1, Section 2.3A.	VERTX #4000 Reg	Each	XS-XL	**$67.49**
29	Polo Shirt, navy, unisex, regular torso. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, Silkscreen **Sarasota County Fire Dept.** on back, as specified in Attachment 1, Section 1.14. Embroidery as specified in Attachment 1, Section 2.1B; silkscreen as specified in Attachment 1, Section 2.3A.	VERTX #4000 Reg	Each	2X-4X	**$67.49**

AMENDMENT NO. 3
EXHIBIT B - FEE SCHEDULE

30	Polo Shirt, white, unisex, long torso. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, Silkscreen **Sarasota County Fire Dept.** on back, as specified in Attachment 1, Section 1.14. Embroidery as specified in Attachment 1, Section 2.1B; silkscreen as specified in Attachment 1, Section 2.3A.	VERTX #4000 Long	Each	XS-XL	**$67.49**
31	Polo Shirt, white, unisex, long torso. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, Silkscreen **Sarasota County Fire Dept.** on back, as specified in Attachment 1, Section 1.14. Embroidery as specified in Attachment 1, Section 2.1B; silkscreen as specified in Attachment 1, Section 2.3A.	VERTX #4000 Long	Each	2X-4X	**$67.49**
32	Polo Shirt, navy, unisex, long torso. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, Silkscreen **Sarasota County Fire Dept.** on back, as specified in Attachment 1, Section 1.14. Embroidery as specified in Attachment 1, Section 2.1B; silkscreen as specified in Attachment 1, Section 2.3A.	VERTX #4000 Long	Each	XS-XL	**$67.49**
33	Polo Shirt, navy, unisex, long torso. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, Silkscreen **Sarasota County Fire Dept.** on back, as specified in Attachment 1, Section 1.14. Embroidery as specified in Attachment 1,	VERTX #4000 Long	Each	2X-4X	**$67.49**

AMENDMENT NO. 3
EXHIBIT B - FEE SCHEDULE

	Section 2.1B; silkscreen as specified in Attachment 1, Section 2.3A.				
34	Polo Shirt, navy, unisex, regular torso. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, embroidery **bugles** on lapels. Silkscreen **Sarasota County Fire Dept.** on back, as specified in Attachment 1, Section 1.14. Embroidery as specified in Attachment 1, Section 2.1B, 2.1E, 2.1G; silkscreen as specified in Attachment 1, Section 2.3A.	VERTX #4000 Reg	Each	XS-XL	**$75.00**
35	Polo Shirt, navy, unisex, regular torso. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, embroidery **bugles** on lapels. Silkscreen **Sarasota County Fire Dept.** on back, as specified in Attachment 1, Section 1.14. Embroidery as specified in Attachment 1, Section 2.1B, 2.1E, 2.1G; silkscreen as specified in Attachment 1, Section 2.3A.	VERTX #4000 Reg	Each	2X-4X	**$75.00**
36	Polo Shirt, navy, unisex, long torso. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, embroidery **bugles** on lapels. Silkscreen **Sarasota County Fire Dept.** on back, as specified in Attachment 1, Section 1.14. Embroidery as specified in Attachment 1, Section 2.1B, 2.1E, 2.1G; silkscreen as specified in Attachment 1, Section 2.3A.	VERTX #4000 Long	Each	XS-XL	**$75.00**

AMENDMENT NO. 3
EXHIBIT B - FEE SCHEDULE

37	Polo Shirt, navy, unisex, long torso. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, embroidery **bugles** on lapels. Silkscreen **Sarasota County Fire Dept.** on back, as specified in Attachment 1, Section 1.14. Embroidery as specified in Attachment 1, Section 2.1B, 2.1E, 2.1G; silkscreen as specified in Attachment 1, Section 2.3A.	VERTX #4000 Long	Each	2X-4X	**$75.00**
38	Polo Shirt, any color, unisex, regular torso. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, as specified in Attachment 1, Section 1.15. Embroidery as specified in Attachment 1, Section 2.1B.	VERTX #4000 Reg	Each	XS-XL	**$62.00**
39	Polo Shirt, any color, unisex, regular torso. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, as specified in Attachment 1, Section 1.15. Embroidery as specified in Attachment 1, Section 2.1B.	VERTX #4000 Reg	Each	2X-4X	**$62.00**
40	Polo Shirt, any color, unisex, long torso. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, as specified in Attachment 1, Section 1.15. Embroidery as specified in Attachment 1, Section 2.1B.	VERTX #4000 Long	Each	XS-XL	**$62.00**
41	Polo Shirt, any color, unisex, long torso. Embroidery **Maltese Cross** on left chest,	VERTX	Each	2X-4X	**$62.00**

AMENDMENT NO. 3
EXHIBIT B - FEE SCHEDULE

	embroidery **Name** on right chest, as specified in Attachment 1, Section 1.15. Embroidery as specified in Attachment 1, Section 2.1B.	#4000 Long			
42	T-Shirt, short-sleeve, 100% cotton, any color, unisex. Silkscreen **Maltese Cross** on left chest, silkscreen **Sarasota County Fire Dept.** on back as specified in Attachment 1, Section 1.16. Silkscreen as specified in Attachment 1, Section 2.3C, 2.3D.	Gildan #G2000	Each	XS-XL	**$8.52**
43	T-Shirt, short-sleeve, 100% cotton, any color, unisex. Silkscreen **Maltese Cross** on left chest, silkscreen **Sarasota County Fire Dept.** on back as specified in Attachment 1, Section 1.16. Silkscreen as specified in Attachment 1, Section 2.3C, 2.3D.	Gildan #G2000	Each	2X-4X	**$10.19**
44	T-Shirt, short-sleeve, 100% cotton, white, unisex. Silkscreen **Maltese Cross** on left chest, as specified in Attachment 1, Section 1.17. Silkscreen as specified in Attachment 1, Section 2.3C.	Gildan #G2000	Each	XS-XL	**$8.05**
45	T-Shirt, short-sleeve, 100% cotton, white unisex. Silkscreen **Maltese Cross** on left chest, as specified in Attachment 1, Section 1.17. Silkscreen as specified in Attachment 1, Section 2.3C.	Gildan G#2000	Each	2X-4X	**$10.80**

AMENDMENT NO. 3
EXHIBIT B - FEE SCHEDULE

46	T-shirt, short-sleeve, 100% polyester, white, unisex. Silkscreen **Maltese Cross** on left chest, as specified in Attachment 1, Section 1.18. Silkscreen as specified in Attachment 1, Section 2.3C.	Gildan #G42000	Each	XS-XL	**$10.80**
47	T-shirt, short-sleeve, 100% polyester, white, unisex. Silkscreen **Maltese Cross** on left chest, as specified in Attachment 1, Section 1.18. Silkscreen as specified in Attachment 1, Section 2.3C.	Gildan #G42000	Each	2X-4X	**$12.14**
48	T-shirt, short-sleeve, 100% polyester, any color, unisex. Silkscreen **Maltese Cross** on left chest, silkscreen **Sarasota County Fire Dept.** on back, as specified in Attachment 1, Section 1.19. Silkscreen as specified in Attachment 1, Section 2.3C, 2.3D.	Gildan #G42000	Each	XS-XL	**$14.00**
49	T-shirt, short-sleeve, 100% polyester, any color, unisex. Silkscreen **Maltese Cross** on left chest, silkscreen **Sarasota County Fire Dept.** on back, as specified in Attachment 1, Section 1.19. Silkscreen as specified in Attachment 1, Section 2.3C, 2.3D.	Gildan #G42000	Each	2X-4X	**$15.50**
50	T-shirt, long-sleeve, 100% polyester, white, unisex. Silkscreen **Maltese Cross** on left chest, as specified in Attachment 1, Section 1.20. Silkscreen as specified in Attachment 1, Section 2.3C.	Gildan #G42400	Each	XS-XL	**$15.50**

AMENDMENT NO. 3
EXHIBIT B - FEE SCHEDULE

51	T-shirt, long-sleeve, 100% polyester, white, unisex. Silkscreen **Maltese Cross** on left chest, as specified in Attachment 1, Section 1.20. Silkscreen as specified in Attachment 1, Section 2.3C.	Gildan #G42400	Each	2X-4X	**$17.00**
52	T-shirt, long-sleeve, 100% polyester, any color, unisex. Silkscreen **Maltese Cross** on left chest, silkscreen **Sarasota County Fire Dept.** on back, as specified in Attachment 1, Section 1.21. Silkscreen as specified in Attachment 1, Section 2.3C, 2.3D.	Gildan #G42400	Each	XS-XL	**$18.50**
53	T-shirt, long-sleeve, 100% polyester, any color, unisex. Silkscreen **Maltese Cross** on left chest, silkscreen **Sarasota County Fire Dept.** on back, as specified in Attachment 1, Section 1.21. Silkscreen as specified in Attachment 1, Section 2.3C, 2.3D.	Gildan #G42400	Each	2X-4X	**$20.00**
54	Jacket - Hi Vis Soft Shell. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, as specified in Attachment 1, Section 1.22. Embroidery as specified in Attachment 1, Section 2.1C.	#SHVSSJ	Each	XS-XL	**$170.00**
55	Jacket - Hi Vis Soft Shell. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, as specified in Attachment 1, Section 1.22. Embroidery as specified in Attachment 1, Section 2.1C.	# SHVSSJ	Each	2X-4X	**$170.00**

AMENDMENT NO. 3
EXHIBIT B - FEE SCHEDULE

56	Job Shirt, navy. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, silkscreen **Sarasota County Fire Dept.** on back, as specified in Attachment 1, Section 1.23. Embroidery as specified in Attachment 1, Section 2.1C; silkscreen as specified in Attachment 1, Section 2.3D.	5.11 Tactical #72363	Each	XS-XL	**$96.00**
57	Job Shirt, navy. Embroidery **Maltese Cross** on left chest, embroidery **Name** on right chest, silkscreen **Sarasota County Fire Dept.** on back, as specified in Attachment 1, Section 1.23. Embroidery as specified in Attachment 1, Section 2.1C; silkscreen as specified in Attachment 1, Section 2.3D.	5.11 Tactical #72363	Each	2X-4X	**$107.25**
58	Belt, unisex - 1.5" wide leather, solid brass snaps, solid brass Sam Browne buckles, chrome finish. Black basket weave finish, as specified in Attachment 1, Section 1.24.	Boston Leather	Each	22-42	**$45.00**
59	Belt, unisex - 1.5" wide leather, solid brass snaps, solid brass Sam Browne buckles, chrome finish. Black basket weave finish, as specified in Attachment 1, Section 1.24.	Boston Leather	Each	44+	**$48.00**
60	Belt, unisex, - 1.5" wide Tactical Duty Uniform (TDU), black, non-metallic buckle, as specified in Attachment 1, Section 1.25.	5.11 Tactical TDU Belt #59551	Each	28-42	**$17.25**

AMENDMENT NO. 3
EXHIBIT B - FEE SCHEDULE

61	Women's Crossover Tie, navy - 100% polyester, Adjustable band with button snap as specified in Attachment 1, Section 1.26.	N/A	Each	One Size Fits All	**$5.19**
62	Men's Tie, navy - 57" long, as specified in Attachment 1, Section 1.27.	N/A	Each	57 inches	**$5.19**
63	Hat - FlexFit Athletic Pro-Mesh Cap, any color. Embroidery **SCFD** on center panel, as specified in Attachment 1, Section 1.28. Embroidery as specified in Attachment 1, Section 2.1F.	FlexFit #6777	Each	One Size Fits All	**$22.65**
64	Hat - Adjustable, Athletic Pro-Mesh Adjustable Cap, any color. Embroidery **SCFD** on center panel, as specified in Attachment 1, Section 1.29. Embroidery as specified in Attachment 1, Section 2.1F.	#6008	Each	One Size Fits All	**$19.65**
65	Hat - Boonie Style, any color, embroidery **SCFD**, as specified in Attachment 1, Section 1.30. Embroidery as specified in Attachment 1, Section 2.1F.	Tru Spec Adjustable #3311000	Each	One Size Fits All	**$23.46**
66	Vest - Class II Traffic Vest, as specified in Attachment 1, Section 1.31.	N/A	Each	M-L	**$53.73**
67	Vest - Class II Traffic Vest, as specified in Attachment 1, Section 1.31.	N/A	Each	XL-2XL	**$56.68**

AMENDMENT NO. 3
EXHIBIT B - FEE SCHEDULE

68	Embroidery work not specified in Attachment 1. Price to include all costs including labor, machining, and thread, for up to 20,000 stitches per applique.	N/A	Each	N/A	**$10.00**
69	Patch application not specified in Attachment 1. Price to include all costs including labor, machining, and supplies to apply patch.	N/A	Each	N/A	**$3.18**
70	Silkscreen not specified in Attachment 1. Price to include all costs including labor, machining, and supplies to apply patch.	N/A	Each	N/A	**$7.00**
71	DISCOUNT OFF CATALOG PRICE: Enter a percentage discount off catalog price for the purchase of additional uniform items not listed on Exhibit B.	N/A	Percent	N/A	**25.00%**

Nafeco Pay WO PO

Final Audit Report 2024-01-26

Created:	2024-01-23
By:	Lori DeLoach (ldeloach@highlandsfl.gov)
Status:	Signed
Transaction ID:	CBJCHBCAABAA2zXbVjyJjz9N4xg-MHjaX2zKX-TmnKa8

"Nafeco Pay WO PO" History

Document digitally presigned by Lori DeLoach (ldeloach@highlandsfl.gov)
2024-01-23 - 9:37:57 PM GMT

Document created by Lori DeLoach (ldeloach@highlandsfl.gov)
2024-01-23 - 9:39:14 PM GMT

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2024-01-23 - 9:41:10 PM GMT

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Document e-signed by Laurie Hurner (lhurner@highlandsfl.gov)
Signature Date: 2024-01-26 - 1:45:39 PM GMT - Time Source: server

Agreement completed.
2024-01-26 - 1:45:39 PM GMT

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: Feb 6, 2024

PRESENTER:	**David Nitz, OMB Manager** **Tanya Cannady, Business Services Director** **Ingra Gardner, Community Programs Director**
SUBJECT/TITLE:	**Request adoption of Resolution 23-24-63 for Budget Amendment 23-24-052 to appropriate Settlement funds received from the State of Florida**

STATEMENT OF ISSUE

The State, through its Attorney General, and certain Local Governments, through their elected representatives and counsel, are separately engaged in litigation seeking to hold many of the same Pharmaceutical Supply Chain Participants accountable for the damage caused by their misfeasance, nonfeasance and malfeasance and have sued Pharmaceutical Supply Chain
participants for the harm caused to the citizens and have collectively negotiated settlements with several Pharmaceutical Supply Chain Participants.

It is the intent of the State and its Local Governments to use the proceeds from any Settlements with Pharmaceutical Supply Chain Participants to increase the amount of funding presently spent on opioid and substance abuse education, treatment, prevention and other related programs and services.

RECOMMENDED ACTION

Move to adopt Resolution 23-24-63 for Budget Amendment 23-24-052 to appropriate Settlement funds received from the State of Florida.

FISCAL IMPACT

The fiscal impact is an increase to Fund 005 (General) and the overall budget in the amount of $199,615.96 which is being appropriated in cost center 5103 (Mental Health), account 53442Z (Substance Abuse Treatments Project), project 23053 (Opioid Settlement Funds).

Attachments: FL Opioid Allocation_Agreement 2.pdf
23-24-052 Proj 23053 Opioid Settlement Funds (BA).pdf
23-24-052R Proj 23053 Opioid Settlement Funds (Resolution).pdf

FLORIDA OPIOID ALLOCATION AND STATEWIDE RESPONSE AGREEMENT

BETWEEN

STATE OF FLORIDA DEPARTMENT OF LEGAL AFFAIRS,
OFFICE OF THE ATTORNEY GENERAL

And

CERTAIN LOCAL GOVERNMENTS IN THE STATE OF FLORIDA

This Florida Opioid Allocation and Statewide Response Agreement (the "Agreement") is entered into between the State of Florida ('State") and certain Local Governments ("Local Governments" and the State and Local Governments are jointly referred to as the "Parties" or individually as a "Party"). The Parties agree as follows:

Whereas, the people of the State and its communities have been harmed by misfeasance, nonfeasance and malfeasance committed by certain entities within the Pharmaceutical Supply Chain; and

Whereas, the State, through its Attorney General, and certain Local Governments, through their elected representatives and counsel, are separately engaged in litigation seeking to hold many of the same Pharmaceutical Supply Chain Participants accountable for the damage caused by their misfeasance, nonfeasance and malfeasance as the State; and

Whereas, certain of the Parties have separately sued Pharmaceutical Supply Chain participants for the harm caused to the citizens of both Parties and have collectively negotiated settlements with several Pharmaceutical Supply Chain Participants; and

Whereas, the Parties share a common desire to abate and alleviate the impacts of that misfeasance, nonfeasance and malfeasance throughout the State; and

Whereas, it is the intent of the State and its Local Governments to use the proceeds from any Settlements with Pharmaceutical Supply Chain Participants to increase the amount of funding presently spent on opioid and substance abuse education, treatment, prevention and other related programs and services, such as those identified in Exhibits "A" and "B," and to ensure that the funds are expended in compliance with evolving evidence-based "best practices;" and

Whereas, the State and its Local Governments enter into this Agreement and agree to the allocation and use of the proceeds of any settlement described herein

Wherefore, the Parties each agree to as follows:

A. Definitions

As used in this Agreement:

1. "Approved Purpose(s)" shall mean forward-looking strategies, programming and services used to expand the availability of treatment for individuals impacted by substance use disorders, to: (a) develop, promote, and provide evidence-based substance use prevention strategies; (b) provide substance use avoidance and awareness education; (c) decrease the oversupply of licit and illicit opioids; and (d) support recovery from addiction. Approved Purposes shall include, but are not limited to, the opioid abatement strategies listed in Exhibits "A" and "B" which are incorporated herein by reference.

2. "Local Governments" shall mean all counties, cities, towns and villages located within the geographic boundaries of the State.

3. "Managing Entities" shall mean the corporations selected by and under contract with the Florida Department of Children and Families or its successor ("DCF") to manage the daily operational delivery of behavioral health services through a coordinated system of care. The singular "Managing Entity" shall refer to a singular of the Managing Entities.

4. "County" shall mean a political subdivision of the state established pursuant to s. 1, Art. VIII of the State Constitution.

5. "Dependent Special District" shall mean a Special District meeting the requirements of Florida Statutes § 189.012(2).

6. "Municipalities" shall mean cities, towns, or villages located in a County within the State that either have: (a) a Population greater than 10,000 individuals; or (b) a Population equal to or less than 10,000 individuals and that has either (i) filed a lawsuit against one or more Pharmaceutical Supply Chain Participants; or (ii) executes a release in connection with a settlement with a Pharmaceutical Supply Chain participant. The singular "Municipality" shall refer to a singular city, town, or village within the definition of Municipalities.

7. "'Negotiating Committee" shall mean a three-member group comprised by representatives of the following: (1) the State; and (2) two representatives of Local Governments of which one representative will be from a Municipality and one shall be from a County (collectively, "Members") within the State. The State shall be represented by the Attorney General or her designee.

8. "Negotiation Class Metrics" shall mean those county and city settlement allocations which come from the official website of the Negotiation Class of counties and cities certified on September 11, 2019 by the U.S. District for the Northern District of Ohio in *In re National Prescription Opiate Litigation*, MDL No. 2804 (N.D. Ohio). The website is located at https://allocationmap.iclaimsonline.com.

9. "Opioid Funds" shall mean monetary amounts obtained through a Settlement.

10. "Opioid Related" shall have the same meaning and breadth as in the agreed Opioid Abatement Strategies attached hereto as Exhibits "A" or "B."

11. "Parties" shall mean the State and Local Governments that execute this Agreement. The singular word "Party" shall mean either the State or Local Governments that executed this Agreement.

12. "PEC" shall mean the Plaintiffs' Executive Committee of the National Prescription Opiate Multidistrict Litigation pending in the United States District Court for the Northern District of Ohio.

13. "Pharmaceutical Supply Chain" shall mean the entities, processes, and channels through which Controlled Substances are manufactured, marketed, promoted, distributed or dispensed.

14. "Pharmaceutical Supply Chain Participant" shall mean any entity that engages in, or has engaged in the manufacture, marketing, promotion, distribution or dispensing of an opioid analgesic.

15. "Population" shall refer to published U.S. Census Bureau population estimates as of July 1, 2019, released March 2020, and shall remain unchanged during the term of this Agreement. These estimates can currently be found at *https://www.census.gov. For purposes of Population under the definition of Qualified County, a County's population shall be the greater of its population as of the July 1, 2019, estimates or its actual population, according to the official U.S. Census Bureau count, which was released by the U.S. Census Bureau in August 2021.*

16. "Qualified County" shall mean a charter or non-chartered County that has a Population of at least 300,000 individuals and: (a) has an opioid taskforce or other similar board, commission, council, or entity (including some existing sub-unit of a County's government responsible for substance abuse prevention, treatment, and/or recovery) of which it is a member or it operates in connection with its municipalities or others on a local or regional basis; (b) has an abatement plan that has been either adopted or is being utilized to respond to the opioid epidemic; (c) is, as of December 31, 2021, either providing or is contracting with others to provide substance abuse prevention, recovery, and/or treatment services to its citizens; and (d) has or enters into an interlocal agreement with a majority of Municipalities (Majority is more than 50% of the Municipalities' total Population) related to the expenditure of Opioid Funds. The Opioid Funds to be paid to a Qualified County will only include Opioid Funds for Municipalities whose claims are released by the Municipality or Opioid Funds for Municipalities whose claims are otherwise barred. For avoidance of doubt, the word "operate" in connection with opioid task force means to do at least one of the following activities: (1) gathers data about the nature, extent, and problems being faced in communities within that County; (2) receives and reports recommendations from other government and private entities about activities that should be undertaken to abate the opioid epidemic to a County; and/or (3) makes recommendations to a County and other public and private leaders about steps, actions, or plans that should be undertaken to abate the opioid epidemic. For avoidance of doubt, the Population calculation required by subsection (d) does not include Population in unincorporated areas.

17. "SAMHSA" shall mean the U.S. Department of Health & Human Services, Substance Abuse and Mental Health Services Administration.

18. "Settlement" shall mean the negotiated resolution of legal or equitable claims against a Pharmaceutical Supply Chain Participant when that resolution has been jointly entered into by the State and Local Governments or a settlement class as described in (B)(1) below.

19. "State" shall mean the State of Florida.

B. Terms

1. **Only Abatement** - Other than funds used for the Administrative Costs and Expense Fund as hereinafter described or to pay obligations to the United States arising out of Medicaid or other federal programs, all Opioid Funds shall be utilized for Approved Purposes. In order to accomplish this purpose, the State will either: (a) file a new action with Local Governments as Parties; or (b) add Local Governments to its existing action, sever any settling defendants. In either type of action, the State will seek entry of a consent judgment, consent order or other order binding judgment binding both the State and Local Governments to utilize Opioid Funds for Approved Purposes ("Order") from the Circuit Court of the Sixth Judicial Circuit in and for Pasco County, West Pasco Division New Port Richey, Florida (the "Court"), except as herein provided. The Order may be part of a class action settlement or similar device. The Order shall provide for continuing jurisdiction by the Court to address non-performance by any party under the Order.

2. **Avoid Claw Back and Recoupment** - Both the State and Local Governments wish to maximize any Settlement and Opioid Funds. In addition to committing to only using funds for the Expense Funds, Administrative Costs and Approved Purposes, both Parties will agree to utilize a percentage of funds for the Core Strategies highlighted in Exhibit A. Exhibit A contains the programs and strategies prioritized by the U.S. Department of Justice and/or the U.S. Department of Health & Human Services ("Core Strategies"). The State is trying to obtain the United States' agreement to limit or reduce the United States' ability to recover or recoup monies from the State and Local Government in exchange for prioritization of funds to certain projects. If no agreement is reached with the United States, then there will be no requirement that a percentage be utilized for Core Strategies.

3. **No Benefit Unless Fully Participating** - Any Local Government that objects to or refuses to be included under the Order or refuses or fails to execute any of documents necessary to effectuate a Settlement shall not receive, directly or indirectly, any Opioid Funds and its portion of Opioid Funds shall be distributed to, and for the benefit of, the Local Governments. Funds that were a for a Municipality that does not join a Settlement will be distributed to the County where that Municipality is located. Funds that were for a County that does not join a Settlement will be distributed pro rata to Counties that join a Settlement. For avoidance of doubt, if a Local Government initially refuses to be included in or execute the documents necessary to effectuate a Settlement and subsequently effectuates such documents necessary to join a Settlement, then that Local Government will only lose those payments made under a Settlement while that Local Government was not a part of the Settlement. If a Local Government

participates in a Settlement, that Local Government is thereby releasing the claims of its Dependent Special District claims, if any.

4. **Distribution Scheme** – If a Settlement has a National Settlement Administrator or similar entity, all Opioids Funds will initially go to the Administrator to be distributed. If a Settlement does not have a National Settlement Administrator or similar entity, all Opioid Funds will initially go to the State, and then be distributed by the State as they are received from the Defendants according to the following distribution scheme. The Opioid Funds will be divided into three funds after deducting any costs of the Expense Fund detailed below. Funds due the federal government, if any, pursuant to Section B-2, will be subtracted from only the State and Regional Funds below:

(a) City/County Fund- The city/county fund will receive 15% of all Opioid Funds to directly benefit all Counties and Municipalities. The amounts to be distributed to each County and Municipality shall be determined by the Negotiation Class Metrics or other metrics agreed upon, in writing, by a County and a Municipality, which are attached to this Agreement as Exhibit "C." In the event that a Municipality has a Population less than 10,000 people and it does not execute a release or otherwise join a Settlement that Municipalities share under the Negotiation Class Metrics shall be reallocated to the County where that Municipality is located.

(b) Regional Fund- The regional fund will be subdivided into two parts.

(i) The State will annually calculate the share of each County within the State of the regional fund utilizing the sliding scale in paragraph 5 of the Agreement, and according to the Negotiation Class Metrics.

(ii) For Qualified Counties, the Qualified County's share will be paid to the Qualified County and expended on Approved Purposes, including the Core Strategies identified in Exhibit A, if applicable.

(iii) For all other Counties, the State will appropriate the regional share for each County and pay that share through DCF to the Managing Entities providing service for that County. The Managing Entities will be required to expend the monies on Approved Purposes, including the Core Strategies as directed by the Opioid Abatement Task Force or Council. The Managing Entities shall expend monies from this Regional Fund on services for the Counties within the State that are non-Qualified Counties and to ensure that there are services in every County. To the greatest extent practicable, the Managing Entities shall endeavor to expend monies in each County or for citizens of a County in the amount of the share that a County would have received if it were a Qualified County.

(c) State Fund - The remainder of Opioid Funds will be expended by the State on Approved Purposes, including the provisions related to Core Strategies, if applicable.

(d) To the extent that Opioid Funds are not appropriated and expended in a year by the State, the State shall identify the investments where settlement funds will be

deposited. Any gains, profits, or interest accrued from the deposit of the Opioid Funds to the extent that any funds are not appropriated and expended within a calendar year, shall be the sole property of the Party that was entitled to the initial amount.

(e) To the extent a County or Municipality wishes to pool, comingle, or otherwise transfer its share, in whole or part, of Opioid Funds to another County or Municipality, the comingling Municipalities may do so by written agreement. The comingling Municipalities shall provide a copy of that agreement to the State and any settlement administrator to ensure that monies are directed consistent with such agreement. The County or Municipality receiving any such Opioid Funds shall assume the responsibility for reporting how such Opioid Funds were utilized under this Agreement.

5. Regional Fund Sliding Scale- The Regional Fund shall be calculated by utilizing the following sliding scale of the Opioid Funds available in any year after deduction of Expenses and any funds due the federal government:

A. Years 1-6: 40%

B. Years 7-9: 35%

C. Years 10-12: 34%

D. Years 13-15: 33%

E. Years 16-18: 30%

6. Opioid Abatement Taskforce or Council - The State will create an Opioid Abatement Taskforce or Council (sometimes hereinafter "Taskforce" or "Council") to advise the Governor, the Legislature, DCF, and Local Governments on the priorities that should be addressed by expenditure of Opioid Funds and to review how monies have been spent and the results that have been achieved with Opioid Funds.

(a) Size - The Taskforce or Council shall have ten Members equally balanced between the State and the Local Government representatives.

(b) Appointments Local Governments - Two Municipality representatives will be appointed by or through Florida League of Cities. Two county representatives, one from a Qualified County and one from a county within the State that is not a Qualified County, will be appointed by or through the Florida Association of Counties. The final representative will alternate every two years between being a county representative (appointed by or through Florida Association of Counties) or a Municipality representative (appointed by or through the Florida League of Cities). One Municipality representative must be from a city of less than 50,000 people. One county representative must be from a county of less than 200,000 people and the other county representative must be from a county whose population exceeds 200,000 people.

(c) Appointments State -

(i) The Governor shall appoint two Members.

(ii) The Speaker of the House shall appoint one Member.

(iii) The Senate President shall appoint one Member.

(iv) The Attorney General or her designee shall be a Member.

(d) Chair - The Attorney General or designee shall be the chair of the Taskforce or Council.

(e) Term - Members will be appointed to serve a four-year term and shall be staggered to comply with Florida Statutes § 20.052(4)(c).

(f) Support - DCF shall support the Taskforce or Council and the Taskforce or Council shall be administratively housed in DCF.

(g) Meetings - The Taskforce or Council shall meet quarterly in person or virtually using communications media technology as defined in section 120.54(5)(b)(2), Florida Statutes.

(h) Reporting - The Taskforce or Council shall provide and publish a report annually no later than November 30th or the first business day after November 30th, if November 30th falls on a weekend or is otherwise not a business day. The report shall contain information on how monies were spent the previous fiscal year by the State, each of the Qualified Counties, each of the Managing Entities, and each of the Local Governments. It shall also contain recommendations to the Governor, the Legislature, and Local Governments for priorities among the Approved Purposes or similar such uses for how monies should be spent the coming fiscal year to respond to the opioid epidemic. Prior to July 1st of each year, the State and each of the Local Governments shall provide information to DCF about how they intend to expend Opioid Funds in the upcoming fiscal year.

(i) Accountability - The State and each of the Local Governments shall report its expenditures to DCF no later than August 31st for the previous fiscal year. The Taskforce or Council will set other data sets that need to be reported to DCF to demonstrate the effectiveness of expenditures on Approved Purposes. In setting those requirements, the Taskforce or Council shall consider the Reporting Templates, Deliverables, Performance Measures, and other already utilized and existing templates and forms required by DCF from Managing Entities and suggest that similar requirements be utilized by all Parties to this Agreement.

(j) Conflict of Interest - All Members shall adhere to the rules, regulations and laws of Florida including, but not limited to, Florida Statute §112.311, concerning the disclosure of conflicts of interest and recusal from discussions or votes on conflicted matters.

7. **Administrative Costs**- The State may take no more than a 5% administrative fee from the State Fund and any Regional Fund that it administers for counties that are not Qualified Counties. Each Qualified County may take no more than a 5% administrative fee from its share of the Regional Funds. Municipalities and Counties may take no more than a 5% administrative fee from any funds that they receive or control from the City/County Fund.

8. **Negotiation of Non-Multistate Settlements** - If the State begins negotiations with a Pharmaceutical Supply Chain Participant that is separate and apart from a multi-state negotiation, the State shall include Local Governments that are a part of the Negotiating Committee in such negotiations. No Settlement shall be recommended or accepted without the affirmative votes of both the State and Local Government representatives of the Negotiating Committee.

9. **Negotiation of Multistate or Local Government Settlements** - To the extent practicable and allowed by other parties to a negotiation, both Parties agree to communicate with members of the Negotiation Committee regarding the terms of any other Pharmaceutical Supply Chain Participant Settlement.

10. **Program Requirements**- DCF and Local Governments desire to make the most efficient and effective use of the Opioid Funds. DCF and Local Governments will work to achieve that goal by ensuring the following requirements will be minimally met by any governmental entity or provider providing services pursuant to a contract or grant of Opioid Funds:

a. In either performing services under this Agreement or contracting with a provider to provide services with the Opioid Funds under this Agreement, the State and Local Governments shall be aware of and comply with all State and Federal laws, rules, Children and Families Operating Procedures (CFOPs), and similar regulations relating to the substance abuse and treatment services.

b. The State and Local Governments shall have and follow their existing policies and practices for accounting and auditing, including policies relating to whistleblowers and avoiding fraud, waste, and abuse. The State and Local Governments shall consider additional policies and practices recommended by the Opioid Abatement Taskforce or Council. c. In any award or grant to any provider, State and Local Governments shall ensure that each provider acknowledges its awareness of its obligations under law and shall audit, supervise, or review each provider's performance routinely, at least once every year.

d. In contracting with a provider, the State and Local Governments shall set performance measures in writing for a provider.

e. The State and Local Governments shall receive and report expenditures, service utilization data, demographic information, and national outcome measures in a similar fashion as required by the 42.U.S.C. s. 300x and 42 U.S.C. s. 300x-21.

f. The State and Local Governments, that implement evidenced based practice models will participate in fidelity monitoring as prescribed and completed by the originator of the model chosen..

g. The State and Local Governments shall ensure that each year, an evaluation of the procedures and activities undertaken to comply with the requirements of this Agreement are completed.

h. The State and Local Governments shall implement a monitoring process that will demonstrate oversight and corrective action in the case of non-compliance, for all providers that receive Opioid Funds. Monitoring shall include:

(i) Oversight of the any contractual or grant requirements;

(ii) Develop and utilize standardized monitoring tools;

(iii) Provide DCF and the Opioid Abatement Taskforce or Council with access to the monitoring reports; and

(iv) Develop and utilize the monitoring reports to create corrective action plans for providers, where necessary.

11. **Reporting and Records Requirements-** The State and Local Governments shall follow their existing reporting and records retention requirements along with considering any additional recommendations from the Opioid Abatement Taskforce or Council. Local Governments shall respond and provide documents to any reasonable requests from the State or Opioid Abatement Taskforce or Council for data or information about programs receiving Opioid Funds. The State and Local Governments shall ensure that any provider or sub-recipient of Opioid Funds at a minimum does the following:

(a) Any provider shall establish and maintain books, records and documents (including electronic storage media) sufficient to reflect all income and expenditures of Opioid Funds. Upon demand, at no additional cost to the State or Local Government, any provider will facilitate the duplication and transfer of any records or documents during the term that it receives any Opioid Funds and the required retention period for the State or Local Government. These records shall be made available at all reasonable times for inspection, review, copying, or audit by Federal, State, or other personnel duly authorized by the State or Local Government.

(b) Any provider shall retain and maintain all client records, financial records, supporting documents, statistical records, and any other documents (including electronic storage media) pertinent to the use of the Opioid Funds during the term of its receipt of Opioid Funds and retained for a period of six (6) years after its ceases to receives Opioid Funds or longer when required by law. In the event an audit is required by the State of Local Governments, records shall be retained for a minimum period of six (6) years after the audit report is issued or until resolution of any audit findings or litigation based on the terms of any award or contract.

(c) At all reasonable times for as long as records are maintained, persons duly authorized by State or Local Government auditors shall be allowed full access to and the right to examine any of the contracts and related records and documents, regardless of the form in which kept.

(d) A financial and compliance audit shall be performed annually and provided to the State.

(e) All providers shall comply and cooperate immediately with any inspections, reviews, investigations, or audits deemed necessary by The Office of the Inspector General (section 20.055, F.S.) or the State.

(f) No record may be withheld nor may any provider attempt to limit the scope of any of the foregoing inspections, reviews, copying, transfers or audits based on any claim that any record is exempt from public inspection or is confidential, proprietary or trade secret in nature; provided, however, that this provision does not limit any exemption to public inspection or copying to any such record.

12. **Expense Fund** - The Parties agree that in any negotiation every effort shall be made to cause Pharmaceutical Supply Chain Participants to pay costs of litigation, including attorneys' fees, in addition to any agreed to Opioid Funds in the Settlement. To the extent that a fund sufficient to pay the full contingent fees of Local Governments is not created as part of a Settlement by a Pharmaceutical Supply Chain Participant, the Parties agree that an additional expense fund for attorneys who represent Local Governments (herein "Expense Fund") shall be created out of the City/County fund for the purpose of paying the hard costs of a litigating Local Government and then paying attorneys' fees.

(a) The Source of Funds for the Expense Fund- Money for the Expense Fund shall be sourced exclusively from the City/County Fund.

(b) The Amount of the Expense Fund- The State recognizes the value litigating Local Governments bring to the State in connection with the Settlement because their participation increases the amount of Incentive Payments due from each Pharmaceutical Supply Chain Participant. In recognition of that value, the amount of funds that shall be deposited into the Expense Fund shall be contingent upon on the percentage of litigating Local Government participation in the Settlement, according to the following table:

Litigating Local Government Participation in the Settlement (by percentage of the population)	Amount that shall be paid into the Expense Fund from (and as a percentage of) the City/County fund
96 to 100%	10%
91 to 95%	7.5%
86 to 90%	5%
85%	2.5%
Less than 85%	0%

If fewer than 85% percent of the litigating Local Governments (by population) participate, then the Expense Fund shall not be funded, and this Section of the Agreement shall be null and void.

(c) The Timing of Payments into the Expense Fund- Although the amount of the Expense Fund shall be calculated based on the entirety of payments due to the City/County fund over a ten-to-eighteen-year period, the Expense Fund shall be funded entirely from payments made by Pharmaceutical Supply Chain Participants during the first two payments of the Settlement. Accordingly, to offset the amounts being paid from the City/County Fund to the Expense Fund in the first two years, Counties or Municipalities may borrow from the Regional Fund during the first two years and pay the borrowed amounts back to the Regional Fund during years three, four, and five.

For the avoidance of doubt, the following provides an illustrative example regarding the calculation of payments and amounts that may be borrowed under the terms of this MOU, consistent with the provisions of this Section:

Opioid Funds due to State of Florida and Local Governments (over 10 to 18 years):	$1,000
Litigating Local Government Participation:	100%
City/County Fund (over 10 to 18 years):	$150
Expense Fund (paid over 2 years):	$15
Amount Paid to Expense Fund in 1st year:	$7.5
Amount Paid to Expense Fund in 2nd year	$7.5
Amount that may be borrowed from Regional Fund in 1st year:	$7.5
Amount that may be borrowed from Regional Fund in 2nd year:	$7.5
Amount that must be paid back to Regional Fund in 3rd year:	$5
Amount that must be paid back to Regional Fund in 4th year:	$5
Amount that must be paid back to Regional Fund in 5th year:	$5

(d) Creation of and Jurisdiction over the Expense Fund- The Expense Fund shall be established, consistent with the provisions of this Section of the Agreement, by order of the Court. The Court shall have jurisdiction over the Expense Fund, including authority to allocate and disburse amounts from the Expense Fund and to resolve any disputes concerning the Expense Fund.

(e) Allocation of Payments to Counsel from the Expense Fund- As part of the order establishing the Expense Fund, counsel for the litigating Local Governments shall seek to have the Court appoint a third-neutral to serve as a special master for purposes of allocating the Expense Fund. Within 30 days of entry of the order appointing a special master for the Expense Fund, any counsel who intend to seek an award from the Expense Fund shall provide the copies of their contingency fee contracts to the special master. The special master shall then build a mathematical model, which shall be based on each litigating Local Government's share under the Negotiation Class Metrics and the rate set forth in their contingency contracts, to calculate a proposed award for each litigating Local Government who timely provided a copy of its contingency contract.

13. **Dispute resolution-** Any one or more of the Local Governments or the State may object to an allocation or expenditure of Opioid Funds solely on the basis that the allocation or expenditure at issue (a) is inconsistent with the Approved Purposes; (b) is inconsistent with the distribution scheme as provided in paragraph,; (c) violates the limitations set forth herein with respect to administrative costs or the Expense Fund; or (d) to recover amounts advanced from the Regional Fund for the Expense Fund. There shall be no other basis for bringing an objection to the approval of an allocation or expenditure of Opioid Funds. In the event that there is a National Settlement Administrator or similar entity, the Local Governments sole action for non-payment of amounts due from the City/County Fund shall be against the particular settling defendant and/or the National Settlement Administrator or similar entity.

C. Other Terms and Conditions

1. **Governing Law and Venue**: This Agreement will be governed by the laws of the State of Florida. Any and all litigation arising under the Agreement, unless otherwise specified in this Agreement, will be instituted in either: (a) the Court that enters the Order if the matter deals with a matter covered by the Order and the Court retains jurisdiction; or (b) the appropriate State court in Leon County, Florida.

2. **Agreement Management and Notification:** The Parties have identified the following individuals as Agreement Managers and Administrators:

a. State of Florida Agreement Manager:

Greg Slemp

PL-01, The Capitol, Tallahassee, FL 32399

850-414-3300

Greg.slemp@myfloridalegal.com

b. State of Florida Agreement Administrator

Janna Barineau

PL-01, The Capitol, Tallahassee, FL 32399

850-414-3300

Janna.barineau@myfloridalegal.com

c. Local Governments Agreement Managers and Administrators are listed on Exhibit C to this Agreement.

Changes to either the Managers or Administrators may be made by notifying the other Party in writing, without formal amendment to this Agreement.

3. **Notices.** All notices required under the Agreement will be delivered by certified mail, return receipt requested, by reputable air courier, or by personal delivery to the designee identified in paragraphs C.2., above. Either designated recipient may notify the other, in writing, if someone else is designated to receive notice.

4. **Cooperation with Inspector General:** Pursuant to section 20.055, Florida Statutes, the Parties, understand and will comply with their duty to cooperate with the Inspector General in any investigation, audit, inspection, review, or hearing.

5. **Public Records**: The Parties will keep and maintain public records pursuant to Chapter 119, Florida Statutes and will comply will all applicable provisions of that Chapter.

6. **Modification**: This Agreement may only be modified by a written amendment between the appropriate parties. No promises or agreements made subsequent to the execution of this Agreement shall be binding unless express, reduced to writing, and signed by the Parties.

7. **Execution in Counterparts**: This Agreement may be executed in any number of counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

8. **Assignment:** The rights granted in this Agreement may not be assigned or transferred by any party without the prior written approval of the other party. No party shall be permitted to delegate its responsibilities or obligations under this Agreement without the prior written approval of the other parties.

9. **Additional Documents:** The Parties agree to cooperate fully and execute any and all supplementary documents and to take all additional actions which may be reasonably necessary or appropriate to give full force and effect to the basic terms and intent of this Agreement.

10. **Captions:** The captions contained in this Agreement are for convenience only and shall in no way define, limit, extend or describe the scope of this Agreement or any part of it.

11. **Entire Agreement:** This Agreement, including any attachments, embodies the entire agreement of the parties. There are no other provisions, terms, conditions, or obligations. This Agreement supersedes all previous oral or written communications, representations or agreements on this subject.

12. **Construction:** The parties hereto hereby mutually acknowledge and represent that they have been fully advised by their respective legal counsel of their rights and responsibilities under this Agreement, that they have read, know, and understand completely the contents hereof, and that they have voluntarily executed the same. The parties hereto further hereby mutually acknowledge that they have had input into the drafting of this Agreement and that, accordingly, in any construction to be made of this Agreement, it shall not be construed for or against any party, but rather shall be given a fair and reasonable interpretation, based on the plain language of the Agreement and the expressed intent of the parties.

13. **Capacity to Execute Agreement:** The parties hereto hereby represent and warrant that the individuals signing this Agreement on their behalf are duly authorized and fully competent to do so.

14. **Effectiveness:** This Agreement shall become effective on the date on which the last required signature is affixed to this Agreement.

IN WITNESS THEREOF, the parties hereto have caused the Agreement to be executed by their undersigned officials as duly authorized.

STATE OF FLORIDA

_____ 11/15/2021
By: _____ DATED
Its: _____

IN WITNESS WHEREOF, the parties hereto have by their duly authorized representatives executed this agreement on the dates set forth below.

COUNTY COMMISSIONERS ORGANIZED JUNE 2nd 1887 PASCO COUNTY FLORIDA

ATTEST:
By: _____
Nikki Alvarez-Sowles, Esq.
Clerk & Comptroller

BOARD OF COUNTY COMMISSIONERS
OF PASCO COUNTY, FLORIDA

By: _____
Chairman, Kathryn Starkey

APPROVED
IN SESSION

Date: DEC 07 2021

PASCO COUNTY
BCC

EXHIBIT A

Schedule A

Core Strategies

States and Qualifying Block Grantees shall choose from among the abatement strategies listed in Schedule B. However, priority shall be given to the following core abatement strategies ("**Core Strategies**")[, such that a minimum of __% of the [aggregate] state-level abatement distributions shall be spent on [one or more of] them annually].[1]

A. Naloxone or other FDA-approved drug to reverse opioid overdoses

1. Expand training for first responders, schools, community support groups and families; and

2. Increase distribution to individuals who are uninsured or whose insurance does not cover the needed service.

B. Medication-Assisted Treatment ("MAT") Distribution and other opioid-related treatment

1. Increase distribution of MAT to non-Medicaid eligible or uninsured individuals;

2. Provide education to school-based and youth-focused programs that discourage or prevent misuse;

3. Provide MAT education and awareness training to healthcare providers, EMTs, law enforcement, and other first responders; and

4. Treatment and Recovery Support Services such as residential and inpatient treatment, intensive outpatient treatment, outpatient therapy or counseling, and recovery housing that allow or integrate medication with other support services.

C. Pregnant & Postpartum Women

1. Expand Screening, Brief Intervention, and Referral to Treatment ("SBIRT") services to non-Medicaid eligible or uninsured pregnant women;

2. Expand comprehensive evidence-based treatment and recovery services, including MAT, for women with co-occurring Opioid Use Disorder ("OUD") and other Substance Use Disorder ("SUD")/Mental Health disorders for uninsured individuals for up to 12 months postpartum; and

3. Provide comprehensive wrap-around services to individuals with Opioid Use Disorder (OUD) including housing, transportation, job placement/training, and childcare.

D. Expanding Treatment for Neonatal Abstinence Syndrome

1. Expand comprehensive evidence-based and recovery support for NAS babies;

2. Expand services for better continuum of care with infant-need dyad; and

3. Expand long-term treatment and services for medical monitoring of NAS babies and their families.

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[1] As used in this Schedule A, words like "expand," "fund," "provide" or the like shall not indicate a preference for new or existing programs. Priorities will be established through the mechanisms described in the Term Sheet.

E. Expansion of Warm Hand-off Programs and Recovery Services

1. Expand services such as navigators and on-call teams to begin MAT in hospital emergency departments;

2. Expand warm hand-off services to transition to recovery services;

3. Broaden scope of recovery services to include co-occurring SUD or mental health conditions. ;

4. Provide comprehensive wrap-around services to individuals in recovery including housing, transportation, job placement/training, and childcare; and

5. Hire additional social workers or other behavioral health workers to facilitate expansions above.

F. Treatment for Incarcerated Population

1. Provide evidence-based treatment and recovery support including MAT for persons with OUD and co-occurring SUD/MH disorders within and transitioning out of the criminal justice system; and

2. Increase funding for jails to provide treatment to inmates with OUD.

G. Prevention Programs

1. Funding for media campaigns to prevent opioid use (similar to the FDA's "Real Cost" campaign to prevent youth from misusing tobacco);

2. Funding for evidence-based prevention programs in schools.;

3. Funding for medical provider education and outreach regarding best prescribing practices for opioids consistent with the 2016 CDC guidelines, including providers at hospitals (academic detailing);

4. Funding for community drug disposal programs; and

5. Funding and training for first responders to participate in pre-arrest diversion programs, post-overdose response teams, or similar strategies that connect at-risk individuals to behavioral health services and supports.

H. Expanding Syringe Service Programs

1. Provide comprehensive syringe services programs with more wrap-around services including linkage to OUD treatment, access to sterile syringes, and linkage to care and treatment of infectious diseases.

I. Evidence-based data collection and research analyzing the effectiveness of the abatement strategies within the State.

EXHIBIT B

Schedule B

Approved Uses

PART ONE: TREATMENT

A. TREAT OPIOID USE DISORDER (OUD)

Support treatment of Opioid Use Disorder (OUD) and any co-occurring Substance Use Disorder or Mental Health (SUD/MH) conditions through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following:[2]

1. Expand availability of treatment for OUD and any co-occurring SUD/MH conditions, including all forms of Medication-Assisted Treatment (MAT) approved by the U.S. Food and Drug Administration.

2. Support and reimburse evidence-based services that adhere to the American Society of Addiction Medicine (ASAM) continuum of care for OUD and any co-occurring SUD/MH conditions

3. Expand telehealth to increase access to treatment for OUD and any co-occurring SUD/MH conditions, including MAT, as well as counseling, psychiatric support, and other treatment and recovery support services.

4. Improve oversight of Opioid Treatment Programs (OTPs) to assure evidence-based or evidence-informed practices such as adequate methadone dosing and low threshold approaches to treatment.

5. Support mobile intervention, treatment, and recovery services, offered by qualified professionals and service providers, such as peer recovery coaches, for persons with OUD and any co-occurring SUD/MH conditions and for persons who have experienced an opioid overdose.

6. Treatment of trauma for individuals with OUD (e.g., violence, sexual assault, human trafficking, or adverse childhood experiences) and family members (e.g., surviving family members after an overdose or overdose fatality), and training of health care personnel to identify and address such trauma.

7. Support evidence-based withdrawal management services for people with OUD and any co-occurring mental health conditions.

8. Training on MAT for health care providers, first responders, students, or other supporting professionals, such as peer recovery coaches or recovery outreach specialists, including telementoring to assist community-based providers in rural or underserved areas.

9. Support workforce development for addiction professionals who work with persons with OUD and any co-occurring SUD/MH conditions.

10. Fellowships for addiction medicine specialists for direct patient care, instructors, and clinical research for treatments.

11. Scholarships and supports for behavioral health practitioners or workers involved in addressing OUD and any co-occurring SUD or mental health conditions, including but not limited to training,

[2] As used in this Schedule B, words like "expand," "fund," "provide" or the like shall not indicate a preference for new or existing programs. Priorities will be established through the mechanisms described in the Term Sheet.

scholarships, fellowships, loan repayment programs, or other incentives for providers to work in rural or underserved areas.

12. [Intentionally Blank – to be cleaned up later for numbering]

13. Provide funding and training for clinicians to obtain a waiver under the federal Drug Addiction Treatment Act of 2000 (DATA 2000) to prescribe MAT for OUD, and provide technical assistance and professional support to clinicians who have obtained a DATA 2000 waiver.

14. Dissemination of web-based training curricula, such as the American Academy of Addiction Psychiatry's Provider Clinical Support Service-Opioids web-based training curriculum and motivational interviewing.

15. Development and dissemination of new curricula, such as the American Academy of Addiction Psychiatry's Provider Clinical Support Service for Medication-Assisted Treatment.

B. SUPPORT PEOPLE IN TREATMENT AND RECOVERY

Support people in treatment for or recovery from OUD and any co-occurring SUD/MH conditions through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following:

1. Provide comprehensive wrap-around services to individuals with OUD and any co-occurring SUD/MH conditions, including housing, transportation, education, job placement, job training, or childcare.

2. Provide the full continuum of care of treatment and recovery services for OUD and any co-occurring SUD/MH conditions, including supportive housing, peer support services and counseling, community navigators, case management, and connections to community-based services.

3. Provide counseling, peer-support, recovery case management and residential treatment with access to medications for those who need it to persons with OUD and any co-occurring SUD/MH conditions.

4. Provide access to housing for people with OUD and any co-occurring SUD/MH conditions, including supportive housing, recovery housing, housing assistance programs, training for housing providers, or recovery housing programs that allow or integrate FDA-approved medication with other support services.

5. Provide community support services, including social and legal services, to assist in deinstitutionalizing persons with OUD and any co-occurring SUD/MH conditions.

6. Support or expand peer-recovery centers, which may include support groups, social events, computer access, or other services for persons with OUD and any co-occurring SUD/MH conditions.

7. Provide or support transportation to treatment or recovery programs or services for persons with OUD and any co-occurring SUD/MH conditions.

8. Provide employment training or educational services for persons in treatment for or recovery from OUD and any co-occurring SUD/MH conditions.

9. Identify successful recovery programs such as physician, pilot, and college recovery programs, and provide support and technical assistance to increase the number and capacity of high-quality programs to help those in recovery.

10. Engage non-profits, faith-based communities, and community coalitions to support people in treatment and recovery and to support family members in their efforts to support the person with OUD in the family.

11. Training and development of procedures for government staff to appropriately interact and provide social and other services to individuals with or in recovery from OUD, including reducing stigma.

12. Support stigma reduction efforts regarding treatment and support for persons with OUD, including reducing the stigma on effective treatment.

13. Create or support culturally appropriate services and programs for persons with OUD and any co-occurring SUD/MH conditions, including new Americans.

14. Create and/or support recovery high schools.

15. Hire or train behavioral health workers to provide or expand any of the services or supports listed above.

C. CONNECT PEOPLE WHO NEED HELP TO THE HELP THEY NEED (CONNECTIONS TO CARE)

Provide connections to care for people who have – or at risk of developing – OUD and any co-occurring SUD/MH conditions through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following:

1. Ensure that health care providers are screening for OUD and other risk factors and know how to appropriately counsel and treat (or refer if necessary) a patient for OUD treatment.

2. Fund Screening, Brief Intervention and Referral to Treatment (SBIRT) programs to reduce the transition from use to disorders, including SBIRT services to pregnant women who are uninsured or not eligible for Medicaid.

3. Provide training and long-term implementation of SBIRT in key systems (health, schools, colleges, criminal justice, and probation), with a focus on youth and young adults when transition from misuse to opioid disorder is common.

4. Purchase automated versions of SBIRT and support ongoing costs of the technology.

5. Expand services such as navigators and on-call teams to begin MAT in hospital emergency departments.

6. Training for emergency room personnel treating opioid overdose patients on post-discharge planning, including community referrals for MAT, recovery case management or support services.

7. Support hospital programs that transition persons with OUD and any co-occurring SUD/MH conditions, or persons who have experienced an opioid overdose, into clinically-appropriate follow-up care through a bridge clinic or similar approach.

8. Support crisis stabilization centers that serve as an alternative to hospital emergency departments for persons with OUD and any co-occurring SUD/MH conditions or persons that have experienced an opioid overdose.

9. Support the work of Emergency Medical Systems, including peer support specialists, to connect individuals to treatment or other appropriate services following an opioid overdose or other opioid-related adverse event.

10. Provide funding for peer support specialists or recovery coaches in emergency departments, detox facilities, recovery centers, recovery housing, or similar settings; offer services, supports, or connections to care to persons with OUD and any co-occurring SUD/MH conditions or to persons who have experienced an opioid overdose.

11. Expand warm hand-off services to transition to recovery services.

12. Create or support school-based contacts that parents can engage with to seek immediate treatment services for their child; and support prevention, intervention, treatment, and recovery programs focused on young people.

13. Develop and support best practices on addressing OUD in the workplace.

14. Support assistance programs for health care providers with OUD.

15. Engage non-profits and the faith community as a system to support outreach for treatment.

16. Support centralized call centers that provide information and connections to appropriate services and supports for persons with OUD and any co-occurring SUD/MH conditions.

D. ADDRESS THE NEEDS OF CRIMINAL-JUSTICE-INVOLVED PERSONS

Address the needs of persons with OUD and any co-occurring SUD/MH conditions who are involved in, are at risk of becoming involved in, or are transitioning out of the criminal justice system through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following:

1. Support pre-arrest or pre-arraignment diversion and deflection strategies for persons with OUD and any co-occurring SUD/MH conditions, including established strategies such as:

a. Self-referral strategies such as the Angel Programs or the Police Assisted Addiction Recovery Initiative (PAARI);

b. Active outreach strategies such as the Drug Abuse Response Team (DART) model;

c. "Naloxone Plus" strategies, which work to ensure that individuals who have received naloxone to reverse the effects of an overdose are then linked to treatment programs or other appropriate services;

d. Officer prevention strategies, such as the Law Enforcement Assisted Diversion (LEAD) model;

e. Officer intervention strategies such as the Leon County, Florida Adult Civil Citation Network or the Chicago Westside Narcotics Diversion to Treatment Initiative; or

f. Co-responder and/or alternative responder models to address OUD-related 911 calls with greater SUD expertise

2. Support pre-trial services that connect individuals with OUD and any co-occurring SUD/MH conditions to evidence-informed treatment, including MAT, and related services.

3. Support treatment and recovery courts that provide evidence-based options for persons with OUD and any co-occurring SUD/MH conditions

4. Provide evidence-informed treatment, including MAT, recovery support, harm reduction, or other appropriate services to individuals with OUD and any co-occurring SUD/MH conditions who are incarcerated in jail or prison.

5. Provide evidence-informed treatment, including MAT, recovery support, harm reduction, or other appropriate services to individuals with OUD and any co-occurring SUD/MH conditions who are leaving jail or prison have recently left jail or prison, are on probation or parole, are under community corrections supervision, or are in re-entry programs or facilities.

6. Support critical time interventions (CTI), particularly for individuals living with dual-diagnosis OUD/serious mental illness, and services for individuals who face immediate risks and service needs and risks upon release from correctional settings.

7. Provide training on best practices for addressing the needs of criminal-justice-involved persons with OUD and any co-occurring SUD/MH conditions to law enforcement, correctional, or judicial personnel or to providers of treatment, recovery, harm reduction, case management, or other services offered in connection with any of the strategies described in this section.

E. ADDRESS THE NEEDS OF PREGNANT OR PARENTING WOMEN AND THEIR FAMILIES, INCLUDING BABIES WITH NEONATAL ABSTINENCE SYNDROME

Address the needs of pregnant or parenting women with OUD and any co-occurring SUD/MH conditions, and the needs of their families, including babies with neonatal abstinence syndrome (NAS), through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following:

1. Support evidence-based or evidence-informed treatment, including MAT, recovery services and supports, and prevention services for pregnant women – or women who could become pregnant – who have OUD and any co-occurring SUD/MH conditions, and other measures to educate and provide support to families affected by Neonatal Abstinence Syndrome.

2. Expand comprehensive evidence-based treatment and recovery services, including MAT, for uninsured women with OUD and any co-occurring SUD/MH conditions for up to 12 months postpartum.

3. Training for obstetricians or other healthcare personnel that work with pregnant women and their families regarding treatment of OUD and any co-occurring SUD/MH conditions.

4. Expand comprehensive evidence-based treatment and recovery support for NAS babies; expand services for better continuum of care with infant-need dyad; expand long-term treatment and services for medical monitoring of NAS babies and their families.

5. Provide training to health care providers who work with pregnant or parenting women on best practices for compliance with federal requirements that children born with Neonatal Abstinence Syndrome get referred to appropriate services and receive a plan of safe care.

6. Child and family supports for parenting women with OUD and any co-occurring SUD/MH conditions.

7. Enhanced family supports and child care services for parents with OUD and any co-occurring SUD/MH conditions.

8. Provide enhanced support for children and family members suffering trauma as a result of addiction in the family; and offer trauma-informed behavioral health treatment for adverse childhood events.

9. Offer home-based wrap-around services to persons with OUD and any co-occurring SUD/MH conditions, including but not limited to parent skills training.

10. Support for Children's Services – Fund additional positions and services, including supportive housing and other residential services, relating to children being removed from the home and/or placed in foster care due to custodial opioid use.

PART TWO: PREVENTION

F. PREVENT OVER-PRESCRIBING AND ENSURE APPROPRIATE PRESCRIBING AND DISPENSING OF OPIOIDS

Support efforts to prevent over-prescribing and ensure appropriate prescribing and dispensing of opioids through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following:

1. Fund medical provider education and outreach regarding best prescribing practices for opioids consistent with Guidelines for Prescribing Opioids for Chronic Pain from the U.S. Centers for Disease Control and Prevention, including providers at hospitals (academic detailing).

2. Training for health care providers regarding safe and responsible opioid prescribing, dosing, and tapering patients off opioids.

3. Continuing Medical Education (CME) on appropriate prescribing of opioids.

4. Support for non-opioid pain treatment alternatives, including training providers to offer or refer to multi-modal, evidence-informed treatment of pain.

5. Support enhancements or improvements to Prescription Drug Monitoring Programs (PDMPs), including but not limited to improvements that:

a. Increase the number of prescribers using PDMPs;

b. Improve point-of-care decision-making by increasing the quantity, quality, or format of data available to prescribers using PDMPs, by improving the interface that prescribers use to access PDMP data, or both; or

c. Enable states to use PDMP data in support of surveillance or intervention strategies, including MAT referrals and follow-up for individuals identified within PDMP data as likely to experience OUD in a manner that complies with all relevant privacy and security laws and rules.

6. Ensuring PDMPs incorporate available overdose/naloxone deployment data, including the United States Department of Transportation's Emergency Medical Technician overdose database in a manner that complies with all relevant privacy and security laws and rules.

7. Increase electronic prescribing to prevent diversion or forgery.

8. Educate Dispensers on appropriate opioid dispensing.

G. PREVENT MISUSE OF OPIOIDS

Support efforts to discourage or prevent misuse of opioids through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following:

1. Fund media campaigns to prevent opioid misuse.

2. Corrective advertising or affirmative public education campaigns based on evidence.

3. Public education relating to drug disposal.

4. Drug take-back disposal or destruction programs.

5. Fund community anti-drug coalitions that engage in drug prevention efforts.

6. Support community coalitions in implementing evidence-informed prevention, such as reduced social access and physical access, stigma reduction – including staffing, educational campaigns, support for people in treatment or recovery, or training of coalitions in evidence-informed implementation, including the Strategic Prevention Framework developed by the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA).

7. Engage non-profits and faith-based communities as systems to support prevention.

8. Fund evidence-based prevention programs in schools or evidence-informed school and community education programs and campaigns for students, families, school employees, school athletic programs, parent-teacher and student associations, and others.

9. School-based or youth-focused programs or strategies that have demonstrated effectiveness in preventing drug misuse and seem likely to be effective in preventing the uptake and use of opioids.

10. Create of support community-based education or intervention services for families, youth, and adolescents at risk for OUD and any co-occurring SUD/MH conditions.

11. Support evidence-informed programs or curricula to address mental health needs of young people who may be at risk of misusing opioids or other drugs, including emotional modulation and resilience skills.

12. Support greater access to mental health services and supports for young people, including services and supports provided by school nurses, behavioral health workers or other school staff, to address

mental health needs in young people that (when not properly addressed) increase the risk of opioid or other drug misuse.

H. PREVENT OVERDOSE DEATHS AND OTHER HARMS (HARM REDUCTION)

Support efforts to prevent or reduce overdose deaths or other opioid-related harms through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following:

1. Increase availability and distribution of naloxone and other drugs that treat overdoses for first responders, overdose patients, individuals with OUD and their friends and family members, individuals at high risk of overdose, schools, community navigators and outreach workers, persons being released from jail or prison, or other members of the general public.

2. Public health entities provide free naloxone to anyone in the community

3. Training and education regarding naloxone and other drugs that treat overdoses for first responders, overdose patients, patients taking opioids, families, schools, community support groups, and other members of the general public.

4. Enable school nurses and other school staff to respond to opioid overdoses, and provide them with naloxone, training, and support.

5. Expand, improve, or develop data tracking software and applications for overdoses/naloxone revivals.

6. Public education relating to emergency responses to overdoses.

7. Public education relating to immunity and Good Samaritan laws.

8. Educate first responders regarding the existence and operation of immunity and Good Samaritan laws.

9. Syringe service programs and other evidence-informed programs to reduce harms associated with intravenous drug use, including supplies, staffing, space, peer support services, referrals to treatment, fentanyl checking, connections to care, and the full range of harm reduction and treatment services provided by these programs.

10. Expand access to testing and treatment for infectious diseases such as HIV and Hepatitis C resulting from intravenous opioid use.

11. Support mobile units that offer or provide referrals to harm reduction services, treatment, recovery supports, health care, or other appropriate services to persons that use opioids or persons with OUD and any co-occurring SUD/MH conditions.

12. Provide training in harm reduction strategies to health care providers, students, peer recovery coaches, recovery outreach specialists, or other professionals that provide care to persons who use opioids or persons with OUD and any co-occurring SUD/MH conditions.

13. Support screening for fentanyl in routine clinical toxicology testing.

PART THREE: OTHER STRATEGIES

I. FIRST RESPONDERS

In addition to items in sections C, D, and H relating to first responders, support the following:

1. Educate law enforcement or other first responders regarding appropriate practices and precautions when dealing with fentanyl or other drugs.

2. Provision of wellness and support services for first responders and others who experience secondary trauma associated with opioid-related emergency events.

J. LEADERSHIP, PLANNING AND COORDINATION

Support efforts to provide leadership, planning, coordination, facilitation, training and technical assistance to abate the opioid epidemic through activities, programs, or strategies that may include, but are not limited to, the following:

1. Statewide, regional, local, or community regional planning to identify root causes of addiction and overdose, goals for reducing harms related to the opioid epidemic, and areas and populations with the greatest needs for treatment intervention services; to support training and technical assistance; or to support other strategies to abate the opioid epidemic described in this opioid abatement strategy list.

2. A dashboard to share reports, recommendations, or plans to spend opioid settlement funds; to show how opioid settlement funds have been spent; to report program or strategy outcomes; or to track, share, or visualize key opioid-related or health-related indicators and supports as identified through collaborative statewide, regional, local, or community processes.

3. Invest in infrastructure or staffing at government or not-for-profit agencies to support collaborative, cross-system coordination with the purpose of preventing overprescribing, opioid misuse, or opioid overdoses, treating those with OUD and any co-occurring SUD/MH conditions, supporting them in treatment or recovery, connecting them to care, or implementing other strategies to abate the opioid epidemic described in this opioid abatement strategy list.

4. Provide resources to staff government oversight and management of opioid abatement programs.

K. TRAINING

In addition to the training referred to throughout this document, support training to abate the opioid epidemic through activities, programs, or strategies that may include, but are not limited to, the following:

1. Provide funding for staff training or networking programs and services to improve the capability of government, community, and not-for-profit entities to abate the opioid crisis.

2. Support infrastructure and staffing for collaborative cross-system coordination to prevent opioid misuse, prevent overdoses, and treat those with OUD and any co-occurring SUD/MH conditions, or implement other strategies to abate the opioid epidemic described in this opioid abatement strategy list (e.g., health care, primary care, pharmacies, PDMPs, etc.).

L. RESEARCH

Support opioid abatement research that may include, but is not limited to, the following:

1. Monitoring, surveillance, data collection, and evaluation of programs and strategies described in this opioid abatement strategy list.

2. Research non-opioid treatment of chronic pain.

3. Research on improved service delivery for modalities such as SBIRT that demonstrate promising but mixed results in populations vulnerable to opioid use disorders.

4. Research on novel harm reduction and prevention efforts such as the provision of fentanyl test strips.

5. Research on innovative supply-side enforcement efforts such as improved detection of mail-based delivery of synthetic opioids.

6. Expanded research on swift/certain/fair models to reduce and deter opioid misuse within criminal justice populations that build upon promising approaches used to address other substances (e.g. Hawaii HOPE and Dakota 24/7).

7. Epidemiological surveillance of OUD-related behaviors in critical populations including individuals entering the criminal justice system, including but not limited to approaches modeled on the Arrestee Drug Abuse Monitoring (ADAM) system.

8. Qualitative and quantitative research regarding public health risks and harm reduction opportunities within illicit drug markets, including surveys of market participants who sell or distribute illicit opioids.

9. Geospatial analysis of access barriers to MAT and their association with treatment engagement and treatment outcomes.

EXHIBIT C

County	Allocated Subdivisions	Regional % by County for Abatement Fund	City/County Fund %
Alachua		1.241060164449%	
	Alachua County		0.821689546303%
	Alachua		0.013113332457%
	Archer		0.000219705515%
	Gainesville		0.381597611347%
	Hawthorne		0.000270546460%
	High Springs		0.011987568663%
	La Crosse		0.000975056706%
	Micanopy		0.002113530737%
	Newberry		0.006102729215%
	Waldo		0.002988721299%
Baker		0.193173804130%	
	Baker County		0.169449240037%
	Glen St. Mary		0.000096234647%
	Macclenny		0.023628329446%
Bay		0.839656373312%	
	Bay County		0.508772605155%
	Callaway		0.024953825527%
	Lynn Haven		0.039205632015%
	Mexico Beach		0.005614292988%
	Panama City		0.155153855596%
	Panama City Beach		0.080897023117%
	Parker		0.008704696178%
	Springfield		0.016354442736%
Bradford		0.189484204081%	
	Bradford County		0.151424309090%
	Brooker		0.000424885045%
	Hampton		0.002839829959%
	Lawtey		0.003400896108%
	Starke		0.031392468132%
Brevard		3.878799180444%	
	Brevard County		2.323022668525%
	Cape Canaveral		0.045560750209%

	Cocoa		0.149245411423%
	Cocoa Beach		0.084363286155%
	Grant-Valkaria		0.000321387406%
	Indialantic		0.024136738902%
	Indian Harbour Beach		0.021089913665%
	Malabar		0.002505732317%
	Melbourne		0.383104682233%
	Melbourne Beach		0.012091066302%
	Melbourne Village		0.003782203200%
	Palm Bay		0.404817397481%
	Palm Shores		0.000127102364%
	Rockledge		0.096603243798%
	Satellite Beach		0.035975416224%
	Titusville		0.240056418924%
	West Melbourne		0.051997577066%
Broward		9.057962672578%	
	Broward County		3.966403576878%
	Coconut Creek		0.101131719448%
	Cooper City		0.073935445073%
	Coral Springs		0.323406517664%
	Dania Beach		0.017807041180%
	Davie		0.266922227153%
	Deerfield Beach		0.202423224725%
	Fort Lauderdale		0.830581264531%
	Hallandale Beach		0.154950491814%
	Hillsboro Beach		0.012407006463%
	Hollywood		0.520164608456%
	Lauderdale-By-The-Sea		0.022807611325%
	Lauderdale Lakes		0.062625150435%
	Lauderhill		0.144382838130%
	Lazy Lake		0.000021788977%
	Lighthouse Point		0.029131861803%
	Margate		0.143683775129%
	Miramar		0.279280208419%
	North Lauderdale		0.066069624496%

	Oakland Park		0.100430840699%
	Ocean Breeze		0.005381877237%
	Parkland		0.045804060448%
	Pembroke Park		0.024597938908%
	Pembroke Pines		0.462832363603%
	Plantation		0.213918725664%
	Pompano Beach		0.335472163493%
	Sea Ranch Lakes		0.005024174870%
	Southwest Ranches		0.025979723178%
	Sunrise		0.286071106146%
	Tamarac		0.134492458472%
	Weston		0.138637811283%
	West Park		0.029553115352%
	Wilton Manors		0.031630331127%
Calhoun		0.047127740781%	
	Calhoun County		0.038866087128%
	Altha		0.000366781107%
	Blountstown		0.007896688293%
Charlotte		0.737346233376%	
	Charlotte County		0.690225755587%
	Punta Gorda		0.047120477789%
Citrus		0.969645776606%	
	Citrus County		0.929715661117%
	Crystal River		0.021928789266%
	Inverness		0.018001326222%
Clay		1.193429461456%	
	Clay County		1.055764891131%
	Green Cove Springs		0.057762577142%
	Keystone Heights		0.000753535443%
	Orange Park		0.078589207339%
	Penney Farms		0.000561066149%
Collier		1.551333376427%	
	Collier County		1.354673336030%
	Everglades		0.000148891341%
	Marco Island		0.062094952003%

	Naples		0.134416197054%
Columbia		0.446781150792%	
	Columbia County		0.341887201373%
	Fort White		0.000236047247%
	Lake City		0.104659717920%
DeSoto		0.113640407802%	
	DeSoto County		0.096884684746%
	Arcadia		0.016755723056%
Dixie		0.103744580900%	
	Dixie County		0.098822087921%
	Cross City		0.004639236282%
	Horseshoe Beach		0.000281440949%
Duval		5.434975156935%	
	Jacksonville		5.270570064997%
	Atlantic Beach		0.038891507601%
	Baldwin		0.002251527589%
	Jacksonville Beach		0.100447182431%
	Neptune Beach		0.022814874318%
Escambia		1.341634449244%	
	Escambia County		1.005860871574%
	Century		0.005136751249%
	Pensacola		0.330636826421%
Flagler		0.389864712244%	
	Flagler Counry		0.279755934409%
	Beverly Beach		0.000154338585%
	Bunnell		0.009501809575%
	Flagler Beach		0.015482883669%
	Marineland		0.000114392127%
	Palm Coast		0.084857169626%
Franklin		0.049911282550%	
	Franklin County		0.046254365966%
	Apalachicola		0.001768538606%
	Carabelle		0.001888377978%
Gadsden		0.123656074077%	
	Gadsden County		0.090211810642%

	Chattahoochee		0.004181667772%
	Greensboro		0.000492067723%
	Gretna		0.002240633101%
	Havana		0.005459954403%
	Midway		0.001202025213%
	Quincy		0.019867915223%
Gilchrist		0.064333769355%	
	Gilchrist County		0.061274233881%
	Bell		0.000099866143%
	Fanning Springs		0.000388570084%
	Trenton		0.002571099247%
Glades		0.040612836758%	
	Glades County		0.040420367464%
	Moore Haven		0.000192469294%
Gulf		0.059914238588%	
	Gulf County		0.054715751905%
	Port St. Joe		0.004817179591%
	Wewahitchka		0.000381307092%
Hamilton		0.047941195910%	
	Hamilton County		0.038817061931%
	Jasper		0.004869836285%
	Jennings		0.002623755940%
	White Springs		0.001630541754%
Hardee		0.067110048132%	
	Hardee County		0.058100306280%
	Bowling Green		0.001797590575%
	Wauchula		0.006667426860%
	Zolfo Springs		0.000544724417%
Hendry		0.144460915297%	
	Hendry County		0.122147187443%
	Clewiston		0.017589151414%
	LaBelle		0.004724576440%
Hernando		1.510075949110%	
	Hernando County		1.447521612849%
	Brooksville		0.061319627583%

	Weeki Wachee		0.001234708678%
Highlands		0.357188510237%	
	Highlands County		0.287621754986%
	Avon Park		0.025829016090%
	Lake Placid		0.005565267790%
	Sebring		0.038172471371%
Hillsborough		8.710984113657%	
	Hillsborough County		6.523111204400%
	Plant City		0.104218491142%
	Tampa		1.975671881253%
	Temple Terrace		0.107980721113%
Holmes		0.081612427851%	
	Holmes County		0.066805002459%
	Bonifay		0.006898026863%
	Esto		0.006269778036%
	Noma		0.001278286631%
	Ponce de Leon		0.000179759057%
	Westville		0.000179759057%
Indian River		0.753076058781%	
	Indian River County		0.623571460217%
	Fellsmere		0.004917045734%
	Indian River shores		0.025322422382%
	Orchid		0.000306861421%
	Sebastian		0.038315915467%
	Vero Beach		0.060642353558%
Jackson		0.158936058795%	
	Jackson County		0.075213731704%
	Alford		0.000303229925%
	Bascom		0.000061735434%
	Campbellton		0.001648699234%
	Cottondale		0.001093080329%
	Graceville		0.002794436257%
	Grandridge		0.000030867717%
	Greenwood		0.001292812616%
	Jacob City		0.000481173235%

	Malone		0.000092603151%
	Marianna		0.073519638768%
	Sneads		0.002404050426%
Jefferson		0.040821647784%	
	Jefferson County		0.037584169001%
	Monticello		0.003237478783%
Lafayette		0.031911772076%	
	Lafayette County		0.031555885457%
	Mayo		0.000355886619%
Lake		1.139211224519%	
	Lake County		0.757453827343%
	Astatula		0.002727253579%
	Clermont		0.075909163209%
	Eustis		0.041929254098%
	Fruitland Park		0.008381493024%
	Groveland		0.026154034992%
	Howey-In-The-Hills		0.002981458307%
	Lady Lake		0.025048244426%
	Leesburg		0.091339390185%
	Mascotte		0.011415608025%
	Minneola		0.016058475803%
	Montverde		0.001347285057%
	Mount Dora		0.041021380070%
	Tavares		0.031820984673%
	Umatilla		0.005623371728%
Lee		3.325371883359%	
	Lee County		2.115268407509%
	Bonita Springs		0.017374893143%
	Cape Coral		0.714429677167%
	Estero		0.012080171813%
	Fort Myers		0.431100350585%
	Fort Myers Beach		0.000522935440%
	Sanibel		0.034595447702%
Leon		0.897199244939%	
	Leon County		0.471201146391%

	Tallahassee		0.425998098549%
Levy		0.251192401748%	
	Levy County		0.200131750679%
	Bronson		0.005701448894%
	Cedar Key		0.005180329202%
	Chiefland		0.015326729337%
	Fanning Springs		0.000808007885%
	Inglis		0.004976965420%
	Otter Creek		0.000408543312%
	Williston		0.017774357715%
	Yankeetown		0.000884269303%
Liberty		0.019399452225%	
	Liberty County		0.019303217578%
	Bristol		0.000096234647%
Madison		0.063540287455%	
	Madison County		0.053145129837%
	Greenville		0.000110760631%
	Lee		0.000019973229%
	Madison		0.010264423758%
Manatee		2.721323346235%	
	Manatee County		2.201647174006%
	Anna Maria		0.009930326116%
	Bradenton		0.379930754632%
	Bradenton Beach		0.014012127744%
	Holmes Beach		0.028038781473%
	Longboat Key		0.034895046131%
	Palmetto		0.052869136132%
Marion		1.701176168960%	
	Marion County		1.303728892837%
	Belleview		0.009799592256%
	Dunnellon		0.018400790795%
	McIntosh		0.000145259844%
	Ocala		0.368994504094%
	Reddick		0.000107129135%
Martin		0.869487298116%	

	Martin County		0.750762795758%
	Jupiter Island		0.020873839646%
	Ocean Breeze Park		0.008270732393%
	Sewall's Point		0.008356072551%
	Stuart		0.081223857767%
Miami-Dade		5.232119784173%	
	Miami-Dade County		4.282797675552%
	Aventura		0.024619727885%
	Bal Harbour		0.010041086747%
	Bay Harbor Islands		0.004272455175%
	Biscayne Park		0.001134842535%
	Coral Gables		0.071780152131%
	Cutler Bay		0.009414653668%
	Doral		0.013977628531%
	El Portal		0.000924215760%
	Florida City		0.003929278792%
	Golden Beach		0.002847092951%
	Hialeah		0.098015895785%
	Hialeah Gardens		0.005452691411%
	Homestead		0.024935668046%
	Indian Creek		0.002543863026%
	Key Biscayne		0.013683477346%
	Medley		0.008748274131%
	Miami		0.292793005448%
	Miami Beach		0.181409572478%
	Miami Gardens		0.040683650932%
	Miami Lakes		0.007836768608%
	Miami Shores		0.006287935516%
	Miami Springs		0.006169911893%
	North Bay Village		0.005160355974%
	North Miami		0.030379280717%
	North Miami Beach		0.030391990953%
	Opa-locka		0.007847663096%
	Palmetto Bay		0.007404620570%
	Pinecrest		0.008296152866%

	South Miami		0.007833137111%
	Sunny Isles Beach		0.007693324511%
	Surfside		0.004869836285%
	Sweetwater		0.004116300842%
	Virginia Gardens		0.001172973244%
	West Miami		0.002654623657%
Monroe		0.476388738585%	
	Monroe County		0.330124785469%
	Islamorada		0.022357305808%
	Key Colony Beach		0.004751812661%
	Key West		0.088087385417%
	Layton		0.000150707089%
	Marathon		0.030916742141%
Nassau		0.476933463002%	
	Nassau County		0.392706357951%
	Callahan		0.000225152759%
	Fernandina Beach		0.083159445195%
	Hillard		0.000842507098%
Okaloosa		0.819212865955%	
	Okaloosa County		0.612059617545%
	Cinco Bayou		0.000733562214%
	Crestview		0.070440130066%
	Destin		0.014678507281%
	Fort Walton Beach		0.077837487644%
	Laurel Hill		0.000079892914%
	Mary Esther		0.009356549730%
	Niceville		0.021745398713%
	Shalimar		0.001824826796%
	Valparaiso		0.010456893052%
Okeechobee		0.353495278692%	
	Okeechobee County		0.314543851405%
	Okeechobee		0.038951427287%
Orange		4.671028214546%	
	Orange County		3.063330386979%
	Apopka		0.097215150892%

	Bay Lake		0.023566594013%
	Belle Isle		0.010798253686%
	Eatonville		0.008325204835%
	Edgewood		0.009716067845%
	Lake Buena Vista		0.010355211161%
	Maitland		0.046728276209%
	Oakland		0.005429086686%
	Ocoee		0.066599822928%
	Orlando		1.160248481490%
	Windemere		0.007548064667%
	Winter Garden		0.056264584996%
	Winter Park		0.104903028159%
Osceola		1.073452092940%	
	Osceola County		0.837248691390%
	Kissimmee		0.162366006872%
	St. Cloud		0.073837394678%
Palm Beach		8.601594372053%	
	Palm Beach County		5.552548475026%
	Atlantis		0.018751230169%
	Belle Glade		0.020828445945%
	Boca Raton		0.472069073961%
	Boynton Beach		0.306498271771%
	Briny Breezes		0.003257452012%
	Cloud Lake		0.000188837798%
	Delray Beach		0.351846579457%
	Glen Ridge		0.000052656694%
	Golf		0.004283349663%
	Greenacres		0.076424835657%
	Gulf Stream		0.010671151322%
	Haverhill		0.001084001589%
	Highland Beach		0.032510968934%
	Hypoluxo		0.005153092982%
	Juno Beach		0.016757538804%
	Jupiter Island		0.125466374888%
	Jupiter Inlet Colony		0.005276563849%

	Lake Clarke Shores		0.007560774903%
	Lake Park		0.029433275980%
	Lake Worth		0.117146617298%
	Lantana		0.024507151505%
	Loxahatchee Groves		0.002531152789%
	Manalapan		0.021632822333%
	Mangonia Park		0.010696571795%
	North Palm Beach		0.044349646256%
	Ocean Ridge		0.012786497807%
	Pahokee		0.004018250447%
	Palm Beach		0.185476848123%
	Palm Beach Gardens		0.233675880257%
	Palm Beach Shores		0.014135598612%
	Palm Springs		0.038021764282%
	Riviera Beach		0.163617057282%
	Royal Palm Beach		0.049295743959%
	South Bay		0.001830274040%
	South Palm Beach		0.005866681967%
	Tequesta		0.031893614595%
	Wellington		0.050183644758%
	West Palm Beach		0.549265602541%
Pasco		4.692087260494%	
	Pasco County		4.319205239813%
	Dade City		0.055819726723%
	New Port Richey		0.149879107494%
	Port Richey		0.049529975458%
	San Antonio		0.002189792155%
	St. Leo		0.002790804761%
	Zephyrhills		0.112672614089%
Pinellas		7.934889816777%	
	Pinellas County		4.546593184553%
	Belleair		0.018095745121%
	Belleair Beach		0.004261560686%
	Belleair Bluffs		0.007502670965%
	Belleair Shore		0.000439411029%

	Clearwater		0.633863120196%
	Dunedin		0.102440873796%
	Gulfport		0.047893986460%
	Indian Rocks Beach		0.008953453662%
	Indian Shores		0.011323004874%
	Kenneth City		0.017454786058%
	Largo		0.374192990777%
	Madeira Beach		0.022616957779%
	North Reddington Beach		0.003820333909%
	Oldsmar		0.039421706033%
	Pinellas Park		0.251666311991%
	Redington Beach		0.003611522882%
	Redington Shores		0.006451352841%
	Safety Harbor		0.038061710740%
	Seminole		0.095248695748%
	South Pasadena		0.029968921656%
	St. Pete Beach		0.071791046619%
	St. Petersburg		1.456593090134%
	Tarpon Springs		0.101970595050%
	Treasure Island		0.040652783215%
Polk		2.150483025298%	
	Polk County		1.558049828484%
	Auburndale		0.028636162584%
	Bartow		0.043971970660%
	Davenport		0.005305615818%
	Dundee		0.005597951255%
	Eagle Lake		0.002580177987%
	Fort Meade		0.007702403251%
	Frostproof		0.005857603227%
	Haines City		0.047984773863%
	Highland Park		0.000063551182%
	Hillcrest Heights		0.000005447244%
	Lake Alfred		0.007489960729%
	Lake Hamilton		0.002540231530%
	Lakeland		0.294875668468%

	Lake Wales		0.036293172134%
	Mulberry		0.005414560702%
	Polk City		0.001080370093%
	Winter Haven		0.097033576087%
Putnam		0.384893194068%	
	Putnam County		0.329225990182%
	Crescent City		0.005561636294%
	Interlachen		0.001877483489%
	Palatka		0.046955244716%
	Pomona Park		0.000379491344%
	Welaka		0.000893348043%
Santa Rosa		0.701267319513%	
	Santa Rosa County		0.592523984216%
	Gulf Breeze		0.061951507906%
	Jay		0.000159785829%
	Milton		0.046632041562%
Sarasota		2.805043857579%	
	Sarasota County		1.924315263251%
	Longboat Key		0.044489458856%
	North Port		0.209611771277%
	Sarasota		0.484279979635%
	Venice		0.142347384560%
Seminole		2.141148264544%	
	Seminole County		1.508694164839%
	Altamonte Springs		0.081305566430%
	Casselberry		0.080034542791%
	Lake Mary		0.079767627827%
	Longwood		0.061710013415%
	Oviedo		0.103130858057%
	Sanford		0.164243490362%
	Winter Springs		0.062262000824%
St. Johns		0.710333349554%	
	St. Johns County		0.656334818131%
	Hastings		0.000010894488%
	Marineland		0.000000000000%

	St. Augustine		0.046510386442%
	St. Augustine Beach		0.007477250493%
St. Lucie		1.506627843552%	
	St. Lucie County		0.956156584302%
	Fort Pierce		0.159535255654%
	Port St. Lucie		0.390803453989%
	St. Lucie Village		0.000132549608%
Sumter		0.326398870459%	
	Sumter County		0.302273026046%
	Bushnell		0.006607507174%
	Center Hill		0.001312785844%
	Coleman		0.000748088199%
	Webster		0.001423546476%
	Wildwood		0.014033916721%
Suwannee		0.191014879692%	
	Suwannee County		0.161027800555%
	Branford		0.000929663004%
	Live Oak		0.029057416132%
Taylor		0.092181897282%	
	Taylor County		0.069969851319%
	Perry		0.022212045963%
Union		0.065156303224%	
	Union County		0.063629259109%
	Lake Butler		0.001398126003%
	Raiford		0.000012710236%
	Worthington Springs		0.000116207876%
Volusia		3.130329674480%	
	Volusia County		1.708575342287%
	Daytona Beach		0.447556475212%
	Daytona Beach Shores		0.039743093439%
	DeBary		0.035283616215%
	DeLand		0.098983689498%
	Deltona		0.199329190038%
	Edgewater		0.058042202343%
	Flagler Beach		0.000223337011%

	Holly Hill		0.031615805143%
	Lake Helen		0.004918861482%
	New Smyrna Beach		0.104065968306%
	Oak Hill		0.004820811087%
	Orange City		0.033562287058%
	Ormond Beach		0.114644516477%
	Pierson		0.002333236251%
	Ponce Inlet		0.023813535748%
	Port Orange		0.177596501562%
	South Daytona		0.045221205323%
Wakulla		0.115129321208%	
	Wakulla County		0.114953193647%
	Sopchoppy		0.000107129135%
	St. Marks		0.000068998426%
Walton		0.268558216151%	
	Walton County		0.224268489581%
	DeFuniak Springs		0.017057137234%
	Freeport		0.003290135477%
	Paxton		0.023942453860%
Washington		0.120124444109%	
	Washington County		0.104908475404%
	Caryville		0.001401757499%
	Chipley		0.012550450560%
	Ebro		0.000221521263%
	Vernon		0.000361333863%
	Wausau		0.000680905521%
		100.00%	100.00%

REVIEWED
O.M.B DEPARTMENT
January 30, 2024
BOARD OF COUNTY COMMISSIONERS
HIGHLANDS COUNTY FLORIDA

BOARD OF COUNTY COMMISSIONERS

BUDGET AMENDMENTS

(Transfers over $5,000 require Board approval)

DATE: **1/25/2024** SUBMITTED BY: **OMB**

FUND(S): **005** FUND TITLE(S): **General** COST CENTER(S) #: **5103**

PROJECT(S) #: **23053** PROJECT TITLE(S): **Opioid Settlement Funds** COST CENTER TITLE(S): **Mental Health**

*list additional cost centers on reverse side of form

TYPE	FUND	COST CENTER	ACCOUNT	ACCOUNT NAME	ACTIVITY	BUDGET	INCREASE	DECREASE	REVISED BUDGET
R	005		3999100	Fund Balance Brought Forward		4,583,326.88		62,573.01	4,520,753.87
R	005		3469000Z	Other Human Svcs Charge	23053	0.00	199,615.96		199,615.96
E	005	5103	53442Z	Substance Abuse Treatments	23053	0.00	199,615.96		199,615.96
									0.00
									0.00
									0.00
									0.00

REASON: **To appropriate funds received from the State of Florida for the Opioid Settlement and place the funds into a project.**

OFFICE USE ONLY

OMB RECOMMENDATION:

_____ Approval

_____ Denial

REQUEST # **23-24-052**

ACTION:

Board _____ Approved _____ Denied

County Administrator _____ Approved _____ Denied

TRANSFER TYPE:

_____ ITEM TO ITEM

_____ RESERVE

XX BY RESOLUTION

_____ SUPPLEMENTAL BUDGET

SIGNATURE: _____

Signature: _____ DATE: ____ / ____ / ____ Posted by Clerk: _____

Form Revised 08/05/2020

RESOLUTION NO. 23-24-63

A RESOLUTION OF HIGHLANDS COUNTY, FLORIDA PERTAINING TO BUDGET AMENDMENT 23-24-052 TO THE GENERAL FUND; PROVIDING FOR LEGISLATIVE FINDINGS AND INTENT; PROVIDING FOR APPROVAL OF BUDGET AMENDMENT; PROVIDING FOR THE IMPLEMENTATION OF ADMINISTRATIVE ACTIONS; PROVIDING A SAVINGS CLAUSE; PROVIDING FOR SCRIVENER'S ERRORS; PROVIDING FOR CONFLICTS; PROVIDING FOR SEVERABILITY; AND PROVIDING AN EFFECTIVE DATE.

WHEREAS, Florida Statutes, Section 129.06, (Execution and Amendment of Budget) provides that the Board of County Commissioners may by resolution amend its budget; and

WHEREAS, Highlands County has determined that the following budget amendment is necessary and proper within the General Fund.

NOW, THEREFORE, BE IT RESOLVED BY HIGHLANDS COUNTY, FLORIDA AS FOLLOWS:

SECTION 1. **Legislative Findings and Intent.** Highlands County has complied with all requirements and procedures of Florida law in processing this Resolution. The above recitals are hereby adopted.

SECTION 2. **Approval of Budget Amendment.** Budget Amendment 23-24-052 is hereby approved and authorized to appropriate opioid settlement funding from the State of Florida in Project 23053 to be used for opioid and substance abuse education, treatment and other related programs and services for FY23/24. The fiscal impact is an increase in the amount of $199,615.99.

SECTION 3. **Implementation of Administrative Actions.** The County Administrator is hereby authorized and directed to take such action as may be deemed necessary and appropriate in order to implement the provisions of this Resolution. The County Administrator may, as deemed appropriate, necessary and convenient, delegate the powers of implementation as herein set forth to such County employees as deemed effectual and prudent.

SECTION 4. **Savings Clause.** All prior actions of Highlands County pertaining to the budget amendment approved hereby, as well as any and all matters relating thereto, are hereby ratified and affirmed consistent with the provisions of this Resolution.

SECTION 5. **Scrivener's Errors.** Typographical errors and other matters of a similar nature that do not affect the intent of this Resolution, as determined by the County Administrator and County Attorney, may be corrected.

SECTION 6. **Conflicts.** All Resolutions or parts of Resolutions in conflict with any of the provisions of this Resolution are hereby repealed.

SECTION 7. **Severability.** If any Section or portion of a Section of this Resolution proves to be invalid, unlawful, or unconstitutional, it shall not be held to invalidate or impair the validity, force, or effect of any other Section or part of this Resolution.

SECTION 8. **Effective Date.** This Resolution shall take effect immediately upon adoption.

PASSED AND ADOPTED this 6th day of February 2024.

HIGHLANDS COUNTY, FLORIDA

By:_____
Kevin J. Roberts, Chairperson

ATTEST:

_____
Jerome Kaszubowski, Clerk of Court

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER:

SUBJECT/TITLE: **Request approval of the minutes from the November 7, 2023 Regular Meeting of the Board.**

RECOMMENDED ACTION

Move approval of the minutes from the November 7, 2023 Regular Meeting of the Board.

Attachments: 110723REG.pdf

REGULAR MEETING OF THE BOARD, NOVEMBER 07, 2023

1. The meeting was called to order at 9:01 a.m., in the Highlands County Board of County Commission Chambers at 600 S. Commerce Ave., Sebring, Florida, with the following members present:

Commissioner Chris Campbell	**Commissioner Arlene Tuck**
Commissioner Kevin J. Roberts	**Commissioner Don Elwell**
Commissioner Scott A. Kirouac	

Also, present: Laurie Hurner, County Administrator; Nick Sawyer, Deputy County Administrator/Chief of Staff; Sherry G. Sutphen, County Attorney; Jerome Kaszubowski, Clerk of Courts; and Jill Ann Shields, Deputy Clerk.

2. INVOCATION
The meeting opened with a prayer led by Commissioner Kevin J. Roberts.

3. PLEDGE OF ALLEGIANCE
The Pledge of Allegiance was led by Brandon Gunn, USMC (Sgt.), Highlands County Parks & Facilities Director.

4. ANNOUNCEMENTS
The Highlands County Board of County Commissioners will hold a Special Workshop meeting for the purpose of discussing mobile homes, on Tuesday, November 7, 2023, at 1:30 p.m., in the Boardroom, 600 S. Commerce Ave., Sebring, FL.

The Highlands County Construction, Licensing, Enforcement and Appeals Board will hold a regular meeting on Tuesday, November 7, 2023, at 7:00 p.m., in the Boardroom, 600 S. Commerce Ave., Sebring, FL.

The Heartland Library Cooperative Governing Board will meet on Wednesday, November 8, 2023, at 10:30 a.m., in the meeting room of the Lake Placid Memorial Library, 205 W. Interlake Blvd., Lake Placid, FL.

A Public Hearing of the Highlands County Planning & Zoning Commission and Local Planning Agency and the Zoning Board of Adjustment will be held on Tuesday, November 14, 2023, at 3:00 p.m., in the Boardroom, 600 S. Commerce Ave., Sebring, FL.

The Affordable Housing Advisory Committee will meet on Wednesday, November 15, 2023, at 3:30 p.m., in the Engineering Training Room, 505 S. Commerce Ave., Sebring, FL.

The Hospital District Board will meet on Thursday, November 16, 2023, at 1:30 p.m., in the Boardroom, 600 S. Commerce Ave., Sebring, FL.

The Highlands Soil & Water Conservation District Board of Supervisors will meet on Tuesday, November 21, 2023, at 12:30 p.m., in Conference Room #3, of the Bert J. Harris, Jr. Agricultural Center, 4509 George Blvd., Sebring, FL.

County offices will be closed November 23-24, 2023, in observance of the Thanksgiving holiday.

The Highlands County Board of County Commissioners will hold a regular meeting on Tuesday, November 28, 2023, at 9:00 a.m., in the Boardroom, 600 S. Commerce Ave., Sebring FL.

5. CONSTITUTIONAL OFFICERS – ANNOUNCEMENTS:
No report.

6. RECOGNITIONS, PRESENTATIONS AND PROCLAMATIONS:

A. Recognition of Promotion for FF/EMT John Poynor to Lieutenant FF/EMT on October 31, 2023.
Dustin Fitch, Interim Deputy Chief, presented a letter of promotion and new helmet to Lieutenant FF/EMT John Poynor. Lt. Poynor's brother pinned him with his new badge. The Commission congratulated Lt. Poynor on his promotion. ***See SMB 153 Page 37.***

B. Presentation on honoring our veterans in Highlands County.
Karen Clogston, Public Information Officer, presented. ***See SMB 153 Page 38.***

C. Request approval of a Proclamation designating November 1-30, 2023 as Veterans Appreciation Month.
Michelle Rigterink, Assistant Veteran Services Officer, presented the request and read the proposed proclamation into the record.

The Commission recognized the veterans attending the Board meeting and thanked them for their service.

Commissioner Elwell moved approval of the Proclamation. Commissioner Tuck seconded the motion.

Upon roll call, all Commissioners voted aye. The motion carried. ***See Res. Book 35 Page 13 & SMB 153 Page 39.***

D. Request approval of a Proclamation recognizing the 10-year anniversary of Highlands County as a Purple Heart County.
Stephanie Ridley, Assistant Veteran Services Officer, presented the request and read the proposed proclamation into the record.

Commissioner Roberts moved approval of the Proclamation recognizing the 10-year anniversary of Highlands County as a Purple Heart County. Commissioner Kirouac seconded the motion.

Upon roll call, all Commissioners voted aye. The motion carried. ***See Res. Book 35 Page 14 & SMB 153 Page 40.***

E. Request approval of a Proclamation recognizing November 15th, 2023 as "GIS Day" in Highlands County, Florida.
Carley Fitzgerald, GIS Manager, provided a brief presentation on Geographic Information Science (GIS) and read the proposed proclamation into the record.

Commissioner Kirouac moved approval of the Proclamation recognizing November 15th, 2023 as "GIS Day" in Highlands County, Florida. Commissioner Tuck seconded the motion.

Upon roll call, all Commissioners voted aye. The motion carried. ***See Res. Book 35 Page 15 & SMB 153 Page 41.***

F. Request approval of the Proclamation recognizing November 16, 2023 as "Children's Grief Awareness Day" in Highlands County, Florida.
Josie Flores, Community Partnership Specialist with Empath Health and Blue Butterfly Family Grief Center, presented the request and read the proposed proclamation into the record.

Commissioner Tuck moved approval of the Proclamation for "Children's Grief Awareness Day". Commissioner Elwell seconded the motion.

Upon roll call, all Commissioners voted aye. The motion carried. ***See Res. Book 35 Page 16 & SMB 153 Page 42.***

G. (Addendum) Request approval of a Proclamation recognizing November 15-22, 2023, as "Farm-City Week" in Highlands County, Florida.

Trevor Murphy, president of the Highlands County Farm Bureau, presented the request and read the proposed proclamation into the record.

Commissioner Kirouac moved approval of the Proclamation as presented. Commissioner Tuck seconded the motion.

Upon roll call, all Commissioners voted aye. The motion carried. ***See Res. Book 35 Page 17 & SMB 153 Page 43.***

7. PUBLIC COMMENT

Sara Gilbreath, Chris Ritenour, and Forest Ritenour came before the Commission to express concerns with the property at 6127 Fara Street. County Attorney Sherry Sutphen addressed questions raised by Commissioner Elwell regarding concerns with the property at 6127 Fara Street.

Barbara Burns came before the Commission to express concerns regarding mosquitos and damages to a corner lot in Spring Lake.

Jonathan Harrison, Road & Bridge Director, provided an update regarding the Spring Lake drainage project and addressed questions raised by Commissioner Kirouac. Chairman Campbell stated the County Administrator will check if mosquito dunks can be made available by the health department to help alleviate the mosquito problem in that area.

Susie Bishop, Highlands Soil & Water Conservation District, came before the Commission to provide public announcements on the community garden and the upcoming Ag-Venture event. Ms. Bishop commended the Board and staff on the hazardous waste recycling event and commented on her participation in Sheriff Blackman's Citizen Academy.

Cynthia Compton came before the Commission to express concerns with noise and vulgar music in public. County Administrator Laurie Hurner stated she and staff will make sure to get in touch with county and city law enforcement and see if a resolution can be reached.

Michael Zarzano came before the Commission to comment on election fraud.

Ray Royce came before the Commission to comment on consent agenda item 8.L. Commissioner Kirouac and Ms. Hurner addressed questions and concerns raised by Mr. Royce.

Gary Brown came before the Commission to comment on patriotism.

In regards to mosquito dunks, Ms. Hurner stated they are available for free at the Health Department, 7205 George Blvd., Sebring, FL, and Ms. Burns may stop by there to pick those up.

Shelton Rice, Peterson & Myers, PA, came before the Commission on behalf of his clients, to comment on the upcoming mobile home workshop this afternoon. Ms. Sara Gilbreath and Mr. Shelton Rice submitted documentation

to the Clerk to be part of the permanent record. ***See Citizens Not on the Agenda file.***

8. CONSENT AGENDA

The County Attorney and County Administrator addressed questions raised by Commissioner Tuck.

Commissioner Tuck moved approval to accept the consent agenda. Commissioner Kirouac seconded the motion.

Upon roll call, all Commissioners voted aye. The motion carried. (Commissioner Elwell was absent during roll call).

A. **Request approval of the contract between Howerton Services, LLC and Highlands County for sod services.** *See Howerton Services, LLC file.*

B. **Request approval of an Agreement with the Florida Network of Children's Advocacy Center to distribute proceeds from the Stop Child Abuse License Plate and Voluntary Contribution program and to adopt Budget Amendment 23-24-010 and resolution.** *See Res. Book 35 Page 18, Children's Advocacy Center file, & SMB 153 Page 44.*

C. **Request approval to terminate the agreement related to the use of the Sheriff's Polar Kraft Boat.** *See Sheriff's Office file.*

D. **Request approval of Amendment #0007 and to Subcontract Agreement 20-25-42 between Highlands County and the Ounce of Prevention Fund of Florida, accepting additional grant funding for staff stabilization, along with the Adoption of Resolution 23-24-112 for Budget Amendment 23-24-009 for Project 22004.** *See Res. Book 35 Page 9, Healthy Families Florida file, & SMB 153 Page 45.*

E. **Request approval of Budget Amendment 22-23-154 to realign unused funds from Road Construction Projects.** *See SMB 153 Page 46.*

F. **Request adoption of Resolution 23-24-16 for Budget Amendment 23-24-011 to transfer the available balance in Fund 172 (Sun 'n Lakes 1-20 Improvement Trust) to Project #22082 in Fund 151 (Infrastructure Surtax).** *See Res. Book 35 Page 20 & SMB 153 Page 47.*

G. **Request authorization for Chairman/Vice-Chairman to execute a Corrective County Deed related to that property located at 7264 Virtudes Street, Sebring, Florida 33872.** *See County Deed file.*

H. **Request authorization for Chairman/Vice-Chairman to execute a Corrective County Deed related to that property located at 6926 Virtudes Street, Sebring, Florida 33872.** *See County Deed file.*

I. **Request authorization for Chairman/Vice-Chairman to execute a Corrective County Deed related to that property located at 7000 Virtudes Street, Sebring, Florida 33872.** *See County Deed file.*

J. **Request authorization for Chairman/Vice-Chairman to execute a Corrective County Deed related to that property located at 7008 Virtudes Street, Sebring, Florida 33872.** *See County Deed file.*

K. **Request approval of Resolution 23-24-14 approving the Division of Emergency Management Statewide Mutual Aid Agreement.** *See Res. Book 35 Page 21, Emergency Management file & SMB 153 Page 48.*

L. **Request approval of Fire Assessment Fee Study Agreement with Government Services Group, Inc. and request adoption of Resolution 23-24-17 for Budget Amendment 23-24-013.** *See Res. Book 35*

Page 22, Government Services Group, Inc. file & SMB 153 Page 49.

M. Request approval of three (3) new job descriptions for the Misdemeanor Probation program. *See SMB 153 Page 50.*

N. ~~Request adoption of fee schedule addendum to include Misdemeanor Probation service fees and Certificate of Public Convenience and Necessity (COPCN) fees to the general fee schedule for the County~~. *This item was moved to the action agenda (11.G).*

O. Request approval of a contract extension for two (2) additional years with Questica LTD, the software provider of the county's current budget software platform. *See Questica LTD file.*

P. Request approval of Healthy Families Highlands letter of support to legislators on behalf of the Highlands County Board of County Commissioners. *See SMB 153 Page 51.*

Q. Highlands County Fire Rescue Seal color change. *See SMB 153 Page 52.*

R. Request authorization to waive competitive solicitation requirements for Placid Lakes Special Benefit District Security Services and approval of the Agreement with Caleus, LLC, for the provision of Security Services for Placid Lakes Special Benefit District. *See Caleus LLC file.*

9. COMMITTEE ASSIGNMENTS:

No report.

10. PUBLIC HEARING

A. Public hearing to consider adoption of Small-Scale Comprehensive Plan Future Land Use Amendment CPA-23-618SS, for three (3) parcels totaling an approximate 18.64 acres, from Low Density Residential (RL) to Medium Density Residential (RM).

Sergio Garcia, Planner II, Rachel Barry, Zoning Supervisor, and Melony Culpepper, Transportation Project Manager, presented. This public hearing was properly advertised, and a proof of publication was submitted to the Clerk to become part of the permanent record. Mr. Garcia read the caption of the proposed ordinance into the record.

A presentation was provided by Dana Riddell, T.J. Wohl, and Jeff Kennedy, on behalf of the owners/applicants, Heartland Investment, LLC, and the Waldron family.

Chairman Campbell opened the floor for public comment. Input was received by Gary Brown, Marvin Wolfe, Jim Griffin, Larry Pepper, James Zempel, Dr. John Pepper, Tim Bohan, Bert Hinkle, Dr. Kelly Pepper, James Wright, Judy Spiegel, Pam Fentress, Dave Feathers, David Wack, Dale Esposito, Sandra Rainwater, Bruce Baker, Sherri Griffin, Stacey Lenihan, Katie Beatty, and Keatley Waldron.

Break: 12:26 p.m. to 12:36 p.m.

Public comment was continued with input received by Bruce Johnson, Angie Oliveri, and Robert Dobiecki.

The applicant Keatley Waldron came before the Commission to provide a brief summation on the proposed project and thanked the Commission for the opportunity to be here to present the facts and move forward for the progress and prosperity of this project.

Chairman Campbell closed the public portion of this hearing and brought it back before the Board for questions or comments.

County Attorney Sherry G. Sutphen addressed the Commission regarding the legislative process.

The Commission expressed their concerns in great detail.

Ms. Culpepper, Ms. Barry, and Mr. Garcia addressed questions raised by the Commission.

Commissioner Kirouac moved approval and adopt by Ordinance 23-24-01, CPA-23-618SS, amending the Future Land Use Map of the Highlands County Comprehensive Plan for an approximate 18.64 acres from Low Density Residential (RL) to Medium Density Residential (RM), and transmit CPA-23-618SS to the Florida Department of Commerce for its compliance determination, referencing the mandatory findings of fact and becoming effective as provided by law.

The motion died for lack of a second.

No other motions presented. ***See Comprehensive Plan Amendment file.***

B. Public hearing to consider adoption of P&Z Hearing No. 2128, changing the Official Zoning Atlas for three (3) parcels, totaling an approximate 18.64 acres, from Agricultural District to Multiple-Family Dwelling Planned Development District (R-3 PD).

Ms. Sutphen addressed questions raised by Commissioner Kirouac and Commissioner Roberts.

Dana Riddell, private consultant representing Heartland Investment, LLC, withdrew their request for rezoning.

Sergio Garcia, Planner II, presented the request. This public hearing was properly advertised, and a proof of publication was submitted to the Clerk to become part of the permanent record. Mr. Garcia read the caption of the proposed resolution into the record.

Chairman Campbell opened the floor for public comment. Input was not provided.

After withdrawal of request, the zoning change was not approved. ***See Zoning Changes file.***

Break: 2:15 p.m. to 2:22 p.m.

C. Public hearing to consider approval of Positive Mobility, Inc. d/b/a Positive Medical Transport application for a Class 1, Class 2 and 3 Certificate of Public Convenience and Necessity (COPCN).

Dustin Fitch, Interim Deputy Chief, presented the request. This public hearing was properly advertised, and a proof of publication was submitted to the Clerk to become part of the permanent record.

Chairman Campbell opened the floor for public comment. Input was received by the applicant/new owner Fred Angelo and addressed questions raised by Commissioner Roberts.

Commissioner Elwell moved approval of the Positive Mobility, Inc. d/b/a Positive Medical Transport application for a Class 1, Class 2 and 3 Certificate of Public Convenience and Necessity (COPCN). Commissioner Kirouac seconded the motion.

Upon roll call, all Commissioners voted aye. The motion carried. ***See Positive Mobility, Inc. file.***

11. ACTION AGENDA

Chairman Campbell stated the County Attorney has brought to his attention a last-minute revision which needs to be made to the fee schedule resolution adopted on the consent agenda under item 8N and entertained a motion to reopen this item and move it to the action agenda as item 11G.

Commissioner Kirouac moved approval of the recommended motion. Commissioner Elwell seconded the motion.

Upon roll call, all Commissioners voted aye. The motion carried.

Commissioner Elwell moved approval of the action agenda as expanded to include items 11F (addendum) and 11G as noted. Commissioner Kirouac seconded the motion.

Upon roll call, all Commissioners voted aye. The motion carried.

A. Request approval of a renewal quotation for the purposes of executing a purchase order with Environmental Systems Research Institute Inc. (ESRI) for Geographic Information Systems (GIS) Software for FY 23-24.

Clinton Howerton, Jr., Critical Infrastructure Director, presented the request and addressed questions raised by Commissioner Tuck, Commissioner Elwell, and Commissioner Kirouac.

Chairman Campbell opened the floor for public comment. Input was not provided.

Commissioner Kirouac moved approval of the Renewal Quotation between Environmental Systems Research Institute, Inc. (ESRI) and the Board of County Commissioners for Geographic Systems (GIS) Software for FY 23-24. Commissioner Tuck seconded the motion.

Upon roll call, all Commissioners voted aye. The motion carried. ***See ESRI file.***

B. Consider Statement of Legislative Intent for amendments to the Land Development Regulations regarding requirements for Wireless Communications Facilities.

Rachel Barry, Zoning Supervisor, presented the request for consideration. Ms. Barry and Ms. Sutphen addressed questions raised by Commissioner Campbell and Commissioner Kirouac.

There was a consensus from the Board to proceed with an ordinance to be brought back at a future date. ***See SMB 153 Page 53.***

C. Request authorization for the Development Services Department to accept and begin processing two (2) Special Exception applications, related to the construction of a Wireless Communications Tower, for matters which are the subject of upcoming revisions to the Highlands County Land Development Regulations in order to correct provisions which are inconsistent with controlling law in Florida.

Rachel Barry, Zoning Supervisor, presented the request. Ms. Barry and Ms. Sutphen addressed questions and concerns raised by Commissioner Elwell and Commissioner Kirouac.

Chairman Campbell opened the floor for public comment. Input was not provided.

Ms. Barry read the recommended motion into the record.

Commissioner Elwell moved approval of the motion as read.

Commissioner Kirouac stated there is additional language at the end of the recommended motion, *for the properties located at 1700 US 98, Lorida, and 3015 Haw Branch Rd., Sebring*, and questioned if this needs to be added to the motion. Ms. Sutphen stated it does because there is no waiver for any other properties and these two are specifically before the Board because staff has information about them.

Commissioner Elwell amended his motion as stated. Commissioner Kirouac seconded the amended motion.

Upon roll call, all Commissioners voted aye. The motion carried. ***See SMB 153 Page 54.***

D. Consider Statement of Legislative Intent for amendments to the Transportation Map Series of the Highlands County 2030 Comprehensive Plan.

Sergio Garcia, Planner II, and Melony Culpepper, Transportation Project Manager, presented the request for consideration.

Chairman Campbell opened the floor for public comment. Input was received by Ray Royce.

Ms. Culpepper addressed concerns raised by Mr. Royce and Commissioner Roberts.

There was a consensus from the Board for staff to move forward with updating the transportation map.

E. Request approval of five (5) Health Services Grant Agreements for FY 2023-2024 per the recommendation of the Highlands County Hospital District Board.

Ingra Gardner, Community Programs Director and Highlands County Hospital District Board's staff liaison, presented the request.

Ms. Gardner, Ms. Sutphen, and Ms. Hurner addressed questions and concerns raised by Commissioner Roberts, Commissioner Tuck, and Commissioner Kirouac.

Chairman Campbell opened the floor for public comment. Input was not provided.

Commissioner Roberts moved to approve five (5) Health Services Grant Agreements for the FY 2023-2024 per the recommendation of the Highlands County Hospital District Board. Commissioner Tuck seconded the motion.

Upon roll call, all Commissioners voted aye. The motion carried. ***See Health Service Grant Agreements file.***

F. (Addendum) Request approval to purchase property located at 618 S. Commerce Ave., Sebring, Florida 33870, and request adoption of Resolution 23-24-19 for Budget Amendment 23-24-014 provide funding to purchase office building for county expansion.

Sherry G. Sutphen, County Attorney, presented the request.

Laurie Hurner, County Administrator, stated this is the same property the county tried to purchase over a year ago and has since been remodeled. Ms. Hurner addressed questions raised by Commissioner Tuck.

Chairman Campbell opened the floor for public comment. Input was not provided.

Commissioner Elwell moved to approve and execute the Real Property Purchase Agreement for the property located at 618 S. Commerce Ave., Sebring, Florida 33870 and move to adopt Resolution 23-24-19 for Budget Amendment 23-24-014 to provide funding to purchase the office building for future county expansion. Commissioner Tuck seconded the motion.

Upon roll call, all Commissioners voted aye. The motion carried. ***See County Deed file, Res. Book 35 Page 23 & SMB 153 Page 56.***

G. (Former 8.N) Request adoption of fee schedule addendum to include Misdemeanor Probation service fees and Certificate of Public Convenience and Necessity (COPCN) fees to the general fee schedule for the County.

Sherry G. Sutphen, County Attorney, presented the request and a revision to the resolution previously approved on the consent agenda.

Chairman Campbell opened the floor for public comment. Input was not provided.

Ms. Sutphen formed the recommended motion to rescind the prior action on Resolution 23-24-15 and adopt Resolution 23-24-15 with the revised Exhibit "A" to decrease the fee for insurance from $10.00 to $6.00.

Commissioner Tuck moved approval of the motion as recommended. Commissioner Elwell seconded the motion.

Upon roll call, all Commissioners voted aye. The motion carried. ***See Res. Book 35 Page 24 & SMB 153 Page 57.***

12. COUNTY ADMINISTRATION AND LEGAL

A. County Attorney Status Report.

Sherry G. Sutphen presented the County Attorney File Log as of October 19, 2023 and addressed the public comment process. Commissioner Campbell, Commissioner Elwell, and Commissioner Roberts expressed their concerns. ***See SMB 153 Page 58.***

B. Commissioner's Priorities and the Project Status Report.

Laurie Hurner, County Administrator, stated they will be moving the mobile home workshop forward after today, as there may not have been enough time for people to spend the whole day. She stated they will check the agenda for future dates.

Ms. Hurner stated staff is moving forward with priorities and will be in the next agenda packet for discussion. ***See SMB 153 Page 59.***

13. COMMISSIONERS

Commissioner Roberts congratulated Commissioner Kirouac for receiving a statewide distinguished service honor award from the Farm Bureau Federation. Commissioner Kirouac thanked Commissioner Roberts for his comments and stated he was very humbled and honored to be chosen for this award in the entire state of Florida.

Commissioner Roberts expressed his concerns on the Transportation Advantaged Program. Commissioner Tuck addressed concerns raised by Commissioner Roberts.

Commissioner Roberts wished everyone a Happy Thanksgiving.
Commissioner Kirouac and Commissioner Tuck expressed their concerns regarding the public hearing heard earlier today on land use.

Commissioner Tuck commented on the Spring Lake festival held last week and the Highlands Tea Party where she spoke regarding the county's budget and addressed questions.

Ms. Hurner and Ms. Sutphen addressed questions and concerns raised by Commissioner Tuck regarding the fire

assessments and pole barns, and Tropical Harbor.

Commissioner Elwell commented on the public hearing heard earlier today regarding land use and expressed his concerns.

Commissioner Elwell announced Ag-Venture will take place on November 14 – 16, 2023 and wished everyone a Happy Thanksgiving.

Commissioner Campbell commented on the Spring Lake festival and stated he and Commissioner Kirouac will attend an event at Hill-Gustat Middle School regarding school programs and opportunities for students.

Commissioner Campbell commented on the public hearing regarding land use and expressed his concerns.

14. INFORMATIONAL

A. Board payables from October 17, 2023, to November 6, 2023. *See Check Reports file.*

15. ADJOURN

Commissioner Kirouac moved to adjourn the Regular Meeting of the Board.

Chairman Campbell called for those in favor. The ayes have it and the motion carried.

The meeting adjourned at 3:29 p.m.

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER:	**Highlands County Clerk of Courts Accounting Manager Jackie Gabrus, CGFM**
SUBJECT/TITLE:	**Court-related and Other Miscellaneous Funds Revenue and Expenditures for the Board of County Commissioners**

STATEMENT OF ISSUE

This summary report is being provided in accordance with section 318.18(13) and 939.185 Florida Statutes, and Section 2.5 and 2.8 of the Highlands County Code of Ordinances.

RECOMMENDED ACTION

Motion to accept into the record the Court-related and Other Miscellaneous Funds Revenue and Expenditures Summary, for the quarter ended December 31, 2023.

Attachments: FY 2024 Court-Related and Other Misc Funds Memo Dec 2023.pdf

Jerome Kaszubowski
Clerk of Circuit Court & Comptroller
Highlands County, Florida

CLERK OF CIRCUIT COURT
CLERK OF COUNTY COURT
COUNTY AUDITOR
COUNTY RECORDER
CLERK TO THE BOARD OF COUNTY COMMISSIONERS

590 S COMMERCE AVE
SEBRING FL 33870-3867
PHONE (863) 402-6565
FAX (863) 402-6768

MEMORANDUM

Date: **February 6, 2024**

To: **Highlands County Board of County Commissioners**

From: **Jackie Gabrus, Accounting Manager**
Highlands County Clerk of Courts

Subject: **Court-Related and Other Miscellaneous Funds Revenue and Expenditures for the Board of County Commissioners**

Following is a summary of various court-related and other miscellaneous funds revenue and expenditures for October through December 2023.

Fund	Reference	Quarterly Revenues	Quarterly Expenditures	Fiscal Year Expenditure Budget Balance
122	E911 Operations Fund	$ 0.00(a)	$ 587,570.82	$ 1,031,920.75
131	Intergovernmental Radio Communications Fund	24,831.80	405,203.67	0.33
140	Law Enforcement Education Trust Fund (Ord. No. 98-16 and 98-17)	6,337.16	0.00	0.00
149	Dori Slosberg Driver Education Safety Act (Ord. No. 02-03-2 and 10-11-03)	7,032.92	0.00	30,000.00
176	State Court Facilities Trust Fund (F.S. 318.18 and Ord. No. 02-03-23)	41,251.76	37,444.84	286,320.16
177	Court Innovations (F.S. 939.185 and Ord. No.03-04-23)	4,349.60	0.00	50,400.00
177A	Law Library (F.S. 939.185 and Ord. No.03-04-23)	4,252.99	4,252.99	14,147.01
177B	Legal Aid Program (F.S. 939.185 and Ord. No.03-04-23)	4,246.85	9,850.01	51,699.99
177C	Juvenile Alternative Program (F.S. 939.185 and Ord. No.03-04-23)	4,264.47	0.00	18,400.00
160	Teen Court – F.S. 939.19(5) (Clerk Fund)	4,752.93	4,711.24	N/A

(a) Revenues received from the state lag 2-3 months.

Please contact our office if you need additional information.

Thank you.

cc: Jerome Kaszubowski, Clerk of Courts
Laurie Hurner, County Administrator
Nicholas Sawyer, Deputy County Administrator/Chief of Staff
David Ontermaa, Senior Director of Court Services
Paul Blackman, Sheriff
Garrett Roberts, General Counsel, Sheriff's Office

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER: **Leah Sauls, Development Services Director**

SUBJECT/TITLE: **Request appointment of Lidia Capote of TRU by Hilton/ Residence by Marriott as a Regular Member to the Tourist Development Council with term expiring May 2027, fulfilling the Owners/Operators of Tourist Accommodation vacancy.**

STATEMENT OF ISSUE

The Tourist Development Council (TDC) received notice of resignation from the TDC from Victoria Currence of Tru by Hilton on December 9, 2023. With Ms. Currence's resignation, the TDC has one (1) vacancy of the Owners/Operators of Tourist Accommodation category. Notice of the vacancy was shared on December 13, 2023. The TDC has received one eligible application for appointment to the vacated seat, that being from Lidia Capote, dual general manager of the TRU by Hilton and Residence by Marriott in Sebring. If appointed, Ms. Capote will complete the 4-year term held by Ms. Currence, ending in May 2027. Florida Statutes, Section 125.0104, requires the TDC be consist of nine (9) members, meeting the following requirements: one (1) representative of the Board of County Commissioners; two (2) elected municipal officials, one being from the most populous city in the county; six (6) persons involved in and having demonstrated interest in tourist development, three of which be owners or operators of tourist accommodations and subject to the Tourist Development Tax.

Current Tourist Development Council members:

1. Commissioner Christopher Campbell Term Expires: Dec. 31, 2024

2. Charles Wilson / Town of Lake Placid Term Expires: 06/20/2026

3. Josh Stewart / Sebring City Council Term Expires: 05/02/2027

4. Christine Hatfield / Inn on the Lakes (HOTEL Seat 1 of the minimum 3 required seats by FL Statute) Term Expires: 05/02/2027

5. Maritza Cristiansen / LaQuinta by Wyndham – Sebring (HOTEL Seat 2 of the min. 3 required seats by FL Statute) Term Expires: 05/02/2025

6. Cynthia Garren / South Florida State College Term Expires: 05/02/2027

7. Andy Kesling / Pinecrest Golf Club Term Expires: 05/02/2027

8. Elizabeth Worley / Sebring International Raceway Term Expires: 05/02/2025

9. Vacant / Owner/Operator of Tourist Accommodation Category (HOTEL Seat 3 of the minimum 3 required seats by the FL Statute) Term Expires: May/XX/2027

In pertinent part, Florida Statues, Section 125.0101 (4)(e) regarding the TDC provides as follows:
The governing board of each county which levies and imposes a tourist development tax under this section shall appoint an advisory council to be known as the "(name of county) Tourist Development Council." The council shall be established by ordinance and composed of nine members who shall be appointed by the governing board. The chair of the governing board of the county or any other member of the governing board as designated by the chair shall serve on the council. Two members of the council shall be elected municipal officials, at least one of whom shall be from the most populous municipality in the county or subcounty special taxing district in which the tax is levied. Six members of the council shall be persons who are involved in the tourist industry and who have demonstrated an interest in tourist development, of which members, not less than three nor more than four shall be owners or operators of motels, hotels, recreational vehicle parks, or other tourist accommodations in the county and subject to the tax. All members of the council shall be electors of the county. The governing board of the county shall have the option of designating the chair of the council or a lowing the council to elect a chair. The chair shall be appointed or elected annually and may be reelected or reappointed. The members of the council shall serve for staggered terms of 4 years. The terms of office of the original members shall be prescribed in the resolution required under paragraph (b). The council shall meet at least once each quarter and, from time to time, shall make recommendations to the county governing board for the effective operation of the special projects or for uses of the tourist development tax revenue and perform such other duties as may be prescribed by county ordinance or resolution. The council shall continuously review expenditures of revenues from the tourist development trust fund and shall receive, at least quarterly, expenditure reports from the county governing board or its designee. Expenditures which the council believes to be unauthorized shall be reported to the county governing board and the Department of Revenue. The governing board and the department shall review the findings of the council and take appropriate administrative or judicial action to ensure compliance with this section. The changes in the composition of the membership of the tourist development council mandated by chapter 86-4, Laws of Florida, and this act shall not cause the interruption of the current term of any person who is a member of a council in October.

RECOMMENDED ACTION

Move to appoint Lidia Capote of TRU by Hilton/ Residence by Marriott as a Regular Member to the Tourist Development Council with term expiring May 2027, fulfilling the Owners/Operators of Tourist Accommodation vacancy.

FISCAL IMPACT

There is no fiscal impact.

Attachments: L. Capote TDC Application.pdf
FL Tourism Statute 125.0104.pdf

FW: Committee Application

Strahan, Chantel E. <cbrutus@highlandsfl.gov>

Mon 12/18/2023 9:02 AM

To:Fultz, Reagan H <rfultz@highlandsfl.gov>
Cc:Drake, Michelle <Mdrake@highlandsfl.gov>;Sauls, Leah M. <lsauls@highlandsfl.gov>;Wohl, Casey <casey.wohl@yahoo.com>

Name = Lydia Capote
Address = 3221 Tubbs Rd
City = Sebring
State = FL
Zip_Postal_Code = 33870
Phone = 352-470-4724
Email = LCapote@ZMCHotels.com
Request = Tourist Development Council
Membership Type = Regular Member
Current Employment Experience: = Dual Property General Manager: TRU by Hilton/ Residence by MarriottStarted working with ZMC Hotels in January of 2020. Left the company in 2022 to continue to strengthen my career in the south Florida Market.
Previous Employment Experience: = Marriott International:I have had to opportunity to work alongside some of the biggest Marriott Franchise companies throughout the state of Florida. Marriott Downtown Orlando- Opened this property and over saw the daily Ops.Intercontinental Hotel Group:I started my career in Hospitality at the age of 18 where I started as a housekeeper and worked my way up to a General Manager. I started my first hotel at the Holiday Inn resort in Key Largo, FL Where Hospitality and tourism really thrive.
High School = Coral Shores High School- Tavernier FL (FL KEYS)
College = Phoenix University Online
Special Training: = Hospitality Management and Tourism Certificate
Activities & Interest: = I enjoy the countryside and being with my teenage boys. We are a very Adventurous family and love four wheeling, fishing, and anything Ocean related. Being from the Florida key this has always been a way of life for us. I enjoy amusement parks and hiking as well.
Current positions on boards, committees, elected offices, law enforcement positions: = N/A
Relation = No
Relative Name: =
Relationship: =
Conviction = No
Gender = Female
Disabled = No
Age = 36
Race: = Hispanic or Latino
Signature Certification: = Checked indicating Electronically Signed
Client IP = 63.144.194.243

[***CAUTION:** This message originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.]

125.0104 Tourist development tax; procedure for levying; authorized uses; referendum; enforcement.—

(1) SHORT TITLE.—This section shall be known and may be cited as the "Local Option Tourist Development Act."

(2) APPLICATION; DEFINITIONS.—

(a) *Application.*—The provisions contained in chapter 212 apply to the administration of any tax levied pursuant to this section.

(b) *Definitions.*—For purposes of this section:

1. "Promotion" means marketing or advertising designed to increase tourist-related business activities.

2. "Tourist" means a person who participates in trade or recreation activities outside the county of his or her permanent residence or who rents or leases transient accommodations as described in paragraph (3)(a).

3. "Retained spring training franchise" means a spring training franchise that had a location in this state on or before December 31, 1998, and that has continuously remained at that location for at least the 10 years preceding that date.

(3) TAXABLE PRIVILEGES; EXEMPTIONS; LEVY; RATE.—

(a)1. It is declared to be the intent of the Legislature that every person who rents, leases, or lets for consideration any living quarters or accommodations in any hotel, apartment hotel, motel, resort motel, apartment, apartment motel, roominghouse, mobile home park, recreational vehicle park, condominium, or timeshare resort for a term of 6 months or less is exercising a privilege which is subject to taxation under this section, unless such person rents, leases, or lets for consideration any living quarters or accommodations which are exempt according to the provisions of chapter 212.

2.a. Tax shall be due on the consideration paid for occupancy in the county pursuant to a regulated short-term product, as defined in s. 721.05, or occupancy in the county pursuant to a product that would be deemed a regulated short-term product if the agreement to purchase the short-term right were executed in this state. Such tax shall be collected on the last day of occupancy within the county unless such consideration is applied to the purchase of a timeshare estate. The occupancy of an accommodation of a timeshare resort pursuant to a timeshare plan, a multisite timeshare plan, or an exchange transaction in an exchange program, as defined in s. 721.05, by the owner of a timeshare interest or such owner's guest, which guest is not paying monetary consideration to the owner or to a third party for the benefit of the owner, is not a privilege subject to taxation under this section. A membership or transaction fee paid by a timeshare owner that does not provide the timeshare owner with the right to occupy any specific timeshare unit but merely provides the timeshare owner with the opportunity to exchange a timeshare interest through an exchange program is a service charge and not subject to taxation under this section.

b. Consideration paid for the purchase of a timeshare license in a timeshare plan, as defined in s. 721.05, is rent subject to taxation under this section.

(b) Subject to the provisions of this section, any county in this state may levy and impose a tourist development tax on the exercise within its boundaries of the taxable privilege described in paragraph (a), except that there shall be no additional levy under this section in any cities or towns presently imposing a municipal resort tax as authorized under chapter 67-930, Laws of Florida, and this section shall not in any way affect the powers and existence of any tourist development authority created pursuant to chapter 67-930, Laws of Florida. No county

authorized to levy a convention development tax pursuant to s. 212.0305, or to s. 8 of chapter 84-324, Laws of Florida, shall be allowed to levy more than the 2-percent tax authorized by this section. A county may elect to levy and impose the tourist development tax in a subcounty special district of the county. However, if a county so elects to levy and impose the tax on a subcounty special district basis, the district shall embrace all or a significant contiguous portion of the county, and the county shall assist the Department of Revenue in identifying the rental units subject to tax in the district.

(c) The tourist development tax shall be levied, imposed, and set by the governing board of the county at a rate of 1 percent or 2 percent of each dollar and major fraction of each dollar of the total consideration charged for such lease or rental. When receipt of consideration is by way of property other than money, the tax shall be levied and imposed on the fair market value of such nonmonetary consideration.

(d) In addition to any 1-percent or 2-percent tax imposed under paragraph (c), the governing board of the county may levy, impose, and set an additional 1 percent of each dollar above the tax rate set under paragraph (c) for the purposes set forth in subsection (5) by referendum of the registered electors within the county or subcounty special district pursuant to subsection (6). A county may not levy, impose, and set the tax authorized under this paragraph unless the county has imposed the 1-percent or 2-percent tax authorized under paragraph (c) for a minimum of 3 years before the effective date of the levy and imposition of the tax authorized by this paragraph. Revenues raised by the additional tax authorized under this paragraph may not be used for debt service on or refinancing of existing facilities as specified in subparagraph (5)(a)1. unless approved by referendum pursuant to subsection (6). If the 1-percent or 2-percent tax authorized in paragraph (c) is levied within a subcounty special taxing district, the additional tax authorized in this paragraph shall only be levied therein. The provisions of paragraphs (4)(a)-(d) shall not apply to the adoption of the additional tax authorized in this paragraph. The effective date of the levy and imposition of the tax authorized under this paragraph is the first day of the second month following approval of the ordinance by referendum or the first day of any subsequent month specified in the ordinance. A certified copy of such ordinance shall be furnished by the county to the Department of Revenue within 10 days after approval of such ordinance.

(e) The tourist development tax shall be in addition to any other tax imposed pursuant to chapter 212 and in addition to all other taxes and fees and the consideration for the rental or lease.

(f) The tourist development tax shall be charged by the person receiving the consideration for the lease or rental, and it shall be collected from the lessee, tenant, or customer at the time of payment of the consideration for such lease or rental.

(g) The person receiving the consideration for such rental or lease shall receive, account for, and remit the tax to the Department of Revenue at the time and in the manner provided for persons who collect and remit taxes under s. 212.03. The same duties and privileges imposed by chapter 212 upon dealers in tangible property, respecting the collection and remission of tax; the making of returns; the keeping of books, records, and accounts; and compliance with the rules of the Department of Revenue in the administration of that chapter shall apply to and be binding upon all persons who are subject to the provisions of this section. However, the Department of Revenue may authorize a quarterly return and payment when the tax remitted by the dealer for the preceding quarter did not exceed $25.

(h) The Department of Revenue shall keep records showing the amount of taxes collected, which records shall also include records disclosing the amount of taxes collected for and from each county in which the tax authorized by this section is applicable. These records shall be open for inspection during the regular office hours of the Department of Revenue, subject to the provisions of s. 213.053.

(i) Collections received by the Department of Revenue from the tax, less costs of administration of this section, shall be paid and returned monthly to the county which imposed the tax, for use by the county in accordance with the provisions of this section. They shall be placed in the county tourist development trust fund of the respective county, which shall be established by each county as a condition precedent to receipt of such funds.

(j) The Department of Revenue is authorized to employ persons and incur other expenses for which funds are appropriated by the Legislature.

(k) The Department of Revenue shall promulgate such rules and shall prescribe and publish such forms as may be necessary to effectuate the purposes of this section.

(l) In addition to any other tax which is imposed pursuant to this section, a county may impose up to an additional 1-percent tax on the exercise of the privilege described in paragraph (a) by ordinance approved by referendum pursuant to subsection (6) to:

1. Pay the debt service on bonds issued to finance the construction, reconstruction, or renovation of a professional sports franchise facility, or the acquisition, construction, reconstruction, or renovation of a retained spring training franchise facility, either publicly owned and operated, or publicly owned and operated by the owner of a professional sports franchise or other lessee with sufficient expertise or financial capability to operate such facility, and to pay the planning and design costs incurred prior to the issuance of such bonds.

2. Pay the debt service on bonds issued to finance the construction, reconstruction, or renovation of a convention center, and to pay the planning and design costs incurred prior to the issuance of such bonds.

3. Pay the operation and maintenance costs of a convention center for a period of up to 10 years. Only counties that have elected to levy the tax for the purposes authorized in subparagraph 2. may use the tax for the purposes enumerated in this subparagraph. Any county that elects to levy the tax for the purposes authorized in subparagraph 2. after July 1, 2000, may use the proceeds of the tax to pay the operation and maintenance costs of a convention center for the life of the bonds.

4. Promote and advertise tourism in the State of Florida and nationally and internationally; however, if tax revenues are expended for an activity, service, venue, or event, the activity, service, venue, or event shall have as one of its main purposes the attraction of tourists as evidenced by the promotion of the activity, service, venue, or event to tourists.

The provision of paragraph (b) which prohibits any county authorized to levy a convention development tax pursuant to s. 212.0305 from levying more than the 2-percent tax authorized by this section, and the provisions of paragraphs (4)(a)-(d), shall not apply to the additional tax authorized in this paragraph. The effective date of the levy and imposition of the tax authorized under this paragraph is the first day of the second month following approval of the ordinance by referendum or the first day of any subsequent month specified in the ordinance. A certified copy of such ordinance shall be furnished by the county to the Department of Revenue within 10 days after approval of such ordinance.

(m)1. In addition to any other tax which is imposed pursuant to this section, a high tourism impact county may impose an additional 1-percent tax on the exercise of the privilege described in paragraph (a) by ordinance approved by referendum pursuant to subsection (6). The tax revenues received pursuant to this paragraph shall be used for one or more of the authorized uses pursuant to subsection (5).

2. A county is considered to be a high tourism impact county after the Department of Revenue has certified to such county that the sales subject to the tax levied pursuant to this section exceeded $600 million during the previous calendar year, or were at least 18 percent of the county's total taxable sales under chapter 212 where the sales subject to the tax levied pursuant to this section were a minimum of $200 million, except that no county authorized to levy a convention development tax pursuant to s. 212.0305 shall be considered a high tourism impact county. Once a county qualifies as a high tourism impact county, it shall retain this designation for the period the tax is levied pursuant to this paragraph.

3. The provisions of paragraphs (4)(a)-(d) shall not apply to the adoption of the additional tax authorized in this paragraph. The effective date of the levy and imposition of the tax authorized under this paragraph is the first day of the second month following approval of the ordinance by referendum or the first day of any subsequent month specified in the ordinance. A certified copy of such ordinance shall be furnished by the county to the Department of Revenue within 10 days after approval of such ordinance.

(n) In addition to any other tax that is imposed under this section, a county that has imposed the tax under paragraph (l) may impose an additional tax that is no greater than 1 percent on the exercise of the privilege described in paragraph (a) by ordinance approved by referendum pursuant to subsection (6) to:

1. Pay the debt service on bonds issued to finance:

a. The construction, reconstruction, or renovation of a facility either publicly owned and operated, or publicly owned and operated by the owner of a professional sports franchise or other lessee with sufficient expertise or financial capability to operate such facility, and to pay the planning and design costs incurred prior to the issuance of such bonds for a new professional sports franchise as defined in s. 288.1162.

b. The acquisition, construction, reconstruction, or renovation of a facility either publicly owned and operated, or publicly owned and operated by the owner of a professional sports franchise or other lessee with sufficient expertise or financial capability to operate such facility, and to pay the planning and design costs incurred prior to the issuance of such bonds for a retained spring training franchise.

2. Promote and advertise tourism in the State of Florida and nationally and internationally; however, if tax revenues are expended for an activity, service, venue, or event, the activity, service, venue, or event shall have as one of its main purposes the attraction of tourists as evidenced by the promotion of the activity, service, venue, or event to tourists.

A county that imposes the tax authorized in this paragraph may not expend any ad valorem tax revenues for the acquisition, construction, reconstruction, or renovation of a facility for which tax revenues are used pursuant to subparagraph 1. The provision of paragraph (b) which prohibits any county authorized to levy a convention development tax pursuant to s. 212.0305 from levying more than the 2-percent tax authorized by this section shall not apply to the additional tax authorized by this paragraph in counties which levy convention development taxes pursuant to s. 212.0305(4)(a). Subsection (4) does not apply to the adoption of the additional tax authorized in this paragraph. The effective date of the levy and imposition of the tax authorized under this paragraph is the first day of the second month following approval of the ordinance by referendum or the first day of any subsequent month specified in the ordinance. A certified copy of such ordinance shall be furnished by the county to the Department of Revenue within 10 days after approval of the ordinance.

(4) ORDINANCE LEVY TAX; PROCEDURE.—

(a) The tourist development tax shall be levied and imposed pursuant to an ordinance containing the county tourist development plan prescribed under paragraph (c), enacted by the governing board of the county. The ordinance levying and imposing the tourist development tax shall not be effective unless the electors of the county or the electors in the subcounty special district in which the tax is to be levied approve the ordinance authorizing the levy and imposition of the tax, in accordance with subsection (6). The effective date of the levy and imposition of the tax is the first day of the second month following approval of the ordinance by referendum or the first day of any subsequent month specified in the ordinance. A certified copy of the ordinance shall be furnished by the county to the Department of Revenue within 10 days after approval of such ordinance. The governing authority of any county levying such tax shall notify the department, within 10 days after approval of the ordinance by referendum, of the time period during which the tax will be levied.

(b) At least 60 days before the enactment or renewal of the ordinance levying the tax, the governing board of the county shall adopt a resolution establishing and appointing the members of the county tourist development council, as prescribed in paragraph (e), and indicating the intention of the county to consider the enactment or renewal of an ordinance levying and imposing the tourist development tax.

(c) Before a referendum to enact or renew [1]the ordinance levying and imposing the tax, the county tourist development council shall prepare and submit to the governing board of the county for its approval a plan for tourist development. The plan shall set forth the anticipated net tourist development tax revenue to be derived by the county for the 24 months following the levy of the tax; the tax district in which the enactment or renewal of the ordinance levying and imposing the tourist development tax is proposed; and a list, in the order of priority, of the proposed uses of the tax revenue by specific project or special use as the same are authorized under subsection (5). The plan shall include the approximate cost or expense allocation for each specific project or special use.

(d) The governing board of the county shall adopt the county plan for tourist development as part of the ordinance levying the tax. After enactment or renewal of the ordinance levying and imposing the tax, the plan [2]for tourist development may not be substantially amended except by ordinance enacted by an affirmative vote of a majority plus one additional member of the governing board.

(e) The governing board of each county which levies and imposes a tourist development tax under this section shall appoint an advisory council to be known as the "_(name of county)_ Tourist Development Council." The council shall be established by ordinance and composed of nine members who shall be appointed by the governing board. The chair of the governing board of the county or any other member of the governing board as designated by the chair shall serve on the council. Two members of the council shall be elected municipal officials, at least one of whom shall be from the most populous municipality in the county or subcounty special taxing district in which the tax is levied. Six members of the council shall be persons who are involved in the tourist industry and who have demonstrated an interest in tourist development, of which members, not less than three nor more than four shall be owners or operators of motels, hotels, recreational vehicle parks, or other tourist accommodations in the county and subject to the tax. All members of the council shall be electors of the county. The governing board of the county shall have the option of designating the chair of the council or allowing the council to elect a chair. The chair shall be appointed or elected annually and may be reelected or reappointed. The members of the council shall serve for staggered terms of 4 years. The terms of office of the original members shall be prescribed in the resolution required under paragraph (b). The council shall meet at least once each quarter and, from time to time, shall make recommendations to the county governing board for the effective operation of the special projects or for uses of the tourist development tax revenue and perform such other duties as may be prescribed by county ordinance or resolution. The council shall continuously review expenditures of revenues from the tourist development trust fund and shall receive, at least quarterly, expenditure reports from the county governing board or its designee. Expenditures which the council believes to be unauthorized shall be reported to the county governing board and the Department of Revenue. The governing board and the department shall review the findings of the council and take appropriate administrative or judicial action to ensure compliance with this section. The changes in the composition of the membership of the tourist development council mandated by chapter 86-4, Laws of Florida, and this act shall not cause the interruption of the current term of any person who is a member of a council on October 1, 1996.

(5) AUTHORIZED USES OF REVENUE.—

(a) All tax revenues received pursuant to this section by a county imposing the tourist development tax shall be used by that county for the following purposes only:

1. To acquire, construct, extend, enlarge, remodel, repair, improve, maintain, operate, or promote one or more:

a. Publicly owned and operated convention centers, sports stadiums, sports arenas, coliseums, or auditoriums within the boundaries of the county or subcounty special taxing district in which the tax is levied;

b. Auditoriums that are publicly owned but are operated by organizations that are exempt from federal taxation pursuant to 26 U.S.C. s. 501(c)(3) and open to the public, within the boundaries of the county or subcounty special taxing district in which the tax is levied; or

c. Aquariums or museums that are publicly owned and operated or owned and operated by not-for-profit organizations and open to the public, within the boundaries of the county or subcounty special taxing district in which the tax is levied;

2. To promote zoological parks that are publicly owned and operated or owned and operated by not-for-profit organizations and open to the public;

3. To promote and advertise tourism in this state and nationally and internationally; however, if tax revenues are expended for an activity, service, venue, or event, the activity, service, venue, or event must have as one of its main purposes the attraction of tourists as evidenced by the promotion of the activity, service, venue, or event to tourists;

4. To fund convention bureaus, tourist bureaus, tourist information centers, and news bureaus as county agencies or by contract with the chambers of commerce or similar associations in the county, which may include any indirect administrative costs for services performed by the county on behalf of the promotion agency;

5. To finance beach park facilities, or beach, channel, estuary, or lagoon improvement, maintenance, renourishment, restoration, and erosion control, including construction of beach groins and shoreline protection, enhancement, cleanup, or restoration of inland lakes and rivers to which there is public access as those uses relate

to the physical preservation of the beach, shoreline, channel, estuary, lagoon, or inland lake or river. However, any funds identified by a county as the local matching source for beach renourishment, restoration, or erosion control projects included in the long-range budget plan of the state's Beach Management Plan, pursuant to s. 161.091, or funds contractually obligated by a county in the financial plan for a federally authorized shore protection project may not be used or loaned for any other purpose. In counties of fewer than 100,000 population, up to 10 percent of the revenues from the tourist development tax may be used for beach park facilities; or

6. To acquire, construct, extend, enlarge, remodel, repair, improve, maintain, operate, or finance public facilities within the boundaries of the county or subcounty special taxing district in which the tax is levied, if the public facilities are needed to increase tourist-related business activities in the county or subcounty special district and are recommended by the county tourist development council created pursuant to paragraph (4)(e). Tax revenues may be used for any related land acquisition, land improvement, design and engineering costs, and all other professional and related costs required to bring the public facilities into service. As used in this subparagraph, the term "public facilities" means major capital improvements that have a life expectancy of 5 or more years, including, but not limited to, transportation, sanitary sewer, solid waste, drainage, potable water, and pedestrian facilities. Tax revenues may be used for these purposes only if the following conditions are satisfied:

a. In the county fiscal year immediately preceding the fiscal year in which the tax revenues were initially used for such purposes, at least $10 million in tourist development tax revenue was received;

b. The county governing board approves the use for the proposed public facilities by a vote of at least two-thirds of its membership;

c. No more than 70 percent of the cost of the proposed public facilities will be paid for with tourist development tax revenues, and sources of funding for the remaining cost are identified and confirmed by the county governing board;

d. At least 40 percent of all tourist development tax revenues collected in the county are spent to promote and advertise tourism as provided by this subsection; and

e. An independent professional analysis, performed at the expense of the county tourist development council, demonstrates the positive impact of the infrastructure project on tourist-related businesses in the county.

Subparagraphs 1. and 2. may be implemented through service contracts and leases with lessees that have sufficient expertise or financial capability to operate such facilities.

(b) Tax revenues received pursuant to this section by a county of less than 950,000 population imposing a tourist development tax may only be used by that county for the following purposes in addition to those purposes allowed pursuant to paragraph (a): to acquire, construct, extend, enlarge, remodel, repair, improve, maintain, operate, or promote one or more zoological parks, fishing piers or nature centers which are publicly owned and operated or owned and operated by not-for-profit organizations and open to the public. All population figures relating to this subsection shall be based on the most recent population estimates prepared pursuant to the provisions of s. 186.901. These population estimates shall be those in effect on July 1 of each year.

(c) A county located adjacent to the Gulf of Mexico or the Atlantic Ocean, except a county that receives revenue from taxes levied pursuant to s. 125.0108, which meets the following criteria may use up to 10 percent of the tax revenue received pursuant to this section to reimburse expenses incurred in providing public safety services, including emergency medical services as defined in s. 401.107(3), and law enforcement services, which are needed to address impacts related to increased tourism and visitors to an area. However, if taxes collected pursuant to this section are used to reimburse emergency medical services or public safety services for tourism or special events, the governing board of a county or municipality may not use such taxes to supplant the normal operating expenses of an emergency medical services department, a fire department, a sheriff's office, or a police department. To receive reimbursement, the county must:

1.a. Generate a minimum of $10 million in annual proceeds from any tax, or any combination of taxes, authorized to be levied pursuant to this section;

b. Have at least three municipalities; and

c. Have an estimated population of less than 275,000, according to the most recent population estimate prepared pursuant to s. 186.901, excluding the inmate population; or

2. Be a fiscally constrained county as described in s. 218.67(1).

The board of county commissioners must by majority vote approve reimbursement made pursuant to this paragraph upon receipt of a recommendation from the tourist development council.

(d) The revenues to be derived from the tourist development tax may be pledged to secure and liquidate revenue bonds issued by the county for the purposes set forth in subparagraphs (a)1., 2., and 5. or for the purpose of refunding bonds previously issued for such purposes, or both; however, no more than 50 percent of the revenues from the tourist development tax may be pledged to secure and liquidate revenue bonds or revenue refunding bonds issued for the purposes set forth in subparagraph (a)5. Such revenue bonds and revenue refunding bonds may be authorized and issued in such principal amounts, with such interest rates and maturity dates, and subject to such other terms, conditions, and covenants as the governing board of the county shall provide. The Legislature intends that this paragraph be full and complete authority for accomplishing such purposes, but such authority is supplemental and additional to, and not in derogation of, any powers now existing or later conferred under law.

(e) Any use of the local option tourist development tax revenues collected pursuant to this section for a purpose not expressly authorized by paragraph (3)(l) or paragraph (3)(n) or paragraphs (a)-(d) of this subsection is expressly prohibited.

(6) REFERENDUM.—

(a) An ordinance enacted or renewed by a county levying the tax authorized by this section may not take effect until the ordinance levying and imposing the tax has been approved in a referendum held at a general election, as defined in s. 97.021, by a majority of the electors voting in such election in the county or by a majority of the electors voting in the subcounty special tax district affected by the tax.

(b) The governing board of the county levying the tax shall arrange to place a question on the ballot at a general election, as defined in s. 97.021, to be held within the county, which question shall be in substantially the following form:

FOR the Tourist Development Tax
AGAINST the Tourist Development Tax

(c) If a majority of the electors voting on the question approve the levy, the ordinance shall be deemed to be in effect.

(d) In any case where an ordinance levying and imposing the tax has been approved by referendum pursuant to this section and 15 percent of the electors in the county or 15 percent of the electors in the subcounty special district in which the tax is levied file a petition with the board of county commissioners for a referendum to repeal the tax, the board of county commissioners shall cause an election to be held for the repeal of the tax which election shall be subject only to the outstanding bonds for which the tax has been pledged. However, the repeal of the tax shall not be effective with respect to any portion of taxes initially levied in November 1989, which has been pledged or is being used to support bonds under paragraph (3)(d) or paragraph (3)(l) until the retirement of those bonds.

(e) A referendum to reenact an expiring tourist development tax must be held at a general election occurring within the 48-month period immediately preceding the effective date of the reenacted tax, and the referendum may appear on the ballot only once within the 48-month period.

(7) AUTOMATIC EXPIRATION ON RETIREMENT OF BONDS.—Notwithstanding any other provision of this section, if the plan for tourist development approved by the governing board of the county, as amended pursuant to paragraph (4)(d), includes the acquisition, construction, extension, enlargement, remodeling, repair, or improvement of a publicly owned and operated convention center, sports stadium, sports arena, coliseum, or auditorium, or museum or aquarium that is publicly owned and operated or owned and operated by a not-for-profit organization, the county ordinance levying and imposing the tax automatically expires upon the later of:

(a) The retirement of all bonds issued by the county for financing the acquisition, construction, extension, enlargement, remodeling, repair, or improvement of a publicly owned and operated convention center, sports stadium, sports arena, coliseum, or auditorium, or museum or aquarium that is publicly owned and operated or owned and operated by a not-for-profit organization; or

(b) The expiration of any agreement by the county for the operation or maintenance, or both, of a publicly owned and operated convention center, sports stadium, sports arena, coliseum, auditorium, aquarium, or museum. However, this does not preclude that county from amending the ordinance extending the tax to the extent that the board of the county determines to be necessary to provide funds to operate, maintain, repair, or renew and replace a publicly owned and operated convention center, sports stadium, sports arena, coliseum, auditorium, aquarium, or museum or from enacting an ordinance that takes effect without referendum approval, unless the original referendum required ordinance expiration, pursuant to the provisions of this section reimposing a tourist development tax, upon or following the expiration of the previous ordinance.

(8) PROHIBITED ACTS; ENFORCEMENT; PENALTIES.—

(a) Any person who is taxable hereunder who fails or refuses to charge and collect from the person paying any rental or lease the taxes herein provided, either by himself or herself or through agents or employees, is, in addition to being personally liable for the payment of the tax, guilty of a misdemeanor of the first degree, punishable as provided in s. 775.082 or s. 775.083.

(b) No person shall advertise or hold out to the public in any manner, directly or indirectly, that he or she will absorb all or any part of the tax, that he or she will relieve the person paying the rental of the payment of all or any part of the tax, or that the tax will not be added to the rental or lease consideration or, when added, that it or any part thereof will be refunded or refused, either directly or indirectly, by any method whatsoever. Any person who willfully violates any provision of this subsection is guilty of a misdemeanor of the first degree, punishable as provided in s. 775.082 or s. 775.083.

(c) The tax authorized to be levied by this section shall constitute a lien on the property of the lessee, customer, or tenant in the same manner as, and shall be collectible as are, liens authorized and imposed in ss. 713.67, 713.68, and 713.69.

(9) COUNTY TOURISM PROMOTION AGENCIES.—In addition to any other powers and duties provided for agencies created for the purpose of tourism promotion by a county levying the tourist development tax, such agencies are authorized and empowered to:

(a) Provide, arrange, and make expenditures for transportation, lodging, meals, and other reasonable and necessary items and services for such persons, as determined by the head of the agency, in connection with the performance of promotional and other duties of the agency. However, entertainment expenses shall be authorized only when meeting with travel writers, tour brokers, or other persons connected with the tourist industry. All travel and entertainment-related expenditures in excess of $10 made pursuant to this subsection shall be substantiated by paid bills therefor. Complete and detailed justification for all travel and entertainment-related expenditures made pursuant to this subsection shall be shown on the travel expense voucher or attached thereto. Transportation and other incidental expenses, other than those provided in s. 112.061, shall only be authorized for officers and employees of the agency, other authorized persons, travel writers, tour brokers, or other persons connected with the tourist industry when traveling pursuant to paragraph (c). All other transportation and incidental expenses pursuant to this subsection shall be as provided in s. 112.061. Operational or promotional advancements, as defined in s. 288.35(4), obtained pursuant to this subsection, shall not be commingled with any other funds.

(b) Pay by advancement or reimbursement, or a combination thereof, the costs of per diem and incidental expenses of officers and employees of the agency and other authorized persons, for foreign travel at the current rates as specified in the federal publication “Standardized Regulations (Government Civilians, Foreign Areas).” The provisions of this paragraph shall apply for any officer or employee of the agency traveling in foreign countries for the purposes of promoting tourism and travel to the county, if such travel expenses are approved and certified by the agency head from whose funds the traveler is paid. As used in this paragraph, the term “authorized person” shall have the same meaning as provided in s. 112.061(2)(c). With the exception of provisions concerning rates of payment for per diem, the provisions of s. 112.061 are applicable to the travel described in this paragraph. As used

in this paragraph, “foreign travel” means all travel outside the United States. Persons traveling in foreign countries pursuant to this subsection shall not be entitled to reimbursements or advancements pursuant to s. 112.061(6)(a)2.

(c) Pay by advancement or reimbursement, or by a combination thereof, the actual reasonable and necessary costs of travel, meals, lodging, and incidental expenses of officers and employees of the agency and other authorized persons when meeting with travel writers, tour brokers, or other persons connected with the tourist industry, and while attending or traveling in connection with travel or trade shows. With the exception of provisions concerning rates of payment, the provisions of s. 112.061 are applicable to the travel described in this paragraph.

(d) Undertake marketing research and advertising research studies and provide reservations services and convention and meetings booking services consistent with the authorized uses of revenue as set forth in subsection (5).

1. Information given to a county tourism promotion agency which, if released, would reveal the identity of persons or entities who provide data or other information as a response to a sales promotion effort, an advertisement, or a research project or whose names, addresses, meeting or convention plan information or accommodations or other visitation needs become booking or reservation list data, is exempt from s. 119.07(1) and s. 24(a), Art. I of the State Constitution.

2. The following information, when held by a county tourism promotion agency, is exempt from s. 119.07(1) and s. 24(a), Art. I of the State Constitution:

a. Booking business records, as defined in s. 255.047.

b. Trade secrets and commercial or financial information gathered from a person and privileged or confidential, as defined and interpreted under 5 U.S.C. s. 552(b)(4), or any amendments thereto.

(e) Represent themselves to the public as convention and visitors bureaus, visitors bureaus, tourist development councils, vacation bureaus, or county tourism promotion agencies operating under any other name or names specifically designated by ordinance.

(10) LOCAL ADMINISTRATION OF TAX.—

(a) A county levying a tax under this section or s. 125.0108 may be exempted from the requirements of the respective section that:

1. The tax collected be remitted to the Department of Revenue before being returned to the county; and

2. The tax be administered according to chapter 212,

if the county adopts an ordinance providing for the local collection and administration of the tax.

(b) The ordinance shall include provision for, but need not be limited to:

1. Initial collection of the tax to be made in the same manner as the tax imposed under chapter 212.

2. Designation of the local official to whom the tax shall be remitted, and that official’s powers and duties with respect thereto. Tax revenues may be used only in accordance with the provisions of this section.

3. Requirements respecting the keeping of appropriate books, records, and accounts by those responsible for collecting and administering the tax.

4. Provision for payment of a dealer’s credit as required under chapter 212.

5. A portion of the tax collected may be retained by the county for costs of administration, but such portion shall not exceed 3 percent of collections.

(c) A county adopting an ordinance providing for the collection and administration of the tax on a local basis shall also adopt an ordinance electing either to assume all responsibility for auditing the records and accounts of dealers, and assessing, collecting, and enforcing payments of delinquent taxes, or to delegate such authority to the Department of Revenue. If the county elects to assume such responsibility, it shall be bound by all rules promulgated by the Department of Revenue pursuant to paragraph (3)(k), as well as those rules pertaining to the sales and use tax on transient rentals imposed by s. 212.03. The county may use any power granted in this section to the department to determine the amount of tax, penalties, and interest to be paid by each dealer and to enforce payment of such tax, penalties, and interest. The county may use a certified public accountant licensed in this state in the administration of its statutory duties and responsibilities. Such certified public accountants are bound by the same confidentiality requirements and subject to the same penalties as the county under s. 213.053.

If the county delegates such authority to the department, the department shall distribute any collections so received, less costs of administration, to the county. The amount deducted for costs of administration by the department shall be used only for those costs which are solely and directly attributable to auditing, assessing, collecting, processing, and enforcing payments of delinquent taxes authorized in this section. If a county elects to delegate such authority to the department, the department shall audit only those businesses in the county that it audits pursuant to chapter 212.

(11) INTEREST PAID ON DISTRIBUTIONS.—

(a) Interest shall be paid on undistributed taxes collected and remitted to the Department of Revenue under this section. Such interest shall be included along with the tax proceeds distributed to the counties and shall be paid from moneys transferred from the General Revenue Fund. The department shall calculate the interest for net tax distributions using the average daily rate that was earned by the State Treasury for the preceding calendar quarter and paid to the General Revenue Fund. This rate shall be certified by the Chief Financial Officer to the department by the 20th day following the close of each quarter.

(b) The interest applicable to taxes collected under this section shall be calculated by multiplying the tax amounts to be distributed times the daily rate times the number of days after the third working day following the date the tax is due and payable pursuant to s. 212.11 until the date the department issues a voucher to request the Chief Financial Officer to issue the payment warrant. The warrant shall be issued within 7 days after the request.

(c) If an overdistribution of taxes is made by the department, interest shall be paid on the overpaid amount beginning on the date the warrant including the overpayment was issued until the third working day following the due date of the payment period from which the overpayment is being deducted. The interest on an overpayment shall be calculated using the average daily rate from the applicable calendar quarter and shall be deducted from moneys distributed to the county under this section.

History.—ss. 1, 2, 3, 4, 5, 6, 7, 8, ch. 77-209; s. 3, ch. 79-359; s. 72, ch. 79-400; s. 4, ch. 80-209; s. 2, ch. 80-222; s. 5, ch. 83-297; s. 1, ch. 83-321; s. 40, ch. 85-55; s. 1, ch. 86-4; s. 76, ch. 86-163; s. 61, ch. 87-6; s. 1, ch. 87-99; s. 35, ch. 87-101; s. 1, ch. 87-175; s. 5, ch. 87-280; s. 4, ch. 88-226; s. 6, ch. 88-243; s. 2, ch. 89-217; ss. 31, 66, ch. 89-356; s. 2, ch. 89-362; s. 1, ch. 90-107; s. 1, ch. 90-349; s. 81, ch. 91-45; s. 230, ch. 91-224; s. 3, ch. 92-175; s. 1, ch. 92-204; s. 32, ch. 92-320; s. 4, ch. 93-233; s. 1, ch. 94-275; s. 3, ch. 94-314; s. 37, ch. 94-338; s. 3, ch. 94-353; s. 1, ch. 95-133; s. 1434, ch. 95-147; s. 3, ch. 95-304; s. 1, ch. 95-360; s. 1, ch. 95-416; ss. 44, 46, ch. 96-397; s. 43, ch. 96-406; s. 15, ch. 97-99; s. 1, ch. 98-106; s. 58, ch. 99-2; s. 1, ch. 99-287; ss. 6, 11, 14, ch. 2000-312; s. 11, ch. 2000-351; s. 14, ch. 2001-252; s. 10, ch. 2002-265; s. 1, ch. 2003-34; s. 1, ch. 2003-37; s. 2, ch. 2003-78; s. 145, ch. 2003-261; s. 1, ch. 2005-96; s. 1, ch. 2009-133; s. 1, ch. 2012-180; s. 1, ch. 2013-168; s. 2, ch. 2016-6; s. 1, ch. 2016-220; s. 1, ch. 2017-36; s. 5, ch. 2018-118; s. 1, ch. 2020-10; s. 3, ch. 2022-5; s. 1, ch. 2022-214; s. 45, ch. 2023-8; s. 2, ch. 2023-157.

[1]**Note.**—The word “of” preceding the word “the” was deleted by the editors to improve clarity.

[2]**Note.**—The word “for” was substituted for the word “of” by the editors to conform to context.

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HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER: **Dustin Fitch, Interim Deputy Chief**

SUBJECT/TITLE: **Public Hearing to consider approval of Lifefleet Southeast Inc. d/b/a American Medical Response application for a Class 2 and 3 Certificate of Public Convenience and Necessity (COPCN).**

STATEMENT OF ISSUE

Lifefleet Southeast Inc. d/b/a American Medical Response submitted a new application of COPCN Class 2 -Basic Life Support Ambulance and Class 3 -Advanced Life Support Ambulance application to Highlands County Fire Rescue on December 6, 2023. The application was found complete and was publicly noticed on December 9, 2023, pursuant to Section 5-56(b) of the Code of Ordinances, Highlands County, Florida.

RECOMMENDED ACTION

Move to approve Lifefleet Southeast Inc. d/b/a American Medical Response application for a Class 2 and 3 Certificate of Public Convenience and Necessity (COPCN).

FISCAL IMPACT

There is no fiscal impact.

Attachments: Application 12.06.23.pdf
Ad 1.pdf
COPCN - Class 2 & 3.pdf

A Global Medical Response Solution

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        iv. Disclosure of all Pending Liabilities
        v. Management Plan

RECEIVED DEC - 6 2023

Highlands County Fire Rescue

CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY
NON-GOVERNMENTAL ENTITY
MEDICAL TRANSPORTATION SERVICE LICENSE APPLICATION

Please type. Answer all questions that apply to the level of service to be provided. Attach additional sheets as needed.

STATEMENTS AND MATERIALS SUBMITTED WILL BE SUBJECT TO VERIFICATION

CHECK TYPE OF APPLICATION FOR CLASSIFICATION OF SERVICE

☐ New ☑ Renewal

☐ Class 1 (NEMT) ■ Class 2 (BLS) ■ Class 3 (ALS) ☐ Class 4 (Air)

Lifefleet Southeast Inc., d/b/a American Medical Response
Name of Service

4531 Oak Fair Blvd	Tampa	FL	33610
Mailing Address	City	State	Zip Code

(813) 830-9530
Telephone

1. Global Medical Response — Danielle.Larocca@gmr.net
Owner's Name — Email Address

6501 S. Fiddlers Green Circle Suite 100	Greenwood Village	CO	80111
Mailing Address	City	State	Zip Code

(Attach names of elected officials associated with your service)

2. Edward Badamo — (203) 464-8778 — Edward.Badamo@gmr.net
General Manager/Contact Person — Telephone — Email Address

3. Date incorporated/formation of business association: 09/10/2020 (Attachment # 2)

(Attach articles of incorporation; names and address of shareholders along with number of outstanding shares.)

Additional pages may be added as needed

Highlands County Fire Rescue

4. Attach FCC license/communications contract: (Attachment # 3)

5. Address of present/proposed main station and any substations (attach list if more than three substations):

   Main Station: 4531 Oak Fair Blvd, Tampa, Fl 33610

   Substation: 1163 Berkley Rd, Auburndale, Fl 33823

   Substation: 13910 Fivay Rd, Hudson, Fl 34667

   Substation: _____

6. Financial Information: (Attachment # 4)

   Provide a financial statement as listed in Highlands County Code of Ordinances Section 5-56.

7. Insurance: (Attachment # 5)

   Provide copies of Certificates of Insurance as listed in Highlands County Code of Ordinances Section 5-52.

8. Vehicle information: Complete and attach appropriate form. Attachment # 6

9. Personnel information: Complete and attach appropriate form. Attachment # 7

10. All COPCN applicants: Attachment # 8

    A. Attach contract with a medical director as provided by State Law and include copy of DEA license (Class 2, 3, and 4 applicants only).

    B. Statement describing geographical area served by your company.

    C. Statement of facts and data describing the need for your service in Highlands County.

    D. Schedule of proposed fees to be charged for your service.

    E. Identify staffing patterns and operational hours for each permitted vehicle in your fleet.

Highlands County Fire Rescue

Edward Badamo
Signature of Owner/Manager

Regional Director
Title

STATE OF FLORIDA
COUNTY OF ORANGE

Sworn to (or affirmed) and subscribed before me this 1st day of December, 20 23, by Edward Badamo (name of person making statement).

Jerae A. Blanton
(Signature of Notary Public - State of Florida)

Seal

JERAE ANTOINETTE BLANTON
Notary Public - State of Florida
Commission # HH 266439
My Comm. Expires May 22, 2026
Bonded through National Notary Assn.

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known: ☑ OR Produced Identification ☐

Type of Identification Produced:

Highlands County Fire Rescue

Additional requirements: Attachment # 9

1. Attach letter of any investigation or formal disciplinary action involving your agency by the Florida Department of Health, or any local, state, or federal agency.

2. The financial ability of the applicant to provide the proposed services based on, at minimum, attach the following criteria:

    a. Audited financial statements or federal tax returns or, for newly formed corporations, personal audited financial statements from the principal(s), as defined by the county administrator.
    b. Pro forma statements.
    c. Credit and bank references, and current official credit report.
    d. Disclosure of any and all pending liabilities.

3. Attach the management plan of the applicant.

All applicants:

1. Return signed, notarized application along with a non-refundable application fee of $500, and vehicle permit fees of $100 per vehicle listed on Highlands County COPCN Certificate Vehicle form made payable to the Highlands County Board of County Commissioners.

2. Renewal applicants: Return signed, notarized application along with a non-refundable application fee of $500, and vehicle permit fees of $100 per vehicle listed on the Highlands County COPCN Certificate Vehicle form made payable to the Highlands County Board of County Commissioners. If request for renewal is less than three months from the expiration of COPCN or application inaccuracies caused by the applicant create a delay of renewal to extend beyond the expiration of the services current COPCN, a $250 late fee will be imposed and required paid prior to notification of renewal request.

Highlands County Fire Rescue

COPCN MANAGEMENT INFORMATION FORM

Name of service: Lifefleet Southeast Inc. d/b/a American Medical Response

Website address: www.AMR.Net

Highlands County business address:

City and Zip Code:

Headquarters business address:
4531 Oak Fair Blvd

City and Zip Code: Tampa, 33610

Dispatch telephone number: 813-885-7722

Management Contact Information

Name: Danielle LaRocca

24-hour contact number: 813-614-5404

Name: Edward Badamo

24-hour contact number: 206-464-8778

State of Florida

Department of State

I certify the attached is a true and correct copy of the Articles of Incorporation, as amended to date, of LIFEFLEET SOUTHEAST, INC., a corporation organized under the laws of the State of Florida, as shown by the records of this office.

The document number of this corporation is 408428.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Tenth day of September, 2020

Laurel M. Lee

Secretary of State

CR2E022 (01-11)



RADIO COMMUNICATIONS:

FROM VEHICLES:	Via medical radios
	UHF frequencies (State)
	Via cellular phones – all facilities
FROM BASE STATION:	Via medical radios
	UHF frequencies (State)
	Via cellular phones – all facilities

Federal Communications Commission
Wireless Telecommunications Bureau

RADIO STATION AUTHORIZATION

LICENSEE: AMERICAN MEDICAL RESPONSE, INC.

ATTN: FCC LICENSE COORDINATOR
AMERICAN MEDICAL RESPONSE, INC.
6200 SOUTH SYRACUSE WAY
GREENWOOD VILLAGE, CO 80111

Call Sign	File Number
WPMW560	0006064235
Radio Service IG - Industrial/Business Pool, Conventional	
Regulatory Status PMRS	
Frequency Coordination Number	

FCC Registration Number (FRN): 0004896650

Grant Date	Effective Date	Expiration Date	Print Date
12-24-2013	12-24-2013	02-24-2024	12-24-2013

STATION TECHNICAL SPECIFICATIONS

Fixed Location Address or Mobile Area of Operation

Loc. 1 **Address:** 10650 TANNER RD
City: TAMPA **County:** HILLSBOROUGH **State:** FL
Lat (NAD83): 27-59-39.1 N **Long (NAD83):** 082-19-26.3 W **ASR No.:** 1030331 **Ground Elev:** 3.0

Loc. 2 **Address:** 130 BURBANK RD
City: OLDSMAR **County:** PINELLAS **State:** FL
Lat (NAD83): 28-02-22.1 N **Long (NAD83):** 082-39-14.4 W **ASR No.:** 1010618 **Ground Elev:** 3.0

Loc. 3 **Area of Operation**
Land Mobile Control Station meeting the 6.1 Meter Rule: FL

Loc. 4 **Area of Operation**
Operating within a 32.0 km radius around fixed location 1

Loc. 5 **Area of Operation**
Operating within a 32.0 km radius around fixed location 2

Antennas

Loc. No.	Ant. No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
1	1	000451.65000000	FB2	1		11K0F3E	100.000	200.000	122.0	110.0	

Conditions:
Pursuant to §309(h) of the Communications Act of 1934, as amended, 47 U.S.C. §309(h), this license is subject to the following conditions: This license shall not vest in the licensee any right to operate the station nor any right in the use of the frequencies designated in the license beyond the term thereof nor in any other manner than authorized herein. Neither the license nor the right granted thereunder shall be assigned or otherwise transferred in violation of the Communications Act of 1934, as amended. See 47 U.S.C. § 310(d). This license is subject in terms to the right of use or control conferred by §706 of the Communications Act of 1934, as amended. See 47 U.S.C. §606.

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2023
Secretary of State
9375278851CC

DOCUMENT# 408428

Entity Name: LIFEFLEET SOUTHEAST, INC.

Current Principal Place of Business:

6363 S. FIDDLER'S GREEN CIRCLE
SUITE 1400
GREENWOOD VILLAGE, CO 80111

Current Mailing Address:

6363 S. FIDDLER'S GREEN CIRCLE
SUITE 1400
GREENWOOD VILLAGE, CO 80111 US

FEI Number: 59-1395439

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR
Name	HORNE, EDWARD VAN
Address	6363 S. FIDDLER'S GREEN CIRCLE SUITE 1400
City-State-Zip:	GREENWOOD VILLAGE CO 80111

Title	CFO
Name	PREISSLER, MICHAEL
Address	209 STATE HIGHWAY121 BYPASS SUITE 21
City-State-Zip:	LEWISVILLE TX 75067

Title	SECRETARY, EXECUTIVE VICE PRESIDENT
Name	COOK, THOMAS A.A.
Address	1001 BOARDWALK SPRINGS PLACE SUITE 250
City-State-Zip:	O'FALLON MO 63368

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS A.A. COOK — SECRETARY — 04/24/2023

Electronic Signature of Signing Officer/Director Detail — Date

AMR HoldCo Inc.

Consolidated Balance Sheets

(Amounts in thousands, unaudited)

	December 2022
ASSETS	
Cash and cash equivalents	$ 120,217
Insurance collateral	168,358
Accounts receivable, net	611,957
Supplies inventory	46,525
Prepaid expenses	42,323
Other current assets	38,267
Total current assets	1,027,647
Property and equipment, net	314,340
Operating right-of-use assets	194,388
Finance right-of-use assets	3,518
Intangible assets, net	953,262
Goodwill	839,358
Other assets	96,796
Total assets	$ 3,429,309
LIABILITIES AND EQUITY	
Accounts payable	$ 43,621
Accrued wages, benefits and taxes	132,624
Accrued interest	-
Other accrued liabilities	261,339
Current portion of lease obligations and long-term debt	45,056
Total current liabilities	482,640
Operating lease obligations	175,848
Finance lease obligations and long-term debt	4,559
Deferred income taxes	102,076
Insurance reserves	221,086
Other long-term liabilities	12,046
Total liabilities	998,255
Investment by Parent	2,233,553
Additional paid-in capital	-
Accumulated other comprehensive income (loss)	(3,423)
Retained earnings	200,924
Total equity	2,431,054
Total liabilities and equity	$ 3,429,309

AMR HoldCo Inc.

Consolidated Statement of Operations and Comprehensive Income (Loss)
(Amounts in thousands, unaudited)

	Year ended December 31, 2022
Net revenue	$ 3,223,810
Operating Expenses:	
Employee wages, benefits and taxes	1,941,937
Maintenance, fuel and other direct expenses	206,526
Insurance expense	114,519
Other operating expenses	970,557
Depreciation and amortization	152,328
Acquisition, integration and other charges	37,680
Total operating expenses	3,423,547
Operating income (loss)	(199,737)
Interest income (expense), net	2,956
Equity in earnings of unconsolidated affiliates	355
Other income (loss), net	(6,477)
Net income (loss) before income taxes	(202,903)
Income tax (benefit) expense	(68,258)
Net income (loss)	$ (134,645)
Comprehensive income (loss):	
Net income (loss)	(134,645)
Other comprehensive income (loss)	
Unrealized holding gains (losses) on investments	(12,093)
Defined benefit pension plan net gain (loss)	6,190
Deferred income tax benefit (expense), net	1,176
Total other comprehensive income (loss), net of income tax	(4,727)
Comprehensive income (loss)	$ (139,372)

AMR HoldCo Inc.

Consolidated Statements of Changes in Equity
(amounts in thousands, unaudited)

	Investment by Parent / Prior Parent	Accumulated Other Comprehensive Income (Loss)	Retained Earnings (Accumulated Deficit)	Total Equity
Balance at December 31, 2021 (Successor)	$ 2,364,331	$ 1,304	$ 335,569	$ 2,701,204
Net working capital distributed to Parent	(144,900)	-	-	(144,900)
Acquisitions funded by Parent	14,122	-	-	14,122
Net income (loss)	-	-	(134,645)	(134,645)
Other comprehensive income (loss), net of tax expense of [	-	(4,727)	-	(4,727)
Balance at December 31, 2022 (Successor)	$ 2,233,553	$ (3,423)	$ 200,924	$ 2,431,054

AMR HoldCo Inc.

Consolidated Statements of Cash Flows
(Amounts in thousands, unaudited)

	Year ended December 31, 2022
Cash flows from operating activities	
Net income (loss)	$ (134,645)
Adjustments to reconcile net income (loss) to net cash provided by (used in) operating activities:	
Depreciation and amortization	152,328
Loss on disposal of property and equipment	6,291
Unrealized loss (gain) on marketable equity securities	10,039
Other, net	5,264
Deferred income taxes	(45,664)
Equity in earnings of unconsolidated affiliates	355
Changes in operating assets / liabilities, net of acquisitions:	
Accounts receivable, net	(37,625)
Accounts payable	(504)
Accrued wages, benefits and taxes	(32,279)
Accrued interest	-
Accrued liabilities	23,971
Other assets and liabilities, net	59,203
Net cash provided by (used in) operating activies	6,734
Cash flows from investing activities	
Acquisition of businesses, net of cash and restricted cash acquired	(14,122)
Proceeds from the sale of property and equipment	816
Purchases of property and equipment	(125,965)
Net change in investments held as insurance collateral	1,816
Purchases of marketable securities	(52,317)
Sales and maturities of marketable securities	47,107
Other investing activities, net	(28,549)
Net cash provided by (used in) investing activities	(171,214)
Cash flows from financing activities	
Net working capital, overhead allocations and other transfers contributed by (distributed to) Prior Parent	-
Net working capital and other transfers contributed by (distributed to) Parent	(126,985)
Payments on finance lease obligations and long-term debt	(8,931)
Proceeds from issuance of long-term debt	1,184
Net cash used provided by (used in) financing activities	(134,732)
Effect of exchange rate changes on cash, cash equivalents, restricted cash and restricted cash equivalents	(5,264)
(Decrease) increase in cash, cash equivalents, restricted cash and restricted cash equivalents	(304,476)
Cash and cash equivalents, beginning of period (including restricted cash and restricted cash equivalents of $59.7 million)	439,600
Cash and cash equivalents, end of period (including restricted cash and restricted cash equivalents of $14.9 million)	$ 135,124

CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY): 11/28/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Aon Risk Services Central, Inc.
Philadelphia PA Office
100 North 18th Street
15th Floor
Philadelphia PA 19103 USA

CONTACT NAME:
PHONE (A/C. No. Ext): (866) 283-7122 FAX (A/C. No.): (800) 363-0105
E-MAIL ADDRESS:

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A:	Lloyd's Syndicate No. 1729	AA1120157
INSURER B:	ACE American Insurance Company	22667
INSURER C:	ACE Fire Underwriters Insurance Co.	20702
INSURER D:	Indemnity Insurance Co of North America	43575
INSURER E:	ACE Property & Casualty Insurance Co.	20699
INSURER F:	Great American Security Ins Co	31135

INSURED
American Medical Response, Inc.
6501 S. Fiddlers Green Circle
Suite 100
Greenwood Village CO 80111 USA

COVERAGES **CERTIFICATE NUMBER:** 570102816893 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS,

Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
B	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO-JECT LOC OTHER:			XSLG72962722 SIR applies per policy terms & conditions	03/31/2023	03/31/2024	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG SIR	$2,750,000 $100,000 $10,000 $2,750,000 $5,000,000 $2,750,000 $250,000
B	AUTOMOBILE LIABILITY X ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY SCHEDULED AUTOS NON-OWNED AUTOS ONLY			ISA H25578193	03/31/2023	03/31/2024	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$10,000,000
F	UMBRELLA LIAB X OCCUR X EXCESS LIAB CLAIMS-MADE DED RETENTION			EXC4901832	03/31/2023	03/31/2024	EACH OCCURRENCE AGGREGATE	$10,000,000 $10,000,000
D B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER (Mandatory in NH) Y/N: N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		WLRC70317370 AOS WLRC70317333 CA, MA	03/31/2023 03/31/2023	03/31/2024 03/31/2024	X PER STATUTE OTH-ER E.L. EACH ACCIDENT E.L. DISEASE-EA EMPLOYEE E.L. DISEASE-POLICY LIMIT	 $1,000,000 $1,000,000 $1,000,000
A	E&O - Professional Liability Excess			CSHLC2301663 Claims Made- Lead Carrier SIR applies per policy terms & conditions	03/31/2023	03/31/2024	Per Claim Aggregate SIR	$15,000,000 $15,000,000 $10,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Highlands County Board of County Commissioners is included as Additional Insured in accordance with the policy provisions of the General Liability policy.

CERTIFICATE HOLDER

Highlands County Board of
County Commissioners
600 S. Commerce Ave.
Sebring FL 33870 USA

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Aon Insurance Managers (USA), Inc.

Holder Identifier :

Certificate No : 570102816893

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Highlands County Fire Rescue

HIGHLANDS COUNTY COPCN CERTIFICATE VEHICLES

Name of Service: Lifefleet Southeast Inc, d/b/a American Medical Response Date: 11/29/2023

Unit #	Vehicle Type:	Year/Make	Model	Vehicle Identification #	Mileage
198	Ambulance	2018/ Ford	T250	1FDYR2CMXJKA17800	181341
193	Ambulance	2018/ Ford	T250	1FDYR2CM1JKA04398	183478
104	Ambulance	2017/ Ford	E450	1FDXE4FS6HDC62895	208123
118	Ambulance	2013/ Ford	E350	1FDSS3ES9DDA22684	277915

Form 1C-CERTVEHICLES

Attach additional page(s), if necessary

AGENCY CUSTOMER ID: 570000073826
LOC #:

ADDITIONAL REMARKS SCHEDULE

Page _ of _

AGENCY	NAMED INSURED
Aon Risk Services Central, Inc.	American Medical Response, Inc.
POLICY NUMBER	
See Certificate Number: 570102816893	
CARRIER / NAIC CODE	EFFECTIVE DATE
See Certificate Number: 570102816893	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER	
INSURER	
INSURER	
INSURER	

ADDITIONAL POLICIES If a policy below does not include limit information, refer to the corresponding policy on the ACORD certificate form for policy limits.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS	
	WORKERS COMPENSATION							
C		N/A		SCFC70317412 WI	03/31/2023	03/31/2024		
B		N/A		WCUC7031745A OH SIR applies per policy terms & conditions	03/31/2023	03/31/2024		

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Highlands County Fire Rescue
COPCN ALS/BLS PERSONNEL

Name of Service: Lifefleet Southeast Inc d/b/a American Medical Response Date: 11/29/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Aguirre	Lonjino	Y	N	N	PMD513665
Barragan	Michael	N	N	Y	NA
Barrios	Lazaro	N	N	Y	NA
Bee	Thane	Y	N	N	PMD 539263
Beeles	Michael	N	Y	N	EMT533524
Bollett	Hunter	N	N	Y	NA
Bonney	Chasity	N	Y	N	EMT542986
Buonanno	Adam	N	N	Y	NA
Capwell	Krysten	N	Y	N	EMT583874
Caudle	Tyler L	N	Y	N	EMT569438
Cecil	James	Y	N	N	PMD12744
Clark	Travis	N	Y	N	EMT577309
Conville	Kali	N	Y	N	EMT582011
Coon	Morgan	N	N	Y	NA
Cortes	Isabella	N	Y	N	EMT579076
Cox	Taylor	N	Y	N	EMT567463
Curran	Alexander J	Y	N	N	PMD534551
Daffner	Marshall	N	Y	N	EMT584748
Davis	Garrett D	N	Y	N	EMT560805
Davis	James T	N	Y	N	EMT538810
Dejesus	Steven	N	N	Y	NA
Del Orbe	Valentin	Y	N	N	PMD505012
Denton	Kristen	N	Y	N	EMT582176

Devine	Kevin	Y	Y	N	EMT578451
Doll	Eric	Y	N	N	PMD512121
Drew	Alyssa	Y	N	N	PMD541711
Eagen	Christopher	N	Y	N	EMT547909
Eberhart	Alexandra	N	Y	N	EMT576600
Ellis	Jason C	N	Y	N	EMT538775
Erroch	Kirsty	N	N	Y	NA
Filart	Lauren	N	Y	N	EMT573114
Fiorentinos	Pagona M	Y	N	N	PMD9134
Fischer	Christian	N	Y	N	EMT570256
Fitch	Cameron	N	Y	N	EMT563761
Fontana	Christopher	Y	N	N	PMD537972
Frank	Traci A	N	Y	N	EMT504127
Fredette	Brian	N	Y	N	EMT581307
Garcia	Jose	N	N	Y	NA
Garcia-Jonker	Brittany	N	Y	N	EMT579764
Gilkes	Dawn	N	Y	N	EMT581464
Gill	James	N	N	N	NA
Glenn	Chase	N	Y	N	EMT579803
Goff	Isaac T	N	Y	N	EMT563533
Graham	Bruce A	N	Y	N	EMT84518
Guedez	Ashley I	N	Y	N	EMT571917
Harris	Ronnica	Y	N	N	PMD539062
Herrera	John	N	Y	N	EMT548900
Hill	Emily	N	Y	N	EMT585051
Howard	Dalton	Y	N	N	PMD532709
Jackson	Denise	N	N	Y	NA
Jacobowitz	Jason	Y	N	N	PMD527704
Jemerigbe	Chelsea	N	Y	N	EMT577193
Johnson	Ethan	N	N	Y	NA
Johnson	Shakil	N	N	Y	NA
Johnson- Pappas	Jennifer	N	Y	N	EMT550394
Kaczenski	Jeremy R	N	Y	N	EMT537272
Karol	Caleb	N	Y	N	EMT577478

Kenyon	Ryan	Y	N	N	PMD515264
Kessel	Jonathan	Y	N	N	PMD206603
Kipphorn	Elizabeth J	N	Y	N	EMT541157
Klopfer	Nicholas	N	Y	N	EMT547538
Knoll	Jason R	Y	N	N	PMD521171
Krisanda	Matthew	Y	N	N	PMD527463
Kumala	Joseph	Y	N	N	PMD534080
Larocca	Danielle M	Y	N	N	PMD522380
Ledkins	Monika E	Y	N	N	PMD536172
Leon	Abel	N	Y	N	EMT576093
Levi	Chris	Y	N	N	PMD525712
Marrero	Anthony	N	Y	N	EMT569440
Marty	Julio	Y	N	N	PMD534938
Mcelyea	Alyssa	Y	N	N	PMD581065
McKean	Gregory D	Y	N	N	PMD521569
Mckenzie	Gregory	N	Y	N	EMT561624
Mckinney	Christopher	N	N	Y	NA
Mclean	Michael	N	Y	N	EMT539753
Meads	Brandy	N	N	Y	NA
Messer	Sara	N	N	Y	NA
Miller	Peter K	Y	N	N	PMD509921
Miranda	Eric	Y	N	N	PMD501893
Moffatt	Joanna	N	Y	N	EMT576034
Moline	Erns	N	Y	N	EMT567453
Morgan	Maribeth	N	Y	N	EMT582212
Munoz	David	N	Y	N	EMT502911
Murciano	Christopher M	Y	N	N	PMD533274
O'Kane	Brandon	N	Y	N	EMT559726
Oliveras	Jose	N	N	N	NA
Olszewski	Alyssa	N	Y	N	EMT584608
Orlando	Cameron	N	Y	N	EMT579274
Ortiz Flores	Takenia	N	Y	N	EMT581777
Passow	Kaiden	N	Y	N	EMT584924
Patterson	Andrew	Y	N	N	PMD542291

Pedrero	Christine	N	Y	N	EMT557988
Peguero Sr.	Jonathan	N	Y	N	EMT545380
Piazza	Claire	N	Y	N	EMT578204
Pilkington	Kaylea	N	Y	N	EMT577018
Prall	Robert	N	Y	N	EMT61165
Ramsay	Eric	N	Y	N	EMT567216
Rason	Rishi	Y	N	N	PMD529515
Reynolds	Jacob	N	Y	N	EMT585270
Rhoads	Shtefan	N	Y	N	EMT583466
Richardson	Jacob	N	Y	N	EMT577406
Rizzardi	Chantel	N	Y	N	EMT582683
Rodgers	Jonathan	N	Y	N	EMT561826
Rodriguez	Jorge	N	N	N	NA
Rodriguez	Jose	N	Y	N	EMT577184
Rodriguez	Austin	N	Y	N	EMT580788
Russo	Melissa	N	Y	N	EMT581619
Salalila	Angelo R	N	Y	N	EMT66432
Sanders	Hunter	N	Y	N	EMT579934
Santiago Goyco	Antonio	N	Y	N	EMT581290
Scott	Patrick	N	N	N	NA
Sedhom	Sandra	N	Y	N	EMT571625
Shepard	Kaylee	N	Y	N	EMT573828
Solomon	Matthew	N	Y	N	EMT558336
Southerland	Skylyn	N	Y	N	EMT573748
Starling	Zackery	Y	N	N	PMD528537
Steffy	Bryan	N	Y	N	EMT572941
Strouse	Sean	Y	N	N	PMD538962
Taulbee	Preston	N	Y	N	EMT571744
Taylor	Keith	N	Y	N	EMT556025
Thomas	Christina D	Y	N	N	PMD510955
Thomas	Mark	Y	N	N	PMD16053
Thompson	Jacqueline	N	Y	N	EMT515262
Tillman	Jacob	N	Y	N	EMT574030
Utley	Adam	N	Y	N	EMT574440

Vargas	Edwin A	Y	N	N	PMD513045
Vaughn	Michael	Y	N	N	PMD525039
Velasco	Joshua	N	Y	N	EMT580285
Volpe	Roberto	N	Y	N	EMT581463
Wakefield	Martin	N	Y	N	EMT558142
Wallace	Gary R	N	Y	N	EMT351984
Watts	Jill	N	Y	N	EMT545398
Weeden	Kyle	N	Y	N	EMT572809
White	Robert	Y	N	N	PMD538215
Witherington	Joseph	N	Y	N	EMT580248
Wolff	Maxwell	N	Y	N	EMT571034
Zawartka	Alex	N	Y	N	EMT581763
Zinther	Brian	Y	N	N	PMD540138
Zurita Socarras	Gabriel	N	Y	N	EMT575582

Attach additional page(s), if necessary

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AMR® MEDICAL DIRECTOR STATEMENT OF DUTIES AND RESPONSIBILITIES

THIS STATEMENT OF DUTIES AND RESPONSIBILITIES sets forth the duties and responsibilities by and between American Medical Response, Inc. ("AMR") and Joe A. Nelson, DO ("Medical Director"). The terms of this Statement are effective as of January 1, 2019.

WHEREAS, the Medical Director is an employee of AMR;

WHEREAS, the Medical Director is duly qualified and licensed to practice medicine in the state of Florida and approved to act as a medical director;

WHEREAS, the Medical Director acknowledges expertise in the field of medicine, emergency medical services, emergency medical services oversight and administration;

WHEREAS, the Medical Director as an employee of AMR is providing services of a medical director to AMR for its operations in the State of Florida, including but not limited to services to Rural/Metro Fire Dept., and AMR ground ambulance operations in the State of Florida;

DUTIES AND RESPONSIBILITIES:

1. **Medical Director Services.** The Medical Director shall provide the following services to AMR:

   a. Provide comprehensive medical oversight (direct & indirect) for clinical services delivered by AMR's emergency medical services personnel. Physician shall participate in the implementation of clinically sound, evidence-based expectations for the EMS system;

   b. Provide medical oversight and guidance for AMR's quality leadership activities through serving as a liaison between AMR and the local medical community, collaborating with local designated quality organizations and/or committees to define quality standards, identify metrics, review performance data, identify opportunities for improvement, test new processes, and ultimately to adopt best practices.

   c. Review quality improvement and performance reports, provided by AMR and identify opportunities for improvement in patient care or system design and collaborate with all appropriate entities to develop an improvement program.;

   d. Review recorded medical command conversations (if available) to assure appropriate clinical care & decision making by all entities.

   e. Review and respond to requests to review high priority clinical cases within twenty-four (24) hours of being notified;

   f. Make or direct the making of such reports and records relating to patient care as may be required by AMR and/or regulatory bodies, whether public or private;

   g. Develop criteria for establishment and maintenance of credentials for AMR's emergency medical services personnel;

   h. Direct, coordinate, and/or participate in initial, ongoing and remedial education of emergency medical services personnel in accordance with AMR's policies;

   i. Instruct and inform AMR management and governmental boards or agencies to summarily limit, suspend, or withdraw clinical credentials of emergency medical service personnel;

   j. Advise and assist in the organization in implementation of an effective utilization review program for AMR and perform utilization review services;

   k. Assist in the design and development of protocols, guidelines, patient information forms, medical record forms, and consent forms for use in the field or for AMR purposes;

   l. Undertake activities, as reasonably requested by AMR, including but not limited to professional contacts with physicians, healthcare systems, public health agencies, paramedic associations, nursing associations, governmental agencies, and state and local medical societies in order to apprise such individuals and groups of the nature and availability of facilities and services of AMR and facilitate the exchange of information on patient care, administration, medical policy, and utilization review;

   m. Actively participate in the professional development of all staff in AMR and collaborate in communicating medical competency and expertise to the medical community and general public. Give technical advice and assistance as may be requested to facilitate the evaluation, acquisition, implementation and utilization of medical equipment, expansion of AMR services, as well as general strategic planning and collaborative efforts with other healthcare systems;

   n. Authorize, supervise and approve the purchase of necessary medications for pre-hospital use by AMR in accordance with the full scope of practice. Medical Director acknowledges and agrees that controlled medications are specifically included within the definition of medications covered by this Statement and Medical Director will be responsible for approving all local implementation plans for the ordering, distribution and handling of controlled substances (to include oversight and sign-off on all controlled substance records and logs in a timely manner) consistent with local, state & federal requirements. Physician shall maintain all appropriate state & federal permits, registrations or licenses necessary to prescribe controlled substances;

   o. Fulfill all Medical Director Functions including protocol development, education and performance review associated with the operation of any AMR communications centers within the area;

   p. Fulfill all Medical Director Functions associated with the operation of any AMR Inter-facility, Specialty or Critical Care Transport operations;

   q. Perform any other functions associated with the role of a medical director as may be requested by AMR;

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r. Participate in all required activities associated with local and/or national accreditation processes;

s. Participate in sanctioned appropriately research activities

2. **Standard of Care.** Medical Director shall render services in compliance with the accepted medical standard of care in the community and profession.

3. **Compliance with Laws.** The parties will comply in all material respects with all applicable federal and state laws and regulations including, the federal Anti-kickback statute. Medical Director shall also maintain all licenses, certifications or accreditations necessary to provide Services hereunder.

4. **Insurance.** AMR's professional liability insurance covers Medical Director for services that are provided under this Statement.

5. **HIPAA.** Each party shall comply with the privacy provisions of the *Health Insurance Portability and Accountability Act of 1996* and the regulations thereunder ("HIPAA"), and with such other requirements of HIPAA that may become effective during the Term. Each party acknowledges and agrees that it is considered a covered entity under HIPAA. Accordingly, both parties are permitted to use and disclose Proteoted Health Information in accordance with HIPAA without an additional written authorization of the patient as long as both parties have a direct relationship with the patient. All patient medical records shall be treated as confidential so as to comply with all state and federal laws.

6. **Miscellaneous.** All other terms of this Statement shall be subject to AMR's standard employee policies and procedures. The terms hereof shall be terminated

7.

8. upon termination of the employment relationship between the Medical Director and AMR.

IN WITNESS WHEREOF, the parties have hereto executed this Statement.

AMERICAN MEDICAL RESPONSE, INC.

DocuSigned by:
By: Edward Racht
Dr. Edward Racht, Chief Medical Officer on behalf of Rural/Metro Fire Dept. and all AMR operating affiliates and subsidiaries in the State of Florida.

DR. JOE NELSON

By: Joe A Nelson DO

Joe Nelson, DO, MS, FACOEP, FACEP

Digitally signed by Joe Nelson, DO, MS, FACOEP, FACEP
DN: cn=Joe Nelson, DO, MS, FACOEP, FACEP, o, ou=Emergency Medical Services, email=flemsmd@aol.com, c=US
Date: 2019.03.10 21:45:27 -04'00'

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
BN5599672	10-31-2024	$888

SCHEDULES	BUSINESS ACTIVITY	ISSUE DATE
2,2N,3, 3N,4,5	PRACTITIONER	09-21-2021

NELSON, JOE A (DO)
AMERICAN MEDICAL RESPONSE
4531 OAK FAIR BLVD
TAMPA, FL 33610

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON D.C. 20537

Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON D.C. 20537

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NELSON, JOE A (DO)
AMERICAN MEDICAL RESPONSE
4531 OAK FAIR BLVD
TAMPA, FL 33610

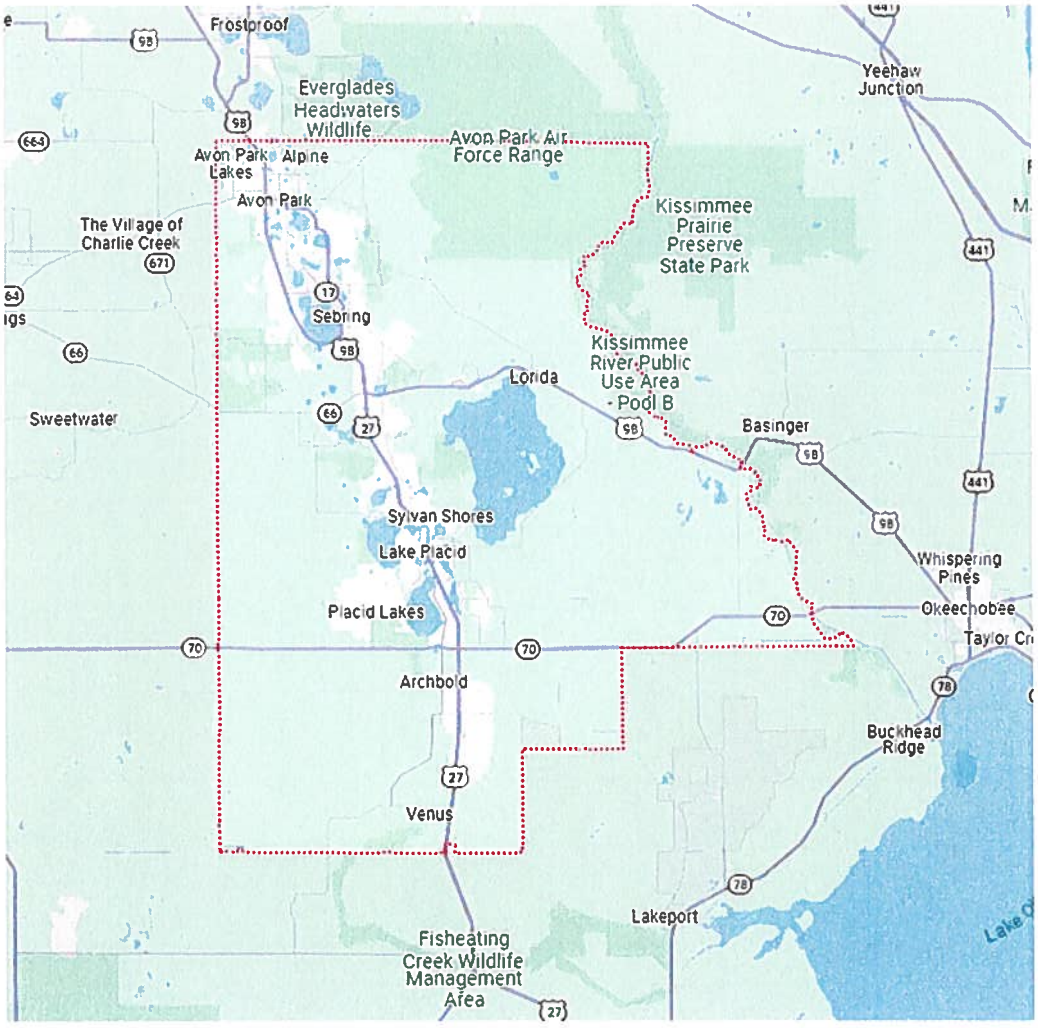
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Form DEA-223 (9/2016)

A Global Medical Response Solution

SERVICE ARE TO OPERATE WITHIN HIGHLANDS COUNTY



A Global Medical Response Solution

In today's changing environment, Emergency Medical Services will be provided by companies that have the expertise and resources to support communities, health care systems and 9-1-1 providers with quality patient care and dependable nonemergency medical transportation services: These companies will be focused on customer satisfaction, on-time performance and the consistent delivery of a high standard of care. Increasing demands in patient care, explosive community growth, aging population growth and disaster preparedness/management have created an environment in which the delivery of quality EMS requires focused expertise and resources.

AMR's long-term investments has made it a cornerstone of the community's healthcare services. With over 130 employees and a robust fleet, AMR is uniquely equipped to be a scalable solution for any community needs at a moment's notice. As the nation's largest provider of ground ambulance services, AMR's experience in supporting communities such as Hillsborough County is unmatched. We have the flexibility to provide the County with services to meet any unforeseen circumstances.

AMR provides unparalleled experience as a provider of BLS, ALS, and Critical Care Transport (CCT) services across Florida and the entire nation. AMR's Florida Operations include service to 10 of the largest counties, providing efficient, effective, and clinically sophisticated public, private partnerships. In all cases, AMR is committed to raising industry standards and exceeding public expectations.

While 911 and IFT transports are the cornerstone of our business, one of our primary customers in Highlands County is the Sebring Raceway. For many years we have proudly provided rescue services to the racetrack.

At AMR, we believe in building long-term relationships with current providers that are built on mutual trust and integrity. It's a partnership approach that has helped establish AMR as the nation's leading ambulance company. We bring over 50 years of experience to every relationship we enter into. Our focus is about providing and enhancing current excellence in the EMS service industry. AMR is committed to providing the right resources and the right support so current EMS resources can better serve the community.

4531 Oak Fair Blvd, Tampa, FL 33610
Phone 813-885-3955 * Fax 813-885-5944



2023/2024 AMR FEE SCHEDULE -- Hillsborough County 24 HOURS A DAY / 7 DAYS A WEEK		
Level of Service/Ambulance Per Trip	**Medicare Code (HCPCS)**	**Usual & Customary Rate (UCR)**
ALS 1 NON EMERGENCY	A0426	$747.50
ALS 1 EMERGENCY	A0427	$916.55
BLS NON EMERGENCY	A0428	$431.25
BLS EMERGENCY	A0429	$916.55
ALS 2	A0433	$920.00
SCT / CCT	A0434	$1092.50
SCT / CCT / ALS / BLS Mileage	A0425	$13.80
Oxygen		$86.25
Waiting Time/Quarter Hour - Begins After 1st (30) Thirty Minutes upon arrival at Destination		$46.00 / $40.25
Night Charge (7 PM - 6 AM)		$86.25
Disposable Supplies and Bio Waste Handling		$46.00
Team Transport (25 miles or less)		$115.00
Team Transport (> 26 miles)		$172.50
Bariatric (Base Rate + Level of Service Charge)		$143.75
ALS ER Assessment		$916.55
* *ALS Assessment / BLS Charge Emergency*	Q3019	$333.67
* *ALS Assessment / BLS Charge Non-Emergency*	Q3020	$208.54
Immobolization (Spinal)		$172.50
Immobilization (Extremity)		$57.50
Non-Medical Stretcher Per Trip		
Non-Medical Stretcher Scheduled (> 24 Hours)	N/A	$155.25
Non-Medical Stretcher Non-Scheduled (< 24 Hours)	N/A	$155.25
Mileage	N/A	$4.89
Waiting Time/Quarter Hour - Begins After 1st (30) Thirty Minutes upon arrival at Destination	N/A	$37.95
Wheelchair		
Pre-Scheduled (Previous Day)	N/A	$69.00
Non-Scheduled (Same Day)	N/A	$86.25
Mileage	N/A	$4.59
Waiting Time/Quarter Hour - Begins After 1st (30) Thirty Minutes upon arrival at Destination	N/A	$20.13
Weekend and Holiday (additional charge)	N/A	$28.75
Scheduled Outing - per hour / per vehicle (2 Hour minimum)	N/A	$115.00
Baratric	N/A	$143.75 + LOS + Mileage
Waiting Time/Quarter Hour - Begins After 1st (30) Thirty Minutes upon arrival at Destination - Ambulance Level Fee Only		$20.13

LEVEL OF SERVICE GUIDELINES

****

Tx Service UNIT TYPE – (ALS) 1 Advanced Life Support

Medicare HCPCS A0426 Rate HCPCS A0425 Mileage

LEVEL OF CARE - Intervention beyond the scope of an EMT including the following:

- ** Cardiac monitoring
- **Monitored patient to / from any ICU, CCU, telemetry, cardiac cath lab, etc. who has been on continuous cardiac monitoring. Does not include discharges to a non-monitored bed. If the patient is to be left and returned, inform sending facility that they must supply equipment and a nurse to stay with the patient, our crew will wait for an additional charge.

- Continuous Pulse Oximetry and/or Capnography
- One or two medications by PO, SQ, IV, IM (Non SCT ALS Medications) route listed in current Protocol
- Trauma Network call
- Neonatal / Pediatric team transports
- Transplant teams
- Other teams with self-contained equipment and licensed physician
- *** Medicated IV, TIER 1 OR TIER 2

*** TIER 1 ALS Medications: IV PUMP REQUIRED, SCT/CCT IF 2 OR MORE IN USE

Epinephrine (Adrenalin), Dopamine, Dobutamine (Dobutrex), Isoproternol (Isuprel) IV drip, Norepinephrine (Levophed) IV drip, Phenylephrine (Neosynephrine) IV drip., Vasopressin, Milrinone. Amiodarone, Procanamide (Pronestyl), Lidocaine, Diltiazem (Cardizem), Esmolol (Brevibloc®), Metoprolol (Lopressor); Nitrates: Nitroprusside (Nipride) IV drip, IV Nitroglycerin (Tridil). Nicardipine (Cardene) Labetelol (Trandate, Normodyne), Enalapril (Vasotec IV)

paralytic/sedative drugs (ex. Succinylcholine (Anectine), Pavulon, Norcuron, Etomidate, Versed, Diprivan, Precedex IV drip when initiated by hospital staff)

IF A PUMP IS NOT AVAILABLE, CONTACT THE AMR Medical Officer on Duty (MOD). FOR GUIDANCE. CCT IS REQUIRED IF TWO OR MORE OF THESE DRUGS ARE INFUSING UNLESS AN EXCEPTION IS AUTHORIZED BY THE AMR Medical Officer on Duty (MOD)

LEVEL OF SERVICE GUIDELINES

*** TIER2 ALS Medications: IV PUMP REQUIRED, NOT CCT

Anticoagulants: Heparin, Integrelin, Aggrastat and ReoPro®

blood or blood products; Mannitol; Octreotide (Sandostatin®) Anticonvulsants: Levetiracetam (Keppra), Phenytoin (Dilantin), fosphenytoin (Cerebyx), Phenobarbital, Valproic acid (Depakote, Depakene, Depacon), Other Medications as authorized by the MOD

CONTINUOUS IV INFUSIONS OF THESE MEDICATIONS SHOULD BE TRANSPORTED USING AN IV PUMP. IF A PUMP IS NOT AVAILABLE, CONTACT THE AMR Medical Officer on Duty (MOD). FOR GUIDANCE. If the paramedic does not feel comfortable attending the patient without additional assistance or is unfamiliar with the medications or equipment in use during the transport, the MOD should be contacted for advice.

STAFFING - 1 EMT and 1 Paramedic or 2 Paramedics

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Tx Service UNIT TYPE - (ALS) 2 Advanced Life Support

Medicare CPT A0433 Rate CPT A0425 Mileage

LEVEL OF CARE - ALS 1 plus:

- Three or more medications by PO, SQ, IV, IM (Non SCT Medications) route
- And /or the provision/monitoring of one or more of the following:
- Manual Defibrillation, Cardioversion, Cardiac pacing
- Temporary pacemakers (external and internal)
- Endotracheal intubation Or another advanced airway management
- Requires tracheal suctioning
- Simple Transport Ventilator, not patient managed
- Central venous IV-line, intraosseous line
- Chest decompression
- Chest tube to a simple valve

STAFFING - 1 EMT and 1 Paramedic or 2 Paramedics

AMERICAN MEDICAL RESPONSE

LEVEL OF SERVICE GUIDELINES

****

Tx Service UNIT TYPE – (BLS) Basic Life Support

Medicare CPT A0428 Rate CPT A0425 Mileage CPT A0422 oxygen

LEVEL OF CARE -

- 911 (pre-hospital) or interfacility BLS or stable patients who require Basic Life Support care only.
- Basic Airway Management/tracheostomy monitoring
- O2 via cannula or mask/venti-mask
- Pulse oximetry, non-continuous when indicated
- *Non medicated IV's, including PICC lines
- Crewmembers may from assist with medication self- administration. (Aspirin, Albuterol, Nitroglycerin) Oral Glucose, Epi-pen when indicated
- use of AED when indicated
- Any patient WITH wounds or tubes, drains, etc. that may discharge bodily fluid or requiring CREW to don Personal Protective Equipment OR requiring universal precautions beyond the level of wearing gloves (such as requiring respiratory, contact or reverse isolation)
- Psychiatric transports with or without physical restraint use
- Self-medication only, crewmembers prohibited from assisting with medication administration
- Home prescribed O2 allowed
- Home Ventilator allowed, caretaker must accompany client
- Foley catheter allowed
- self-infused IV pumps ALLOWED (such as Insulin pump or pain medication pump)
- All equipment must be self-contained on wheelchair or stretcher

1 companion may ride in passenger seat if space is available

Service animals may accompany patient

STAFFING – 2 EMT'S (Emergency Medical Technicians) or 1 EMT and 1 Driver Only (may be trained as an EMR or in First Aid where required)

****

*** Non-Medicated IV: Lactated Ringers, KCL solution, Normal saline, D5W, D5W 1/2 Normal saline, Heparin or saline locks. All are considered NON-MEDICATED for purposes of BLS transport.**



Lifefleet Southeast Inc. d/b/a American Medical Response staff's units 24 hours per day, 7 days per week.

A Global Medical Response Solution

Additional Requirements 1 :

Lifefleet Southeast Inc. d/b/a American Medical Response has no investigations or formal disciplinary action from the Florida Department of Health, or any local, state, or federal agencies.

KPMG LLP
Suite 800
1225 17th Street
Denver, CO 80202-5598

Independent Auditors' Review Report

The Board of Directors
Global Medical Response, Inc.:

Results of Review of Condensed Consolidated Interim Financial Information

We have reviewed the condensed consolidated financial statements of Global Medical Response, Inc. and its subsidiaries (the Company), which comprise the condensed consolidated balance sheet as of September 30, 2023, the related condensed consolidated statements of operations for the three-month and nine-month periods ended September 30, 2023 and 2022, the related condensed consolidated statements of cash flows for the nine-month periods ended September 30, 2023 and 2022, the related condensed consolidated statements of stockholder's equity for the three month periods ended September 30, June 30, and March 31, 2023 and 2022 and the related notes (collectively referred to as the condensed consolidated interim financial information).

Based on our reviews, we are not aware of any material modifications that should be made to the accompanying condensed consolidated interim financial information for it to be in accordance with U.S. generally accepted accounting principles.

Basis for Review Results

We conducted our reviews in accordance with auditing standards generally accepted in the United States of America (GAAS) applicable to reviews of interim financial information. A review of condensed consolidated interim financial information consists principally of applying analytical procedures and making inquiries of persons responsible for financial and accounting matters. A review of condensed consolidated interim financial information is substantially less in scope than an audit conducted in accordance with GAAS, the objective of which is an expression of an opinion regarding the financial information as a whole, and accordingly, we do not express such an opinion. We are required to be independent of the Company and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our reviews. We believe that the results of the review procedures provide a reasonable basis for our conclusion.

Responsibilities of Management for the Condensed Consolidated Interim Financial Information

Management is responsible for the preparation and fair presentation of the condensed consolidated interim financial information in accordance with U.S. generally accepted accounting principles and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of condensed consolidated interim financial information that is free from material misstatement, whether due to fraud or error.

Report on Condensed Consolidated Balance Sheet as of December 31, 2022

We have previously audited, in accordance with GAAS, the consolidated balance sheet as of December 31, 2022, and the related consolidated statements of operations, stockholder's equity, and cash flows for the year then ended (not presented herein); and we expressed an unmodified audit opinion on those audited consolidated financial statements in our report dated March 30, 2023. In our opinion, the accompanying condensed consolidated balance sheet of the Company as of December 31, 2022 is consistent, in all material respects, with the audited consolidated financial statements from which it has been derived.

KPMG LLP

Denver, Colorado
November 13, 2023

KPMG LLP, a Delaware limited liability partnership and a member firm of the KPMG global organization of independent member firms affiliated with KPMG International Limited, a private English company limited by guarantee.

Global Medical Response, Inc.
CONDENSED CONSOLIDATED BALANCE SHEETS
(Amounts in thousands)

	September 30, 2023 (unaudited)	December 31, 2022
ASSETS		
Current assets:		
Cash and cash equivalents	$ 116,000	$ 146,333
Insurance collateral	149,934	168,358
Accounts receivable, net	954,276	1,109,198
Spare parts, medical supplies and fuel	98,003	89,534
Prepaid expenses	70,902	47,616
Assets held for sale	198,060	—
Other current assets	77,602	71,861
Total current assets	1,664,777	1,632,900
Property and equipment, net	1,287,299	1,310,229
Operating right-of-use assets	220,781	254,439
Finance right-of-use assets	121,499	131,020
Intangible assets, net	1,406,948	1,470,516
Goodwill	2,188,108	2,278,701
Other assets	156,082	120,063
Total assets	$ 7,045,494	$ 7,197,868
LIABILITIES AND EQUITY		
Current liabilities:		
Accounts payable	57,891	80,677
Accrued wages, benefits and taxes	217,512	213,209
Accrued interest	104,873	26,941
Other accrued liabilities	331,199	384,814
Current portion of lease obligations	86,635	95,355
Current portion of long-term debt	126,106	111,586
Liabilities held for sale	69,350	—
Total current liabilities	993,566	912,582
Operating lease obligations	187,199	222,564
Finance lease obligations	102,382	108,160
Long-term debt	5,284,076	5,326,824
Deferred income taxes	203,715	171,397
Insurance reserves	248,392	221,086
Other long-term liabilities	47,383	44,729
Total liabilities	7,066,713	7,007,342
Commitments and contingencies		
Equity:		
Common stock	—	—
Additional paid-in capital	221,799	217,195
Retained earnings (deficit)	(240,232)	(23,246)
Accumulated other comprehensive income (loss)	(2,786)	(3,423)
Total equity	(21,219)	190,526
Total liabilities and equity	$ 7,045,494	$ 7,197,868

The accompanying Notes to Condensed Consolidated Financial Statements are an integral part of these statements.

Global Medical Response, Inc.
CONDENSED CONSOLIDATED STATEMENTS OF OPERATIONS
(Amounts in thousands, unaudited)

	Three Months Ended September 30,		Nine Months Ended September 30,	
	2023	2022	2023	2022
Net revenue	$ 1,423,256	$ 1,305,466	$ 3,948,795	$ 3,822,866
Operating expenses:				
Employee wages, benefits and taxes	729,947	714,327	2,108,828	2,031,582
Maintenance, fuel and other direct expenses	124,891	127,999	354,221	363,967
Insurance expense	36,982	34,105	117,912	115,669
Other operating expenses	286,167	302,470	887,541	948,575
Depreciation and amortization	78,907	83,757	240,544	248,401
Impairment of assets held for sale	24,350	—	24,350	—
Acquisition, integration and other charges	7,109	5,418	27,752	45,892
Total operating expenses	1,288,353	1,268,076	3,761,148	3,754,086
Operating income	134,903	37,390	187,647	68,780
Interest expense, net	134,920	100,213	379,343	268,862
Equity in (earnings) losses of unconsolidated affiliates	(563)	(539)	(2,906)	(842)
Other (income) loss, net	2,301	2,392	(1,701)	8,578
Net income (loss) before income taxes	(1,755)	(64,676)	(187,089)	(207,818)
Income tax (benefit) expense	16,380	(29,261)	29,897	(45,690)
Net income (loss)	$ (18,135)	$ (35,415)	$ (216,986)	$ (162,128)
Comprehensive income (loss):				
Net income (loss)	(18,135)	(35,415)	(216,986)	(162,128)
Other comprehensive income (loss)				
Unrealized holding gains (losses) on investments	165	(2,358)	819	(13,640)
Deferred income tax benefit (expense), net	(37)	523	(182)	3,025
Total other comprehensive income (loss), net of income tax	128	(1,835)	637	(10,615)
Comprehensive income (loss)	$ (18,007)	$ (37,250)	$ (216,349)	$ (172,743)

The accompanying Notes to Condensed Consolidated Financial Statements are an integral part of these statements.

Global Medical Response, Inc.
CONDENSED CONSOLIDATED STATEMENTS OF STOCKHOLDER'S EQUITY
(Amounts in thousands, unaudited)

	Common Stock	Additional Paid-in Capital	Retained Earnings	Accumulated Other Comprehensive Income (Loss)	Total
Balance at December 31, 2021	$ —	$ 233,899	$ 196,779	$ 1,304	$ 431,982
Stock-based compensation expense	—	1,717	—	—	1,717
Cash contributed by (distributed to) Parent	—	(17,953)	—	—	(17,953)
Net income (loss)	—	—	(31,641)	—	(31,641)
Other comprehensive income (loss), net of tax benefit (expense) of $1.3 million	—	—	—	(4,627)	(4,627)
Balance at March 31, 2022	$ —	$ 217,663	$ 165,138	$ (3,323)	$ 379,478
Stock-based compensation expense	—	1,763	—	—	1,763
Net income (loss)	—	—	(95,072)	—	(95,072)
Other comprehensive income (loss), net of tax benefit (expense) of $1.2 million	—	—	—	(4,153)	(4,153)
Balance at June 30, 2022	$ —	$ 219,426	$ 70,066	$ (7,476)	$ 282,016
Stock-based compensation expense	—	1,791	—	—	1,791
Net income (loss)	—	—	(35,415)	—	(35,415)
Other comprehensive income (loss), net of tax benefit (expense) of $0.5 million	—	—	—	(1,835)	(1,835)
Balance at September 30, 2022	$ —	$ 221,217	$ 34,651	$ (9,311)	$ 246,557
Balance at December 31, 2022	$ —	$ 217,195	$ (23,246)	$ (3,423)	$ 190,526
Stock-based compensation expense	—	1,228	—	—	1,228
Net income (loss)	—	—	(189,782)	—	(189,782)
Other comprehensive income (loss), net of tax benefit (expense) of ($0.3) million	—	—	—	917	917
Balance at March 31, 2023	$ —	$ 218,423	$ (213,028)	$ (2,506)	$ 2,889
Stock-based compensation expense	—	1,902	—	—	1,902
Net income (loss)	—	—	(9,069)	—	(9,069)
Other comprehensive income (loss), net of tax benefit (expense) of $0.1 million	—	—	—	(408)	(408)
Balance at June 30, 2023	$ —	$ 220,325	$ (222,097)	$ (2,914)	$ (4,686)
Stock-based compensation expense	—	1,474	—	—	1,474
Net income (loss)	—	—	(18,135)	—	(18,135)
Other comprehensive income (loss), net of tax benefit (expense) of less than $0.1 million	—	—	—	128	128
Balance at September 30, 2023	$ —	$ 221,799	$ (240,232)	$ (2,786)	$ (21,219)

The accompanying Notes to Condensed Consolidated Financial Statements are an integral part of these statements.

Global Medical Response, Inc.
CONDENSED CONSOLIDATED STATEMENTS OF CASH FLOWS
(Amounts in thousands, unaudited)

	Nine Months Ended September 30,	
	2023	2022
Cash flows from operating activities:		
Net income (loss)	$ (216,986)	$ (162,128)
Adjustments to reconcile net income (loss) to net cash provided by (used in) operating activities		
Depreciation and amortization	240,544	248,401
Amortization of deferred financing costs and debt discount	20,660	20,776
Impairment of assets held for sale	24,350	—
Stock-based compensation expense	4,604	5,271
Loss (gain) on disposal of property and equipment	(4,693)	5,192
Unrealized loss (gain) on marketable equity securities	(2,249)	13,147
Other, net	97	(5,164)
Deferred income taxes	29,747	(45,832)
Equity in earnings of unconsolidated affiliates	2,906	842
Changes in assets and liabilities, net of effects of acquisitions		
Accounts receivable, net	73,492	(66,163)
Accounts payable	(22,533)	2,379
Accrued wages, benefits and taxes	(6,139)	(12,501)
Accrued interest	77,932	(13,876)
Accrued liabilities	2,568	39,553
Other assets and liabilities, net	(39,677)	(42,054)
Net cash provided by (used in) operating activities	184,623	(12,157)
Cash flows from investing activities:		
Acquisition of businesses, net of cash and restricted cash acquired	—	(120,500)
Proceeds from asset disposals related to sales and insurance recoveries	22,665	8,663
Purchases of property and equipment	(136,441)	(151,785)
Net change in investments held as insurance collateral	421	1,025
Purchases of marketable securities	(54,088)	(33,822)
Sales and maturities of marketable securities	71,600	29,040
Other investing activities, net	(6,196)	(37,372)
Net cash provided by (used in) investing activities	(102,039)	(304,751)
Cash flows from financing activities:		
Payments on finance lease obligations	(26,947)	(28,104)
Principal payments on long-term debt	(119,582)	(60,026)
Payment of deferred financing costs	—	(3,482)
Proceeds from issuance of long-term debt	30,197	32,704
Cash contributed by (distributed to) Parent	—	(17,953)
Net cash provided by (used in) financing activities	(116,332)	(76,861)
Effect of exchange rate changes on cash, cash equivalents, restricted cash and restricted cash equivalents	(97)	5,164
(Decrease) increase in cash, cash equivalents, restricted cash and restricted cash equivalents	(33,845)	(388,605)
Cash and cash equivalents, beginning of period (including restricted cash and restricted cash equivalents of $15.6 million and $60.8 million, respectively)	161,955	530,771
Cash and cash equivalents, end of period (including restricted cash and restricted cash equivalents of $12.1 million and $12.7 million, respectively)	$ 128,110	$ 142,166
Supplemental disclosure of cash flow information		
Equipment (primarily aircraft) additions financed with the issuance of debt	$ 47,462	$ 118,318
Cash paid (received) during the period for:		
Interest	$ 293,225	$ 261,731
Income taxes, net of refunds received	$ 3,529	$ 8,883

The accompanying Notes to Condensed Consolidated Financial Statements are an integral part of these statements.

ANNUAL REPORT PURSUANT TO SECTION 10.09 OF THE INDENTURE, DATED AS OF OCTOBER 2, 2020

FOR THE YEAR ENDED DECEMBER 31, 2022

Global Medical Response, Inc.

4400 State Hwy 121
Lewisville, Texas 75056

(972) 459-4919

KPMG LLP
Suite 800
1225 17th Street
Denver, CO 80202-5598

Independent Auditors' Report

The Board of Directors
Global Medical Response, Inc.:

Opinion

We have audited the consolidated financial statements of Global Medical Response, Inc. and its subsidiaries (the Company), which comprise the consolidated balance sheets as of December 31, 2022 and December 31, 2021, and the related consolidated statements of operations, changes in stockholder's equity, and cash flows for each of the years in the three-year period ended December 31, 2022, and the related notes to the consolidated financial statements.

In our opinion, the accompanying consolidated financial statements present fairly, in all material respects, the financial position of the Company as of December 31, 2022 and December 31, 2021, and the results of its operations and its cash flows for each of the years in the three-year period ended December 31, 2022 in accordance with U.S. generally accepted accounting principles.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Consolidated Financial Statements section of our report. We are required to be independent of the Company and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Consolidated Financial Statements

Management is responsible for the preparation and fair presentation of the consolidated financial statements in accordance with U.S. generally accepted accounting principles, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the consolidated financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Company's ability to continue as a going concern for one year after the date that the consolidated financial statements are issued.

Auditors' Responsibilities for the Audit of the Consolidated Financial Statements

Our objectives are to obtain reasonable assurance about whether the consolidated financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the consolidated financial statements.

KPMG LLP, a Delaware limited liability partnership and a member firm of the KPMG global organization of independent member firms affiliated with KPMG International Limited, a private English company limited by guarantee.

KPMG

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the consolidated financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the consolidated financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the consolidated financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Company's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

KPMG LLP

Denver, Colorado
March 30, 2023

Global Medical Response, Inc.
CONSOLIDATED BALANCE SHEETS
(Amounts in thousands)

	December 31, 2022	December 31, 2021
ASSETS		
Current assets:		
Cash and cash equivalents	$ 146,333	$ 469,927
Insurance collateral	168,358	231,903
Accounts receivable, net	1,109,198	1,094,052
Spare parts, medical supplies and fuel	89,534	95,054
Prepaid expenses	47,616	43,916
Other current assets	71,861	61,985
Total current assets	1,632,900	1,996,837
Property and equipment, net	1,310,229	1,117,671
Operating right-of-use assets	254,439	237,732
Finance right-of-use assets	131,020	158,936
Intangible assets, net	1,470,516	1,494,417
Goodwill	2,278,701	2,204,597
Other assets	120,063	53,372
Total assets	$ 7,197,868	$ 7,263,562
LIABILITIES AND EQUITY		
Current liabilities:		
Accounts payable	80,677	70,316
Accrued wages, benefits and taxes	213,209	241,769
Accrued interest	26,941	47,624
Other accrued liabilities	384,814	317,152
Current portion of lease obligations	95,355	96,165
Current portion of long-term debt	111,586	91,929
Total current liabilities	912,582	864,955
Operating lease obligations	222,564	198,437
Finance lease obligations	108,160	134,533
Long-term debt	5,326,824	5,151,889
Deferred income taxes	171,397	242,500
Insurance reserves	221,086	194,829
Other long-term liabilities	44,729	44,437
Total liabilities	7,007,342	6,831,580
Commitments and contingencies		
Equity:		
Common stock	—	—
Additional paid-in capital	217,195	233,899
Retained earnings (deficit)	(23,246)	196,779
Accumulated other comprehensive income (loss)	(3,423)	1,304
Total equity	190,526	431,982
Total liabilities and equity	$ 7,197,868	$ 7,263,562

The accompanying Notes to Consolidated Financial Statements are an integral part of these statements.

Global Medical Response, Inc.
CONSOLIDATED STATEMENTS OF OPERATIONS
(Amounts in thousands)

	Year Ended December 31,		
	2022	2021	2020
Net revenue	$ 5,168,388	$ 4,914,940	$ 4,351,388
Operating expenses:			
Employee wages, benefits and taxes	2,764,421	2,447,032	2,341,116
Maintenance, fuel and other direct expenses	493,047	391,391	329,074
Insurance expense	150,588	143,750	134,027
Other operating expenses	1,265,690	1,127,800	869,415
Governmental grants	—	(106,194)	(52,556)
Depreciation and amortization	329,241	323,164	372,958
Acquisition, integration and other charges	54,210	37,430	44,904
Total operating expenses	5,057,197	4,364,373	4,038,938
Operating income	111,191	550,567	312,450
Interest expense, net	389,124	345,688	361,090
Loss on debt extinguishment	—	23,171	17,105
Equity in (earnings) loss of unconsolidated affiliates	(1,602)	677	(282)
Other (income) loss, net	6,477	(718)	(664)
Net income (loss) before income taxes	(282,808)	181,749	(64,799)
Income tax (benefit) expense	(62,783)	60,530	(23,114)
Net income (loss)	$ (220,025)	$ 121,219	$ (41,685)
Comprehensive income (loss):			
Net income (loss)	(220,025)	121,219	(41,685)
Other comprehensive income (loss)			
Unrealized gains (losses) on derivative financial instruments	—	14,774	30,372
Unrealized holding gains (losses) on investments	(12,093)	(4,699)	3,383
Defined benefit pension plan net gain (loss)	6,190	2,840	(7,063)
Deferred income tax benefit (expense), net	1,176	(3,181)	(6,509)
Total other comprehensive income (loss), net of income tax	(4,727)	9,734	20,183
Comprehensive income (loss)	$ (224,752)	$ 130,953	$ (21,502)

The accompanying Notes to Consolidated Financial Statements are an integral part of these statements.

Global Medical Response, Inc.
CONSOLIDATED STATEMENTS OF STOCKHOLDER'S EQUITY
(Amounts in thousands)

	Common Stock	Additional Paid-in Capital	Retained Earnings	Accumulated Other Comprehensive Income (Loss)	Total
Balance at December 31, 2019	$ —	$ 758,524	$ 117,245	$ (28,613)	$ 847,156
Stock-based compensation expense	—	5,084	—	—	5,084
Cash taxes paid on net settled stock awards	—	(14,972)	—	—	(14,972)
Net income (loss)	—	—	(41,685)	—	(41,685)
Other comprehensive income (loss), net of tax benefit (expense) of $(6.5) million	—	—	—	20,183	20,183
Balance at December 31, 2020	$ —	$ 748,636	$ 75,560	$ (8,430)	$ 815,766
Stock-based compensation expense	—	7,034	—	—	7,034
Cash contributed by (distributed to) Parent	—	(521,639)	—	—	(521,639)
Net income (loss)	—	—	121,219	—	121,219
Other comprehensive income (loss), net of tax benefit (expense) of $(3.2) million	—	—	—	9,734	9,734
Other	—	(132)	—	—	(132)
Balance at December 31, 2021	—	$ 233,899	$ 196,779	$ 1,304	$ 431,982
Stock-based compensation expense	—	7,213	—	—	7,213
Cash contributed by (distributed to) Parent	—	(23,917)	—	—	(23,917)
Net income (loss)	—	—	(220,025)	—	(220,025)
Other comprehensive income (loss), net of tax benefit (expense) of $1.2 million	—	—	—	(4,727)	(4,727)
Balance at December 31, 2022	$ —	$ 217,195	$ (23,246)	$ (3,423)	$ 190,526

The accompanying Notes to Consolidated Financial Statements are an integral part of these statements.

Global Medical Response, Inc.
CONSOLIDATED STATEMENTS OF CASH FLOWS
(Amounts in thousands)

	Year Ended December 31,		
	2022	2021	2020
Cash flows from operating activities:			
Net income (loss)	$ (220,025)	$ 121,219	$ (41,685)
Adjustments to reconcile net income (loss) to net cash provided by (used in) operating activities			
Depreciation and amortization	329,241	323,164	372,958
Amortization of deferred financing costs and debt discount	27,745	27,463	26,704
Loss on debt extinguishment	—	23,171	17,105
Stock-based compensation expense	7,213	7,034	5,084
Loss (gain) on disposal of property and equipment	6,903	(559)	6,349
Unrealized loss (gain) on marketable equity securities	10,039	(5,078)	(3,596)
Other, net	(5,264)	5,604	1,695
Deferred income taxes	(69,927)	49,914	7,430
Equity in earnings of unconsolidated affiliates	1,602	(677)	(282)
Changes in assets and liabilities, net of effects of acquisitions			
Accounts receivable, net	(12,049)	(239,908)	(35,523)
Accounts payable	8,939	21,010	10,795
Accrued wages, benefits and taxes	(11,673)	(24,323)	69,749
Accrued interest	(20,683)	(3,033)	41,680
Accrued liabilities	52,742	47,076	(12,541)
Other assets and liabilities, net	(24,816)	46,038	30,147
Net cash provided by (used in) operating activities	79,987	398,115	496,069
Cash flows from investing activities:			
Acquisition of businesses, net of cash and restricted cash acquired	(120,162)	(118,306)	(16,411)
Proceeds from asset disposals related to sales and insurance recoveries	10,591	1,248	4,523
Purchases of property and equipment	(187,305)	(143,115)	(182,931)
Net change in investments held as insurance collateral	1,816	1,580	642
Purchases of marketable securities	(52,317)	(72,227)	(93,025)
Sales and maturities of marketable securities	47,107	42,152	67,239
Other investing activities, net	(37,778)	(10,111)	3,274
Net cash provided by (used in) investing activities	(338,048)	(298,779)	(216,689)
Cash flows from financing activities:			
Payments on finance lease obligations	(36,860)	(44,917)	(54,310)
Principal payments on long-term debt	(88,853)	(814,105)	(2,285,881)
Payment of deferred financing costs	(3,482)	(21,390)	(27,317)
Proceeds from issuance of long-term debt	37,093	1,430,700	2,276,306
Cash contributed by (distributed to) Parent	(23,917)	(521,639)	—
Other financing activities, net	—	(132)	(14,972)
Net cash provided by (used in) financing activities	(116,019)	28,517	(106,174)
Effect of exchange rate changes on cash, cash equivalents, restricted cash and restricted cash equivalents	5,264	(5,604)	(1,477)
(Decrease) increase in cash, cash equivalents, restricted cash and restricted cash equivalents	(368,816)	122,249	171,729
Cash and cash equivalents, beginning of period (including restricted cash and restricted cash equivalents of $60.8 million, $58.2 million, and $13.8 million, respectively)	530,771	408,522	236,793
Cash and cash equivalents, end of period (including restricted cash and restricted cash equivalents of $15.6 million, $60.8 million, and $58.2 million, respectively)	$ 161,955	$ 530,771	$ 408,522
Supplemental disclosure of cash flow information			
Equipment (primarily aircraft) additions financed with the issuance of debt	$ 157,436	$ 74,604	$ 81,363
Cash paid (received) during the period for:			
Interest	$ 382,049	$ 317,836	$ 286,961
Income taxes, net of refunds received	$ 11,131	$ 11,169	$ (45,331)

The accompanying Notes to Consolidated Financial Statements are an integral part of these statements.

Global Medical Response

Detailed Financial Results - (dollars in thousands)

	Full Year Budget 2024
NETTRhNG - Net Transport Revenue	9,959
OTHRRhNG - Other Non Transport Revenue	-
OTHRVhNG - Other Revenue	5,714
LEGREVhNG - Legacy Rev Accts - No Longer	-
BDREV - BD Pipeline Revenue	-
RVENUhNG - Net Revenue	**15,673**
SALRYhNG - Salaries	8,673
BENFThNG - Benefits	1,343
CMPBNhNG - Compensation and Benefits	**10,016**
AIREXhNG - Aircraft Expense	-
VHCOPhNG - Vehicle Operating Expenses	888
MEDSPhNG - Medical Supplies	213
TELEChNG - Telecommunications	85
OCCUPhNG - Occupancy	157
LOCCPhNG - Lease Occupancy	575
OOPEXhNG - Other Operating Expense	141
BLCLLhNG - Billing and Collection Expense	20
EXSCVhNG - External Services	-
PROFShNG - Professional Fees	122
HOEXPhNG - Hospice Expense	-
OPEXPhNG - Operating Expense	**2,201**
RSKINhNG - Risk Insurance	772
ADVPBhNG - Advertising & Public Relatio	131
GNLSShNG - Gain/Loss on Disposal of Fixe	-
MGMThNG - Management & Admin Fees	-
OFFCEhNG - Office Expenses	146
OTHEXhNG - Other Expenses	13
TRAVLhNG - Travel & Entertainment	34
TXFEEhNG - Taxes and Fees	90
GNADMhNG - General and Administrative E	414
BDEXP - BD Pipeline Expense	-
83500.0000 - Minority Interest	-
83999.0000 - Miscellaneous Income/Expens	-
83000.0004 - Realized Gain/Loss	-
AdjEBITDABeforeOHAlloc	**2,271**
Adjusted EBITDA Margin Pre-Allocations	*14.5%*
OVHALhNG - Overhead Allocations	1,382
TOTOPhNG - Total Operating Expense	14,785
AdjEBITDAhNG - Adjusted EBITDA	**889**
Adjusted EBITDA Margin	*5.7%*
DEPAMhNG - Depreciation Expense	295
EFO	**593**
ADJACCThNG - AdjEBITDA Removed Accounts	28
AMORThNG - Amortization Expense	-
INCOPhNG - Income from Operations	**565**



Additional Requirements 2D :

Lifefleet Southeast, Inc. d/b/a American Medical Response has no liabilities and no pending liabilities.

A Global Medical Response Solution

Lifefleet Southeast Inc. d/b/a American Medical Response- Management Plan

Dedicated Local Leadership

Our leadership team consists of a group of highly qualified, dedicated individuals with decades of experience. These professionals live and work in the communities they serve, delivering hands-on customer service and care. During our decades of local service, our dynamic and experienced local leadership team has proven its commitment and will continue to ensure that we provide quality service for the County in the years ahead. Below, AMR has provided information for our local leadership below.

ERIK ROHDE, REGIONAL PRESIDENT, 20+ YEARS EXPERIENCE



As President of the Southeast Region, Erik Rohde has been instrumental in implementing innovative programs and processes that have created success for AMR, including the recent implementation of our BLS services in the District of Columbia. In his previous role as Regional Director, Rohde was responsible for daily ambulance operations, communications and dispatch for the region working closely with local leadership, fire departments and local government officials. Rohde led AMR operations in California, Florida, and the Mid-Atlantic markets. A Boston native and paramedic, Rohde has more than 20 years of field and management experience in both the ground and aviation emergency medical services industries. He holds a Bachelor of Science degree in Criminal Justice from the Rochester Institute of Technology and an MBA from the University of Houston.

BRETT JOVANOVICH, REGIONAL VICE PRESIDENT, 27+ YEARS EXPERIENCE



Brett Jovanovich joined Global Medical Response (GMR) in 2018. Today, he oversees all air and ground GMR operations across the southeast and is based in Birmingham at our national headquarters. Having been with the organization for more than 20 years, he has led our team through expansive air and ground EMS growth, innovation and development. A New Orleans native, Brett has been a nationally registered paramedic since 1997 and holds a Bachelor of Science in Business, as well as a Master of Science in Health Administration – both from the University of Alabama Birmingham. He was cited by the Birmingham Business Journal in 2011 as one of Birmingham's "Top 40 Under 40" and received the UAB Alumni Excellence in Business Award in 2013.

ED BADAMO – DIRECTOR, 30+ YEARS EXPERIENCE



Edward Badamo currently serves as a Regional Director for the State of Florida. Originally from Connecticut, Ed has over 30 years of EMS experience. Starting with AMR in 1989 as an EMT, Ed has had many roles with increasing levels of responsibility within AMR and has been a Paramedic for 30 plus years. Ed is also one of AMRs Branch Chiefs within AMRs Office of Emergency Management and has served as such in multiple hurricane responses as well as AMRs response to support the NYC 911 system during COVID.
In addition to his time at AMR Ed was a career firefighter working for two different departments in Connecticut, finishing his career with 7 years as a career Fire Chief. Ed holds a BS in Public Safety Administration, and an MBA in Human Resource Management along with multiple fire, EMS, and Homeland Security certifications.

DANIELLE LAROCCA - OPERATIONS MANAGER, AMR HILLSBOROUGH, 10+ YEARS EXPERIENCE



Danielle LaRocca, AMR Hillsborough Operations Manager, is responsible for having direct oversight on all aspects of our local operation. She helps in strategic developing, quality teambuilding, and performance improvement processes. Having been with the company for more than 10 years, she has held several leadership roles through the operation.
Through her years with AMR, Ms. LaRocca has worked with Management and Supervisory team to develop policies and procedures to achieve maximum performance and operational efficiency. She continuously works to find the best practices to serve AMR's patients, customers, and staff.
Ms. LaRocca attended Florida Medical Training Institute and graduated with her paramedic's certificate. She worked within AMR to move on to receive her critical care certification within AMR as well to better serve her community.

DR. JOE A. NELSON, MEDICAL DIRECTOR (D.O., MS, FACOEP, FACEP)



Dr. Joe Nelson has served in the EMS industry for over 35 years, during which time he has served as the physician Medical Director for AMR's Florida operations – a post he has held since 1992. Dr. Nelson received his medical degree from Des Moines University College of Osteopathic Medicine and Health Sciences. After completion of postgraduate training, including a Fellowship in EMS Medical Direction, he earned a Master of Science degree in Medical Management from Nova Southeastern University. Board certified in emergency medicine, Dr. Nelson is heralded as a nationally recognized EMS expert who continues to practice as an emergency physician in both level one and level two trauma centers in the state of Florida. Dr. Nelson is a member of the board of directors for the Florida College of Emergency Physicians and serves on the advisory board for the Emergency Medicine

Learning & Resource Center. Past President of the Florida Association of EMS Medical Directors, Dr. Nelson has served as the medical director for International Trauma Life Support of Florida, the American Heart Association as an ACLS regional faculty member and has provided consultation on a regular basis to the Florida Bureau of EMS since 2004, as well as other State agencies including the Florida Division of Forestry and the Florida Highway Patrol. Dr. Nelson has been involved with EMS training and consultation in Japan, Argentina and the Dominican Republic as well as other organizations across the United States. Under Dr. Nelson's leadership has developed training programs in key areas such as ALS Rescue, Critical Care and Advanced Airway Management. He continues to promote cutting-edge technology in patient care such as on scene real-time video consultation with trauma surgeons, life-saving airway devices, and state of the art ventilators.

AFFIDAVIT OF PUBLICATION

Highlands News Sun

Published Daily

Sebring, Highlands County, Florida

Case No. Lifefleet Southeast Inc.

STATE OF FLORIDA
COUNTY OF HIGHLANDS

Before the undersigned authority, Janet Emerson, personally appeared who on oath says that she is the Classified Advertising Legal Clerk of Highlands News Sun, a newspaper published at Sebring in Highlands County, Florida; that the attached copy or reprint of the advertisement, to the right, being a Public Notice, was published in said newspaper by print in the issues of or by publication on the newspaper's website, if authorized, on:

December 09, 2023

Affiant further says that the Highlands News Sun newspaper complies with all legal requirements for publication in chapter 50, Florida Statutes.
SIGNED:

Janet Emerson

Sworn to and subscribed before me this 9th day of December 2023 by Janet Emerson, who is personally known to me.

Nancy Y Whirley, Customer Service Supervisor, Notary Number: HH 293555
Notary expires: July 26, 2026

00035703 00143818

HIGHLANDS COUNTY FIRE RESCUE
4506 KENILWORTH BLVD
SEBRING, FL 33870

NANCY Y. WHIRLEY
Notary Public
State of Florida
Comm# HH293555
Expires 7/26/2026

NOTICE OF APPLICATION FOR RENEWAL OF CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY (COPCN)

Highlands County Emergency Medical Services has received from LIFEFLEET SOUTHEAST, INC., a Florida Corporation d/b/a AMERICAN MEDICAL RESPONSE a private not for profit medical provider by the State of Florida Department of Health, an application for a Certificate of Public Convenience and Necessity (COPCN) for Class 2 Basic Life Support ambulance (BLS) and Class 3 Advanced Life Support ambulance (ALS) pursuant to Section 5-55 of the Code of Ordinances, Highlands County, Florida. The applicant intends to serve the geographical area Highlands County, Florida, including all incorporated areas within that County. The Class 2 – Basic Life Support ambulance encompasses providing basic life support medical services on inter-facility transports. The Class 3 – Advanced Life Support Ambulance encompasses providing advanced life support services on inter facility transports.

A copy of this notice is available for public inspection during regular business hours in the office of the Clerk of the Board of County Commissioners at the Highlands County Government Center, 590 South Commerce Avenue, Sebring, Florida 33870. The application and further information on the application may be inspected by the public at the Highlands County Fire Rescue Services Administrative Office, 4506 Kenilworth Boulevard, Sebring, Florida 33870, between the hours of 8:00 A.M. and 5:00 P.M. Monday through Friday, except holidays. Inquiries or written testimony should be directed to Dustin Fitch, Interim Deputy Chief, at that address or by phone at (863) 402-7600. Photocopies may be obtained at that location for fifteen cents ($0.15) per single sided page or twenty cents ($0.20) for double sided copies.

Any interested person who may be substantially affected by the applicant's proposed operation may, within 30 days after the date of this notice, file a written objection to the application, specifying the reason therefor with Highlands County Fire Rescue Services 4506 Kenilworth Boulevard, Sebring, Florida 33870.

HIGHLANDS COUNTY
FIRE RESCUE SERVICES

/s/ James K. Duppenthaler
Interim Fire Chief
Dec. 9, 2023

HIGHLANDS COUNTY BOARD OF COUNTY COMMISSIONERS

CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY

WHEREAS, *Lifefleet Southeast Inc. d/b/a American Medical Response* applied for a Class 2 Basic Life Support Ambulance and Class 3 Advanced Life Support Ambulance certificate of public convenience and necessity to provide Advanced Life Support interfacility transfers and, at the County's request, transport patients to a medical facility; and

WHEREAS, *Lifefleet Southeast Inc. d/b/a American Medical Response,* has met all the requirements of Sections 5-52 thru 5-59 of the Code of Ordinances, Highlands County, Florida; and

WHEREAS, *Lifefleet Southeast Inc. d/b/a American Medical Response.,* has stated that it will provide twenty-four hour service to all of the geographic areas of Highlands County, will continue to comply with all the requirements of Florida law, Part III of Chapter 401, Florida Statutes, Chapter 64J-1, Florida Administrative Code, the Code of Ordinances, Highlands County, Florida, and the requirements of any other state and federal agencies regulating emergency medical transportation services.

NOW, THEREFORE, the Board of County Commissioners of Highlands County, Florida, does hereby issue this Certificate of Public Convenience and Necessity to *Lifefleet Southeast Inc. d/b/a American Medical Response.,* for Class 2 Basic Life Support Ambulance and Class 3 Advanced Life Support Ambulance pursuant to the terms, conditions, and limitations of Chapter 5 of the Code of Ordinances, Highlands County, Florida, for the remaining period of that Certificate of Public Convenience and Necessity as set forth herein, subject to and conditioned upon the following requirements:

(1) *Lifefleet Southeast Inc. d/b/a American Medical Response* complies with all requirements of Florida law, Part III of Ch. 401, Florida Statutes, Chapter 64J-1, Florida Administrative Code, the Code of Ordinances, Highlands County, Florida, and the requirements of any other state or federal agencies regulating emergency medical transportation services.

(2) By acceptance of this certificate, *Lifefleet Southeast Inc. d/b/a American Medical Response*, agrees to indemnify the County and its elected officials, officers, employees, agents, and insurers, for all claims and losses arising out of the operations of *Lifefleet Southeast Inc. d/b/a American Medical Response.* specifically including, but not limited to, all claims and losses arising out of, resulting from or related to employment, by *Lifefleet Southeast Inc. d/b/a American Medical Response,* of off-duty full-time or part-time employees of the County.

(3) *Lifefleet Southeast Inc. d/b/a American Medical Response.* satisfies its obligations stated in Section 5-58(c) of the Code of Ordinances, Highlands County, Florida, which are included herein by this reference.

(4) *Lifefleet Southeast Inc. d/b/a American Medical Response.,* is authorized to provide only Advanced Life Support interfacility transfers between facilities described in Section 5-51 of the Code of Ordinances, Highlands County, Florida, and, at the County's request, transport patients to a medical facility subject to the terms, conditions, and limitations of Licensure by the State of Florida, and Divisions 1 and 2 of Article IV of Chapter 5 of the Code of Ordinances, Highlands County, Florida.

(5) *Lifefleet Southeast Inc. d/b/a American Medical Response* shall provide the services herein authorized twenty-four hours each day to all geographic areas of Highlands County.

(6) This Certificate of Public Convenience and Necessity is effective January 7, 2024 and will expire January 7, 2026, unless earlier revoked by the Board of County Commissioners.

Attest: _____
Jerome Kaszubowski, Clerk of Courts, Highlands County Florida

_____
Kevin Roberts, Chairman, Board of County Commissioners

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER:	**Dustin Fitch, Interim Deputy Chief**
SUBJECT/TITLE:	**Public Hearing to consider approval of Affordable Transport, Inv. application for a Class 1, Class 2 and 3 Certificate of Public Convenience and Necessity (COPCN).**

STATEMENT OF ISSUE

Affordable Transport Inc. submitted a new application of COPCN Class 1 - Non-Emergency Medical Transportation, Class 2 -Basic Life Support Ambulance and Class 3 -Advanced Life Support Ambulance application to Highlands County EMS on November 29, 2023. The application was found complete and was publicly noticed on January 7, 2024, pursuant to Section 5-56(b) of the Code of Ordinances, Highlands County, Florida.

RECOMMENDED ACTION

Move to approve Affordable Transport, Inv. application for a Class 1, Class 2 and 3 Certificate of Public Convenience and Necessity (COPCN).

FISCAL IMPACT

There is no fiscal impact.

Attachments: Application 11.29.23.pdf
ATI notice.pdf
COI.PDF
COPCN - Class 1.pdf
COPCN - Class 2 & 3.pdf

Highlands County Fire Rescue

RECEIVED NOV 2 9 2023

CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY
NON-GOVERNMENTAL ENTITY
MEDICAL TRANSPORTATION SERVICE LICENSE APPLICATION

Please type. Answer all questions that apply to the level of service to be provided. Attach additional sheets as needed.

STATEMENTS AND MATERIALS SUBMITTED WILL BE SUBJECT TO VERIFICATION

CHECK TYPE OF APPLICATION FOR CLASSIFICATION OF SERVICE

☐ New ☑ Renewal

☒ Class 1 (NEMT) ☒ Class 2 (BLS) ■ Class 3 (ALS) ☐ Class 4 (Air)

Affordable Transport Inc
Name of Service

3706 DMG Drive	Lakeland	Fl	33811
Mailing Address	City	State	Zip Code

863-698-9764
Telephone

1. Richard F Jensen Jr — rjensen@affordabletransport.net
Owner's Name — Email Address

3706 DMG Dr	Lakeland	fl 33811	
Mailing Address	City	State	Zip Code

(Attach names of elected officials associated with your service)

2. Teresa Hall — 8636989764x121 — thall@affordabletransport.net
General Manager/Contact Person — Telephone — Email Address

3. Date incorporated/formation of business association: 02/2003 (Attachment # 01)

(Attach articles of incorporation; names and address of shareholders along with number of outstanding shares.)

Additional pages may be added as needed

Highlands County Fire Rescue

4. Attach FCC license/communications contract: (Attachment #04)

5. Address of present/proposed main station and any substations (attach list if more than three substations):

   Main Station: 3706 DMG Dr, Lakeland, Fl 33811

   Substation: _____

   Substation: _____

   Substation: _____

6. Financial Information: (Attachment #02,a,b,)

   Provide a financial statement as listed in Highlands County Code of Ordinances Section 5-56.

7. Insurance: (Attachment #03)

   Provide copies of Certificates of Insurance as listed in Highlands County Code of Ordinances Section 5-52.

8. Vehicle information: Complete and attach appropriate form.

9. Personnel information: Complete and attach appropriate form.

10. All COPCN applicants:

    A. Attach contract with a medical director as provided by State Law and include copy of DEA license (Class 2, 3, and 4 applicants only).

    B. Statement describing geographical area served by your company.

    C. Statement of facts and data describing the need for your service in Highlands County.

    D. Schedule of proposed fees to be charged for your service.

    E. Identify staffing patterns and operational hours for each permitted vehicle in your fleet.

Highlands County Fire Rescue

Richard F Jensen Jr.
Signature of Owner/Manager

President
Title

STATE OF FLORIDA
COUNTY OF Polk

Sworn to (or affirmed) and subscribed before me this 29th day of Nov, 2023, by Richard F Jensen Jr (name of person making statement).

Seal

TERESA HALL
Notary Public
State of Florida
Comm# HH329811
Expires 11/7/2026

(Signature of Notary Public - State of Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known: ☑ OR Produced Identification ☐

Type of Identification Produced: _____

Highlands County Fire Rescue

Additional requirements:

1. Attach letter of any investigation or formal disciplinary action involving your agency by the Florida Department of Health, or any local, state, or federal agency.

2. The financial ability of the applicant to provide the proposed services based on, at minimum, attach the following criteria:

    a. Audited financial statements or federal tax returns or, for newly formed corporations, personal audited financial statements from the principal(s), as defined by the county administrator.
    b. Pro forma statements.
    c. Credit and bank references, and current official credit report.
    d. Disclosure of any and all pending liabilities.

3. Attach the management plan of the applicant.

All applicants:

1. Return signed, notarized application along with a non-refundable application fee of $500, and vehicle permit fees of $100 per vehicle listed on Highlands County COPCN Certificate Vehicle form made payable to the Highlands County Board of County Commissioners.

2. Renewal applicants: Return signed, notarized application along with a non-refundable application fee of $500, and vehicle permit fees of $100 per vehicle listed on the Highlands County COPCN Certificate Vehicle form made payable to the Highlands County Board of County Commissioners. If request for renewal is less than three months from the expiration of COPCN or application inaccuracies caused by the applicant create a delay of renewal to extend beyond the expiration of the services current COPCN, a $250 late fee will be imposed and required paid prior to notification of renewal request.

ATTACHMENT # 01

ARTICLES OF AMENDMENT TO
ARTICLES OF INCORPORATION
OF
AFFORDABLE TRANSPORT, INC.

AFFORDABLE TRANSPORT, INC., a corporation organized and existing under the laws of the State of Florida, under the hand of the undersigned President and pursuant to Florida Statutes, hereby certifies that effective as of **February 14, 2013,** the Shareholders of said company signed a written statement duly adopting and approving the following amendments to the Articles of Incorporation of the Company which were originally filed on June 23, 2003.

1. The Registered Agent's name and address are changed to:

   RICHARD F. JENSEN, JR.
   146 2nd Street North, Suite 310
   St. Petersburg, FL 33701

2. The Sole Director and President is changed to:

   RICHARD F. JENSEN, JR.
   146 2nd Street North, Suite 310
   St. Petersburg, FL 33701

3. The registered office of the Company is changed to:

   146 2nd Street North, Suite 310
   St. Petersburg, FL 33701

All other provisions of the Articles of Incorporation shall remain in full force and effect and shall not be modified hereby. By their signatures below, **RICHARD CROSLAND and GOVONI & COMPANY, INC.** acknowledge their resignation as President / Director and as Registered Agent of the Company, respectively, and all other actions of the Company referenced herein.

The foregoing action was duly approved by the unanimous vote of the Shareholders at a meeting of the Shareholders and the subscriber to the Articles of Incorporation.

IN WITNESS WHEREOF, the undersigned has set his hand and seal as a duly authorized act of the Company effective this **14th** day of **February, 2013.**

Print Name: Mike Patey

Print Name: Elsa R. Reyes

RICHARD CROSLAND, Individually

AFFORDABLE TRANSPORT, INC.,
a Florida corporation

BY: **RICHARD CROSLAND**
President (SEAL)

Print Name: Mike Patey

Print Name: Elsa R. Reyes

STATE OF FLORIDA)
COUNTY OF Polk)

The foregoing instrument was acknowledged before me this 12th day of February, 2013, by **RICHARD CROSLAND,** individually and as President of **AFFORDABLE TRANSPORT, INC.,** a Florida corporation, on behalf of said corporation, who is personally known to me or has produced FL Drivers as identification.

Print Name: Elsa R. Reyes
Notary Public for State of Florida (SEAL)
My Commission Expires:

ELSA R. REYES
MY COMMISSION #DD857435
EXPIRES: FEB 17, 2013
Bonded through 1st State Insurance

GAVONI & COMPANY, INC.,
a Florida corporation

BY:
BRIAN R. GAVONI
President (SEAL)

Print Name: Sherry J. Haeger

Print Name: Debra A. Reichert

STATE OF FLORIDA)
COUNTY OF Polk)

The foregoing instrument was acknowledged before me this 13th day of February, 2013, by **BRIAN R. GAVONI,** as President of **GAVONI & COMPANY, INC.,** a Florida corporation, on behalf of said corporation, who is personally known to me or has produced Driver License as identification.

Print Name: Debra A. Reichert
Notary Public for State of Florida (SEAL)
My Commission Expires:

DEBRA A REICHERT
MY COMMISSION # EE080688
EXPIRES April 04, 2015
(407) 398-0153 FloridaNotaryService.com

State of Florida

Department of State

I certify the attached is a true and correct copy of the Articles of Incorporation of AFFORDABLE TRANSPORT, INC., a Florida corporation, filed on June 23, 2003, as shown by the records of this office.

The document number of this corporation is P03000071001.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capitol, this the Twenty-sixth day of June, 2003

Glenda E. Hood

Glenda E. Hood
Secretary of State

CR2EO22 (2-03)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JUN 23 PM 12:34

ARTICLES OF INCORPORATION

OF

AFFORDABLE TRANSPORT, INC.

The undersigns hereby declare their intention to form and become a body corporate under the laws of the State of Florida, and under the following Certificate of Incorporation, which they do hereby make, subscribe to and acknowledge to be filed in the office of the Secretary of State of the State of Florida.

ARTICLE I

The name of this corporation shall be: **Affordable Transport, Inc.**

ARTICLE II

In furtherance and not in limitation of the general powers conferred by the laws of the State of Florida, and the objects and purposes herein set forth, it is expressly provided that this corporation shall have the power to transact any and all lawful business permitted by corporations under the laws of the State of Florida.

ARTICLE III

The capital stock of this corporation shall consist of 100 shares of common stock with a nominal or par value of $1.00 per share. Said common stock may be divided into voting and non-voting shares before issuance by action of the Board of Directors; provided, however, that in the

event no such designation is specifically made by the Board of Directors, said stock shall be deemed voting.

The whole or any part of the authorized capital stock may be paid for in cash, property or services, at a just value to be fixed by the Board of Directors of this corporation at any regular or special meeting.

ARTICLE IV

The amount of capital with which this corporation shall begin business shall be $100.00.

ARTICLE V

The period of existence of this corporation shall be perpetual, or until dissolved according to law.

ARTICLE VI

The address of the principal office and mailing address of the corporation is 1290 East Gilbert Street, Bartow, FL 33830. The initial registered agent for this corporation shall be Keith D. Miller, and the street address of the initial registered office shall be at 245 South Central Avenue, Bartow, Florida 33830.

ARTICLE VII

The name and post office address of the original subscribers to these Articles of Incorporation and the members of the first Board of Directors of this corporation, who, subject to the provisions of these Articles of Incorporation, the By-Laws and the laws of the State of

Florida, shall hold office until the first annual meeting of the corporation, or until successors are elected and have been qualified is as follows:

Richard Dana Crosland
1290 East Gilbert Street
Bartow, FL 33830

ARTICLE VIII

The private property of the stockholders shall not be subject to payment of corporate debts to any extent.

ARTICLE IX

In furtherance and not in limitation of the powers conferred by the laws of the State of Florida, the Board of Directors is expressly authorized:

To make, alter, amend and rescind the By-Laws of this corporation, to fix the amount to be reserved as working capital; to authorize and cause to be executed mortgages and liens, without limit as to amount upon the property and franchises of this corporation.

With the consent in writing and pursuant to a vote of the holders of a majority of the capital stock issued and outstanding, the directors shall have authority to dispose of, in any manner, the whole property of this corporation.

The stockholders and directors shall have the power to hold their meeting and keep the books, documents, and papers of the corporation outside the State of Florida, at such places as may be from time to time designated by the By-Laws or by resolution of the stockholders or directors, except as otherwise required by the laws of Florida.

If the By-Laws so provide, to designate one or more of their number to constitute an executive committee, which shall for the time being, as provided in said resolution or in the By-Laws of this corporation, have and exercise any or all of the powers of the Board of Directors in the management of the business and affairs of this corporation and have power to authorize the seal of this corporation to be affixed to all papers which may require it.

This corporation reserves the right to amend, alter, change or repeal any provision contained in this certificate of incorporation in the manner now or hereafter prescribed by statute, and all rights conferred on stockholders herein are granted subject to this reservation.

The directors of this corporation shall have the power to establish and maintain, in addition to the principal office in Florida, one or more offices at such places as they may from time to time designate.

This corporation may under its By-Laws confer powers additional to the foregoing upon the directors, in addition to the powers and authority expressly conferred on them by law.

It is the intention that the objects, purposes and powers specified in Article II hereof shall, except when otherwise specified in said Article, be in no ways limited or restricted by reference to or inference from the terms of any other clause or article in these Articles of Incorporation, but that the objects, purposes and powers specified in Article II hereof, and in each of the clauses or paragraphs specified in Article II hereof, and in each of the clausés or paragraphs of this charter, shall be regarded as independent objects, purposes and powers.

The corporation shall be organized and managed so that it is a "Small Business Corporation" as defined in IRC Sec. 1244(c)(1), as amended and the shares issued by the corporation will be "Section 1244 Stock" as defined in IRC Sec. 1244(c)(1), as amended.

The undersigns being the original subscribers to the capital stock hereinbefore named, for the purpose of forming a corporation in pursuance of the laws of Florida, does make and file these Articles, hereby declaring and certifying that the facts herein stated are true and respectively agree to take the number of shares of stock subscribed by us as hereinbefore set forth at a price of $1.00 per share. We have accordingly hereunto set our hands and seals this 17 day of June, 2003.

Witnesses:

Richard Dana Crosland

STATE OF FLORIDA
COUNTY OF POLK

I CERTIFY that this day before me, an officer duly authorized to take acknowledgments, personally appeared Richard Dana Crosland, who executed the foregoing Articles of Incorporation, who is personally known to me or produced identification, and who did not take an oath. Identification Produced: FL DL# C624-744-59-100-0

WITNESS my hand and official seal in the County and State named above on the 17 day of June, 2003.

Notary Public - State of Florida at Large
My Commission Expires:

(Affix Notarial Seal)

PEGGY DeVIVO
Notary Public, State of Florida
My comm. expires May 15, 2005
Comm. No. DD026106

03 JUN 23 PM 12:34

CERTIFICATE DESIGNATING
REGISTERED OFFICE AND REGISTERED AGENT

In pursuance of Section 48.091 and Section 607.0501, Florida Statutes, the following is submitted in compliance with said provisions:

That **AFFORDABLE TRANSPORT, INC.**, desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation, in the City of Bartow, County of Polk, State of Florida, has designated 245 South Central Avenue, Bartow, FL 33830, as its registered office and Keith D. Miller as its registered agent at said office to accept service of process within this state.

ACKNOWLEDGMENT AND ACCEPTANCE:

Having been named to accept service of process for the above stated corporation, at the registered office designated in this certificate, I hereby accept to act in this capacity, and agree to comply with said provisions relative to keeping open said office.

By _____
Keith D. Miller, Registered Agent

SWORN TO AND SUBSCRIBED before me on this 17 day of June, 2003.

_____
Notary Public - State of Florida at Large
My Commission Expires:

PEGGY DeVIVO
Notary Public, State of Florida
My comm. expires May 15, 2005
Comm. No. DD026106

Affordable Transport, Inc.

Current Ownership

Richard F Jensen Jr
116 14th Ave NE, St Petersburg, Fl 33701

100 shares of ATI common stock

Affordable Transport, Inc.

Attachment #2

Financial viability of Affordable Transport Inc

5-56 of the Highlands County Ordinances requires – "(10) Evidence that the applicant is financially able to provide and maintain the service described in the application"

Affordable Transport is a privately held company and does not have audited financial statements. In lieu of unaudited financial statements please find the attached letters from ATI's bank and Accountant (of 20 years) indicating the stability and viability of Affordable Transport

#2b - Seacoast Bank

#2c Brian Govoni – principal with Govoni & Company - accountants

#2.a

SeacoastBank
Seacoast National Bank

Date: November 28, 2023

To: Richard F Jensen Jr.

From: Ruth Darretta

Subject: Affordable Transport Inc/Credit Reference

Dear Mr. Jensen,

This letter is to confirm that Affordable Transport Inc., is in good standing with Seacoast Bank and has sufficient credit to operate Affordable Transport Inc.

If you have any further questions please do not hesitate to contact me.

Sincerely,

Ruth Darretta
SVP/ Commerical Banker
(727)510-0712
Ruth.Darretta@Seacoastbank.com

#26

Govoni & Company, Inc.
1955 Gulf of Mexico Drive – Unit 312
Longboat Key, Florida 34228
Tel: 863-258-9474
Email: brian@govonigroup.com

November 29, 2023

Highlands County Board of
County Commissioners
600 S. Commerce Avenue
Sebring, Florida 33870

RE: Affordable Transport, Inc.

Ladies and Gentlemen:

This letter is to confirm that our firm acts as accountants and tax advisors to Affordable Transport, Inc. and its sole shareholder, Mr. Richard F. Jensen, Jr. In the case of Affordable Transport, Inc., we have represented the company since September 2010. As for Mr. Jensen, we have represented him personally since February 2013.

We further confirm that Affordable Transport, Inc. is active and in good standing, that the company is well capitalized and has significant credit facilities available through Seacoast Bank in St. Petersburg, Florida, and that we see no reason to question the company's ability to continue as a going concern for the foreseeable future.

Please do not hesitate to contact me directly with any questions.

Sincerely,

Brian R. Govoni
Managing Shareholder

ATTACHMENT # 3

569AFFORTRA

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/28/2023

249

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
McGriff Insurance Services
12485 - 28th Street North
Saint Petersburg, FL 33716
727-327-7070

CONTACT NAME: Blair Hautus
PHONE (A/C, No, Ext): 727-803-8116 **FAX (A/C, No):** 888-632-8459
E-MAIL ADDRESS: Blair.Hautus@mcgriff.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Landmark American Insurance Company	33138
INSURER B : National Interstate Ins. Co.	32620
INSURER C : Zenith Insurance Company	13269
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Affordable Transport Inc.
3706 DMG Drive
Lakeland, FL 33811-1043

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY	X		LHC801156	02/10/2023	02/10/2024	EACH OCCURRENCE	$2,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$50,000
	X $25,000 Per Claim						MED EXP (Any one person)	$5,000
	Deductible						PERSONAL & ADV INJURY	$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$5,000,000
	X POLICY PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$2,000,000
	OTHER:						EBL	$1,000,000
B	AUTOMOBILE LIABILITY	X		AAL000003607	02/10/2023	02/10/2024	COMBINED SINGLE LIMIT (Ea accident)	$1,000,000
	ANY AUTO						BODILY INJURY (Per person)	$
	X OWNED AUTOS ONLY; SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY; X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	$
	DED RETENTION $							$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N		X	Z137424503	01/10/2023	01/10/2024	X PER STATUTE OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y	N/A					E.L. EACH ACCIDENT	$1,000,000
	(Mandatory in NH)						E.L. DISEASE - EA EMPLOYEE	$1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	$1,000,000
A	*Professional			LHC801156	02/10/2023	02/10/2024	$2,000,000/$5,000,000	
A	*Abuse			LHC801156	02/10/2023	02/10/2024	$1,000,000/$1,000,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

*Professional Liability and Abuse Liability coverage is on a Claims Made basis.
Highlands County BOCC is included as Additional Insured in accordance with the policy provisions of the General Liability and Auto Liability policies as required by written contract.
30 Days Notice of Cancellation except 10 Days for Non-Payment.

CERTIFICATE HOLDER

Highlands County BOCC
600 South Commerce
Sebring, FL 33870

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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JEJA

Affordable Transport, Inc.

Attachment #04

ATI Communications

All vehicles are equipped with Cellular phones (ATT FirstNet). Radios and tablets.

All Primary communications with dispatch, hospitals, facilities and patient families is thru cellular phones.

Back-up and emergency communication is thry radios using the State 800MHz frequency, Channel 9 service.

All patient information, including patient records, instructions, addresses, GPS, etc is thru encrypted, HIPPA compliant tablets.

Affordable Transport, Inc.

Item #8

Highlands County Fire Rescue

HIGHLANDS COUNTY COPCN CERTIFICATE VEHICLES

Name of Service: AFFORDABLE TRANSPORT INC. Date: _____

Unit #	Vehicle Type:	Year/Make	Model	Vehicle Identification #	Mileage
DC01	AMBULANCE TYPE II	2022 FORD	TRANSIT 250	1FDBR1CGXNKA76197	66277
DC02	AMBULANCE TYPE II	2022 FORD	TRANSIT 250	1FDBR1CG7NKA73256	56638
DC03	AMBULANCE TYPE II	2023 FORD	TRANSIT 250	1FDBR1CG6PKA23709	38553
DC04	AMBULANCE TYPE II	2023 FORD	TRANSIT 250	1FDBR1CG1PKA11516	31648
DC05	AMBULANCE TYPE II	2019 FORD	TRANSIT 250	1FDYR2CMXKKA96645	309105
DC06	AMBULANCE TYPE II	2019 FORD	TRANSIT 250	1FDYR2CM1KKA96646	270750
DC07	AMBULANCE TYPE II	2019 FORD	TRANSIT 250	1FDYR2CM0KKA96640	304793
DC08	AMBULANCE TYPE II	2019 FORD	TRANSIT 250	1FDYR2CM6KKA96643	310389
DC09	AMBULANCE TYPE II	2019 FORD	TRANSIT 250	1FDYR2CM3KKA96647	280496
DC10	AMBULANCE TYPE II	2019 FORD	TRANSIT 250	1FDYR2CM5KKA96648	321750
DC11	AMBULANCE TYPE II	2023 FORD	TRANSIT 250	1FDBR1CG5PKA84016	56
DC12	AMBULANCE TYPE II	2023 FORD	TRANSIT 250	1FDBR1CG9PKA84083	53
DC45	AMBULANCE TYPE II	2017 FORD	TRANSIT 250	1FDYR2CM2HKA15419	283865
DC46	AMBULANCE TYPE II	2017 FORD	TRANSIT 250	1FDYR2CM9HKA02716	288397
DC47	AMBULANCE TYPE II	2019 FORD	TRANSIT 250	1FDYR2CM7KKB31769	269124
DC49	AMBULANCE TYPE II	2016 FORD	TRANSIT 250	1FDYR2CM7GKA96576	318967

Attach additional page(s), if necessary

Highlands County Fire Rescue

HIGHLANDS COUNTY COPCN CERTIFICATE VEHICLES

Name of Service: AFFORDABLE TRANSPORT INC. Date: _____

Unit #	Vehicle Type:	Year/Make	Model	Vehicle Identification #	Mileage
DC50	AMBULANCE TYPE II	2019 FORD	TRANSIT 250	1FDYR2CM7KKA96649	271186
DC51	AMBULANCE TYPE II	2016 FORD	TRANSIT 250	1FDYR2CM0GKA96581	323443
DC52	AMBULANCE TYPE II	2016 FORD	TRANSIT 250	1FDYR2CM0GKA96578	392321
DC53	AMBULANCE TYPE II	2017 FORD	TRANSIT 250	1FDYR2CM7HKA02715	321597
DC54	AMBULANCE TYPE II	2017 FORD	TRANSIT 250	1FDYR2CM3HKA02713	295607
DC55	AMBULANCE TYPE II	2019 FORD	TRANSIT 250	1FDYR2CM4KKB31762	258258

Form 1C-CERTVEHICLES

Attach additional page(s), if necessary

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE
PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 0025287 / 005932

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDYR2CM4KKB31762

Mileage: 258258 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC55 License Plate Number: MIQ52K

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature | Operations Manager (Title) | 11/29/2023 (Date)

Daniel Perez

Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE
PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 0025286 / 006297

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDYR2CM3HKA02713

Mileage: 295607 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC54 License Plate Number: 0087UY

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature | Operations Manager (Title) | 11/29/2023 (Date)

Daniel Perez

Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 0025285 / 006296

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDYR2CM7HKA02715

Mileage: 321597 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC53 License Plate Number: 0088UY

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature — Operations Manager (Title) — 11/29/2023 (Date)

Daniel Perez

Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE
PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 0025284 / 005091

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDYR2CM0GKA96578

Mileage: 392321 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC52 License Plate Number: 6168UP

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature | Operations Manager (Title) | 11/29/2023 (Date)

Daniel Perez
Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE
PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 0025283 / 005937

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDYR2CM0GKA96581

Mileage: 323443 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC51 License Plate Number: 6166UP

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature — Operations Manager (Title) — 11/29/2023 (Date)

Daniel Perez
Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE
PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 0025282 / 006295

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDYR2CM7KKA96649

Mileage: 271186 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC50 License Plate Number: MIU60Q

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature | Operations Manager Title | 11/29/2023 Date

Daniel Perez
Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 0025280 / 006294

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDYR2CM7KKB31769

Mileage: 269124 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC47 License Plate Number: MIU30M

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature | Operations Manager Title | 11/29/2023 Date

Daniel Perez

Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE
PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 0025281 / 005936

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDYR2CM7GKA96576

Mileage: 318967 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC49 License Plate Number: Y69NDP

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature | Operations Manager (Title) | 11/29/2023 (Date)

Daniel Perez
Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 0025279 / 005934

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDYR2CM9HKA02716

Mileage: 288397 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC46 License Plate Number: 6171UW

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature | Operations Manager (Title) | 11/29/2023 (Date)

Daniel Perez
Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE
PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 0025278 / 006293

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDYR2CM2HKA15419

Mileage: 283865 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC45 License Plate Number: 617 OUW

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature | Operations Manager (Title) | 11/29/2023 (Date)

Daniel Perez
Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 0025614 / 007210

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDBR1CG9PKA84083

Mileage: 53 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC12 License Plate Number: 98DRXL

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature | Operations Manager (Title) | 11/29/2023 (Date)

Daniel Perez

Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE
PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 0025613 / 007209

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDBR1CG5PKA84016

Mileage: 56 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC11 License Plate Number: 99DRXL

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature — Operations Manager (Title) — 11/29/2023 (Date)

Daniel Perez
Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE
PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 022520 / 007043

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDYR2CM5KKA96648

Mileage: 321750 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC10 License Plate Number: MIU62Q

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature — Operations Manager (Title) — 11/29/2023 (Date)

Daniel Perez

Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 022519 / 007042

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDYR2CM3KKA96647

Mileage: 280496 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC09 License Plate Number: MIU61Q

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature — Operations Manager (Title) — 11/29/2023 (Date)

Daniel Perez

Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE
PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 023491 / 007041

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDYR2CM6KKA96643

Mileage: 310389 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC08 License Plate Number: MIR79U

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature | Operations Manager (Title) | 11/29/2023 (Date)

Daniel Perez
Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 022517 / 007040

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDYR2CM0KKA96640

Mileage: 304793 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC07 License Plate Number: MIR78U

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to Highlands County Board of County Commissioners

Signature Operations Manager 11/29/2023

Daniel Perez

Operations Manager

Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 022516 / 007039

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDYR2CM1KKA96646

Mileage: 270750 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC06 License Plate Number: MIR76U

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature — Operations Manager (Title) — 11/29/2023 (Date)

Daniel Perez
Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 022515 / 007038

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDYR2CMXKKA96645

Mileage: 309105 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC05 License Plate Number: MIR77U

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature

Operations Manager
Title

11/29/2023
Date

Daniel Perez
Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE
PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 0025124 / 006987

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDBR1CG1PKA11516

Mileage: 31648 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC04 License Plate Number: BX81IK

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature | Operations Manager Title | 11/29/2023 Date

Daniel Perez
Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 0025125 / 00686

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDBR1CG6PKA23709

Mileage: 38553 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC03 License Plate Number: BX82IK

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature | Operations Manager (Title) | 11/29/2023 (Date)

Daniel Perez

Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE
PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 0024880 / 006902

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDBR1CG7NKA73256

Mileage: 56638 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC02 License Plate Number: MIU65Q

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature | Operations Manager (Title) | 11/29/2023 (Date)

Daniel Perez

Print Name

HIGHLANDS COUNTY FIRE RESCUE

COPCN AMBULANCE PERMIT APPLICATION FORM

Name of Service: Affordable Transport Inc.

Business Address: 3706 DMG DR

City and Zip Code: 33811 Business Phone Number: 8636989764

USE SEPARATE APPLICATION FORM FOR EACH VEHICLE

1. Type of Vehicle: ☑ ALS ☑ BLS ☐ AIR

2. Type of Application ☐ New ☑ Renewal

3. Vehicle Data: State ALS / BLS Vehicle License Number: 0024881 / 006903

Manufacturer: FORD Year/Model: TRANSIT 250

Vehicle Identification Number: 1FDBR1CGXNKA76197

Mileage: 66277 Color Scheme: WHITE

(Attach photograph of vehicle)

Unit Number: DC01 License Plate Number: MIU64Q

4. Please enclose with this application the permit fee of $100.00:

Make the check payable to: Highlands County Board of County Commissioners

Signature | Operations Manager (Title) | 11/29/2023 (Date)

Daniel Perez

Print Name

DC01



DC02



DC03



DC04



DC05



DC06



DC07



DC08



DC09



DC10



DC11



DC12



DC45



DC46



DC47



DC49



DC50



DC51



DC52



DC53



DC54



DC55



Affordable Transport, Inc.

Item #10c Statement of Highland County Need and Advantages of ATI

Highlands County has been a steadily growing county for many years. With Florida being the fastest growing state, it is safe to expect with the County mindset of increasing industrial investment, that the steady growth seen in the past will continue. Currently the 105,000 population expands by almost 20% when in season.

ATI has proudly served Highlands County since population 2013. Last year ATI transported over 2700 of Highlands County citizens. That figure is actually down from pre-covid numbers when ATI was transporting almost 4,000 citizens of Highlands County annually.

ATI's goal in 2024 goes hand in hand with Highland Counties goals of retention and successful expansion of existing businesses and industry. Pre-covid ATI operated a Highlands County office maintaining and staffing multiple vehicles, using local business for maint and supplies. We hope to be able to reopen that open in 2024.

ATI Advantages;

- ATI is based has operated in Highlands County since 2013.
- One of ATI's core benefits and differences from other transport companies is maintaining on-Time pick-up at greater than 95% - simply put – we give real dependable pick-up times which helps our patients, facilities and hospitals.
- ATI maintains strict standards that all employees adhere too including patient care standards set and approved by companies medical Director.
- ATI is continually updating fleet and equipment that gives ATI better availability and safer transports vs most other area EMS companies. In 2023, ATI acquired 6 new dual certified vehicles.
- ATI staff certifications maintained by continuous inhouse training,
- ATI training staff is NMET certified,
- All vehicles have front cabin cameras to assist with and ensure safer driving and patient experiences,
- Dress and professionalism codes strictly enforced.
- Most facilities already know ATI and have a stable and successful relationship for the transport services.
- ATI staff are fully trained on transporting Peds and currently provides ALS/Specialty transports for pediatric stretcher and wheelchair patients. ATI has 2 ALS units outfitted for Wheelchair transport as may be necessary and more appropriate for the patient's needs.
- ATI staff are trained for Neonatal transports. Neonatal transports of patients weighing less than 5KG or 28 days old will have a facility NICU team onboard.

Affordable Transport, Inc.

Item #10d Fee Schedule

Contracted/Medicare	Contracted ($8.71)	Non-Contracted
A0428-BLS Non-Emergent	$259.48	$361.00/$12.00 per mile
A0429-BLS Emergent	415.16	$553.00/$12.00 per mile
A0426-ALS Non-Emergent	$311.37	$425.00/$12.00 per mile
A0427-ALS Emergent	$493.00	$649.00/$12.00 per mile
A0433-ALS2	$713.536	$922.00/$12.00 per mile
A0434-ALS SCT- Vent	$843.29	$1082.00/$13.00 per mile
NMS	$140.00/$6.00 per mile	$160.00/$7.50 per mile
Bariatric	$160	$220.00
ALS Wait Time	$125.00 per 30 min.	$165.00 per 30 min.
BLS Wait Time	$90.00 per 30 min.	$110.00 per 30 min.
NMS Wait Time	$75.00 per 30 min.	$80.00 per 30 min.

Affordable Transport, Inc.

Item #10e Staffing Patterns and Operational Hours

ATI operates ALS and BLS services 24/7, 365 days a year

Staffing is by 13hr shifts for transport staff and 8-to-12-hour shifts for office personnel.

Affordable Transport, Inc.

Item #9

Highlands County Fire Rescue
COPCN ALS/BLS PERSONNEL

Name of Service: Affordable Transport Inc. Date: 11/28/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Adler	Bryan	N	Y	Y	582369
Alcantara	Adrianna	N	Y	Y	570805
Anderson	Samantha	N	N	Y	A536-796-01-647-0
Baert	Alana	N	Y	Y	569906
Baker	Shawn	N	Y	Y	558115
Bennett	Amber	Y	N	Y	539503
Bentley	Shirley	N	N	Y	B534-709-93-526-0
Blank	Shane	N	Y	Y	584427
Brandow	Jessica	Y	Y	Y	539163
Brooks	Elijah	Y	Y	N	521851
Burkes-Boyer	Mailyn	N	Y	Y	554208
Buttermore	Colton	N	Y	Y	584759
Carlson	Gabriel	N	Y	Y	583969
Claridy	Kendra	N	Y	Y	568534
Coates	Michael	Y	N	Y	8859
Cobb	Lindsey	Y	Y	Y	544584

Attach additional page(s), if necessary

Highlands County Fire Rescue
COPCN ALS/BLS PERSONNEL

Name of Service: Affordable Transport Inc. Date: 11/28/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Damron	Leah	Y	N	Y	539117
De La Cruz	Carlos	N	Y	Y	578372
Donaldson	Kjuan	Y	N	Y	542270
Drinkwater	Daulton	N	N	Y	D652-172-02-404-0
Dulin	Caleb	Y	N	Y	534024
Erdmann	Nadia	N	Y	Y	584077
Ferguson	Katharine	N	Y	Y	578658
Fernandez	Frank	N	Y	Y	547981
Fisher	Michael	Y	N	Y	525811
Flatt	Billy	N	N	Y	F430-073-76-443-0
Forsing	Elizabeth	N	N	Y	F625-233-75-688-0
Garcia	George	N	Y	Y	555558
Gibson	Trinton	N	Y	Y	584446
Goodwin	Benjamin	N	Y	Y	576654
Gunter	Zaybreion	Y	N	N	576489
Hager	Martin	N	Y	Y	532109

Attach additional page(s), if necessary

Highlands County Fire Rescue
COPCN ALS/BLS PERSONNEL

Name of Service: Affordable Transport Inc. Date: 11/28/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Harris	Dalton	Y	N	Y	537739
Harwell	Kimberly	N	Y	Y	581349
Hendron	Cassandra	n	Y	Y	584681
Hicks	Alex	N	Y	Y	580772
Imig	Jordan	N	N	Y	I520-435-89-380-0
Jackson	Cristopher	N	Y	Y	582598
Johnson	Anesa	N	Y	Y	572967
Juarbe Rivera	Joshua	Y	Y	Y	542602
Langenkamp	Nathanial	Y	N	Y	542561
Leal	John	N	N	Y	L400-463-71-287-0
Lemonious	Delroy	N	N	Y	L552-172-74-335-0
Lopez	Sara	N	Y	Y	583583
Lopez-Roman	Manny	Y	N	Y	542997
Marte	Angie	N	Y	Y	570102
McNulty	Nelson	Y	N	Y	528893
Miranda	Rebecca	N	N	Y	C450-773-01-901-0

Attach additional page(s), if necessary

Highlands County Fire Rescue
COPCN ALS/BLS PERSONNEL

Name of Service: Affordable Transport Inc. Date: 11/28/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Moore	Riley	N	Y	Y	585397
Negron	Lucian	N	Y	Y	583997
Oddo	Michael	N	N	Y	O300-541-82-026-0
Ortiz-Rosario	Angel	Y	N	Y	532813
Ortiz	Marcos	Y	N	Y	532996
Oses	Gustavo	N	Y	Y	538884
Pewitt	Cody	N	Y	Y	569162
Pineda	Mia	N	N	Y	P530-540-01-742-0
Powell	Ronald	N	Y	Y	21989
Ramos	Christopher	N	Y	Y	560120
Reicherter	Rocco	N	N	Y	R263-734-02-106-0
Rhone	Justin	N	Y	Y	553227
Rodriguez	Jonathan	N	Y	Y	550470
Rushing	Michael	N	Y	Y	580998
Ryan	Austin	Y	N	Y	538330
Saenz	Eduardo	N	Y	Y	571003

Attach additional page(s), if necessary

Highlands County Fire Rescue
COPCN ALS/BLS PERSONNEL

Name of Service: Affordable Transport Inc. Date: 11/28/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Sanabria	William	Y	N	Y	518665
Sanchez	Daniel	N	N	Y	S522-163-95-004-0
Santiago	Jose	Y	N	Y	532865
Sargent	Sarah	N	Y	Y	546458
Serrano-Rivera	Bryan	Y	N	Y	537345
Shaw	Bailey	Y	Y	Y	577432
Snapp	Lynsy	N	Y	Y	569162
Story	John Wesley	N	Y	Y	563842
Tedana	Logan	N	Y	N	550599
Tennis	Justin	N	Y	Y	567008
Thomas	Jason	Y	Y	Y	520881
Thrush	Jenna	N	Y	Y	581935
Tompkins	Matthew	N	Y	Y	545452
True	Anthony	N	N	Y	T600-018-91-375-0
Vaquez Clemente	Jose	Y	N	Y	V224-426-81-347-0
Velasquez-Luna	Anthony	N	Y	Y	553708

Attach additional page(s), if necessary

Highlands County Fire Rescue
COPCN ALS/BLS PERSONNEL

Name of Service: Affordable Transport Inc. Date: 11/28/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Watson	Brandon	N	Y	Y	578965
West	Chism	Y	N	Y	533860
Wiker	Alex	N	N	Y	W260-012-99-323-0
Wills	Cory	N	Y	Y	560712
Yawn	Shannon	N	N	Y	Y500-785-94-
Ybarra	Edward	N	Y	Y	572358
York	Cory	Y	Y	Y	544446
Ziter	Adam	N	Y	Y	585075

Form Personnel -1

Attach additional page(s), if necessary

Department of Health

BRYAN ANTHONY ADLER

License Number: EMT582369

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT582369
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	03/24/2023
Address of Record	319 Park Drive WAUCHULA, FL 33873
Discipline on File	No
Public Complaint	No

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Department of Health

ADRIANNA M ALCANTARA

License Number: EMT570805

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT570805
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	09/11/2020
Address of Record	3808 ROLLING HILLS COURT EAST LAKE WALES, FL 33859
Discipline on File	No
Public Complaint	No

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Department of Health

ALANA SHELBY BAERT

License Number: EMT569906

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT569906
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	06/18/2020
Address of Record	250 south itasca avenue LAKE ALFRED, FL 33850
Discipline on File	No
Public Complaint	No

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Department of Health

M.SHAWN BAKER

License Number: EMT558115

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT558115
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	09/15/2017
Address of Record	3706 Dmg DR. LAKELAND, FL 33811
Discipline on File	No
Public Complaint	No

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Department of Health

AMBER L BENNETT

License Number: PMD539503

Data As Of 11/29/2023

Profession	Paramedic
License	PMD539503
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	08/16/2021
Address of Record	2051 NIGHTHAWK DR. HAINES CITY, FL 33844
Discipline on File	No
Public Complaint	No

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Department of Health

SHANE C BLANK

License Number: EMT584487

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT584487
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	08/18/2023
Address of Record	1173 SW Abingdon Ave PORT SAINT LUCIE, FL 34953
Discipline on File	No
Public Complaint	No

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Department of Health

JESSICA LYN BRANDOW

License Number: PMD539163

Data As Of 11/29/2023

Profession	Paramedic
License	PMD539163
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	06/10/2021
Address of Record	25335 Mondon Hill rd Brooksville BROOKSVILLE, FL 34601
Discipline on File	No
Public Complaint	No

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Department of Health

ELIJAH RAINE BROOKS

License Number: PMD521851

Data As Of 11/29/2023

Profession	Paramedic
License	PMD521851
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	09/06/2011
Address of Record	505 Skyline Dr. East 505 Skyline Dr East LAKELAND, FL 33801
Discipline on File	No
Public Complaint	No

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Department of Health

MAILYN CAPRI BURKES-BOYER

License Number: EMT554208

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT554208
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	10/20/2016
Address of Record	1629 Crystal Ct W Lakeland LAKELAND, FL 33801
Discipline on File	No
Public Complaint	No

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Department of Health

COLTON LANE BUTTERMORE

License Number: EMT584759

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT584759
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	09/06/2023
Address of Record	Apt. 308 10859 Glen Cove Cir ORLANDO, FL 32817
Discipline on File	No
Public Complaint	No

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Department of Health

GABRIEL PATRICK CARLSON

License Number: EMT583969

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT583969
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	07/14/2023
Address of Record	4150 Portillo rd APT 1 SPRING HILL, FL 34608
Discipline on File	No
Public Complaint	No

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Department of Health

KENDRA DANIELLE CLARIDY

License Number: EMT568534

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT568534
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	01/16/2020
Address of Record	6009 morningdale ave LAKELAND, FL 33801
Discipline on File	No
Public Complaint	No

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Department of Health

MICHAEL R COATES

License Number: PMD8859

Data As Of 11/29/2023

Profession	Paramedic
License	PMD8859
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	12/01/1986
Address of Record	****** *** CONFIDENTIAL **********
	*** CONFIDENTIAL **********
	*** CONFIDENTIAL **********
	*** CONFIDENTIAL ***, ** **********
Discipline on File	No
Public Complaint	No

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Department of Health

LINDSEY COBB

License Number: PMD544584

Data As Of 11/29/2023

Profession	Paramedic
License	PMD544584
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	11/14/2023
Address of Record	8704 Pitt Rd PLANT CITY, FL 33567
Discipline on File	No
Public Complaint	No

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Department of Health

LEAH DAMRON

License Number: PMD539177

Data As Of 11/29/2023

Profession	Paramedic
License	PMD539177
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	06/14/2021
Address of Record	4623 Cynthia Ln SPRING HILL, FL 34606
Discipline on File	No
Public Complaint	No

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Department of Health

CARLOS EMIR DE LA CRUZ

License Number: EMT578372

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT578372
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	05/02/2022
Address of Record	440 E Cheyenne Mountain Blvd Apt 27 Colorado Springs COLORADO SPRINGS, CO 80906
Discipline on File	No
Public Complaint	No

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Department of Health

KJUAN EUGENE DONALDSON

License Number: PMD542270

Data As Of 11/29/2023

Profession	Paramedic
License	PMD542270
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	10/27/2022
Address of Record	1729 Mosaic Forest dr SEFFNER, FL 33584
Discipline on File	No
Public Complaint	No

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Department of Health

CALEB LIAM DULIN

License Number: PMD534024

Data As Of 11/29/2023

Profession	Paramedic
License	PMD534024
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	09/18/2018
Address of Record	3415 king ri 3415 seffner SEFFNER, FL 33584
Discipline on File	No
Public Complaint	No

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Department of Health

NADIA ERDMANN

License Number: EMT584077

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT584077
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	07/24/2023
Address of Record	2505 Sherbrook Lane KISSIMMEE, FL 34743
Discipline on File	No
Public Complaint	No

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Department of Health

KATHARINE LYNN FERGUSON

License Number: EMT578658

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT578658
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	05/23/2022
Address of Record	9237 Canter Path Sebring SEBRING, FL 33875
Discipline on File	No
Public Complaint	No

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Department of Health

FRANK FERNANDEZ

License Number: EMT547981

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT547981
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	02/10/2015
Address of Record	3213 GRAND PINES PASS LAKELAND, FL 33810
Discipline on File	No
Public Complaint	No

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Department of Health

MICHAEL ALLEN FISHER

License Number: PMD525811

Data As Of 11/29/2023

Profession	Paramedic
License	PMD525811
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	10/02/2013
Address of Record	3861 6th avenue north St. Petersburg SAINT PETERSBURG, FL 33713
Discipline on File	No
Public Complaint	No

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Department of Health

GEORGE L GARCIA

License Number: EMT555558

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT555558
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	02/02/2017
Address of Record	1894 Elkcam Elkcam BLVD DELTONA, FL 32725
Discipline on File	No
Public Complaint	No

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Department of Health

TRINTON JAMES GIBSON

License Number: EMT584446

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT584446
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	08/16/2023
Address of Record	6817 6817 Durant Rd Plant City PLANT CITY, FL 33567
Discipline on File	No
Public Complaint	No

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Department of Health

BENJAMIN L GOODWIN

License Number: EMT576654

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT576654
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	12/14/2021
Address of Record	603 duncan cir w auburndale AUBURNDALE, FL 33823
Discipline on File	No
Public Complaint	No

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Department of Health

ZAYBREION GUNTER

License Number: EMT576489

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT576489
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	11/24/2021
Address of Record	6590 Amory Ct OCFRD- Attn EMS Admin WINTER PARK, FL 32792
Discipline on File	No
Public Complaint	No

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Department of Health

MARTIN W HAGER

License Number: EMT532109

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT532109
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	08/06/2010
Address of Record	3706 DMG Drive LAKELAND, FL 33811
Discipline on File	No
Public Complaint	No

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Department of Health

DALTON ISAAC HARRIS

License Number: PMD537739

Data As Of 11/29/2023

Profession	Paramedic
License	PMD537739
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	09/29/2020
Address of Record	902 Dunkirk Pl LAKE WALES, FL 33853
Discipline on File	No
Public Complaint	No

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Department of Health

KIMBERLY HARWELL

License Number: EMT581349

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT581349
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	01/04/2023
Address of Record	1918 Gator Creek Ranch rd LAKELAND, FL 33809
Discipline on File	No
Public Complaint	No

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Department of Health

CASSANDRA BALEE HENDRON

License Number: EMT584681

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT584681
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	08/29/2023
Address of Record	3230 xerxes ave nw WINTER HAVEN, FL 33881
Discipline on File	No
Public Complaint	No

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Department of Health

ALEX BERNARD HICKS

License Number: EMT580772

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT580772
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	10/24/2022
Address of Record	3517 San Moise Pl PLANT CITY, FL 33567
Discipline on File	No
Public Complaint	No

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Department of Health

CHRISTOPHER JAMES JACKSON

License Number: EMT582598

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT582598
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	04/10/2023
Address of Record	9262 9262 Tom Costine rd LAKELAND, FL 33809
Discipline on File	No
Public Complaint	No

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Department of Health

ANESA MICALA JOHNSON

License Number: EMT572967

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT572967
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	03/15/2021
Address of Record	3904 Golf Village Loop #8 LAKELAND, FL 33809
Discipline on File	No
Public Complaint	No

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Department of Health

JOSHUA NOEL JUARBE RIVERA

License Number: PMD542602

Data As Of 11/29/2023

Profession	Paramedic
License	PMD542602
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	01/20/2023
Address of Record	341 PRESERVE POINTE BLVD DAVENPORT, FL 33837
Discipline on File	No
Public Complaint	No

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Department of Health

NATHANIEL THOMAS LANGENKAMP

License Number: PMD542561

Data As Of 11/29/2023

Profession	Paramedic
License	PMD542561
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	01/12/2023
Address of Record	1025 south ohio avenue LAKELAND, FL 33803
Discipline on File	No
Public Complaint	No

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Department of Health

SARA MARISSA LOPEZ

License Number: EMT583583

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT583583
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	06/16/2023
Address of Record	2986 Jack Jones Rd WAUCHULA, FL 33873
Discipline on File	No
Public Complaint	No

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Department of Health

MANNY LOPEZ-ROMAN

License Number: PMD542977

Data As Of 11/29/2023

Profession	Paramedic
License	PMD542977
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	03/17/2023
Address of Record	39335 8th Avenue ZEPHYRHILLS, FL 33542
Discipline on File	No
Public Complaint	No

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Department of Health

ANGIE MARTE

License Number: EMT570102

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT570102
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	07/08/2020
Address of Record	4414 Martins Way Apt E ORLANDO, FL 32808
Discipline on File	No
Public Complaint	No

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Department of Health

NELSON C MCNULTY

License Number: PMD528893

Data As Of 11/29/2023

Profession	Paramedic
License	PMD528893
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	10/12/2015
Address of Record	18804 TRIPLE E RD CLERMONT, FL 34715
Discipline on File	No
Public Complaint	No

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Department of Health

RILEY JOSEPH MOORE

License Number: EMT585397

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT585397
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	10/12/2023
Address of Record	1119 Lumsden Trace cir VALRICO, FL 33594
Discipline on File	No
Public Complaint	No

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Department of Health

LUCIAN NEGRON

License Number: EMT583997

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT583997
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	07/17/2023
Address of Record	1375 bramblewood dr LAKELAND, FL 33811
Discipline on File	No
Public Complaint	No

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Department of Health

ANGEL L. ORTIZ ROSARIO

License Number: PMD532813

Data As Of 11/29/2023

Profession	Paramedic
License	PMD532813
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	02/07/2018
Address of Record	4725 Hardy Mills Street KISSIMMEE, FL 34758
Discipline on File	No
Public Complaint	No

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Department of Health

MARCOS ORTIZ

License Number: PMD532966

Data As Of 11/29/2023

Profession	Paramedic
License	PMD532966
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	02/26/2018
Address of Record	714 MICHIGAN COURT APT 2 SAINT CLOUD, FL 34769
Discipline on File	No
Public Complaint	No

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Department of Health

GUSTAVO CESAR OSES

License Number: EMT583884

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT583884
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	07/10/2023
Address of Record	1528 king avenue LAKELAND, FL 33803
Discipline on File	No
Public Complaint	No

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Department of Health

CODY A PEWITT

License Number: EMT569162

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT569162
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	03/02/2020
Address of Record	5217 Old Bartow Eagle Lake Rd WINTER HAVEN, FL 33880
Discipline on File	No
Public Complaint	No

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Department of Health

RONALD A POWELL

License Number: EMT21989

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT21989
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	01/19/1998
Address of Record	3706 DMG Drive LAKELAND, FL 33811
Discipline on File	No
Public Complaint	No

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Department of Health

CHRISTOPHER RAY RAMOS

License Number: EMT560120

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT560120
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	03/14/2018
Address of Record	61 929 gilmore ave LAKELAND, FL 33801
Discipline on File	No
Public Complaint	No

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Department of Health

EDUARDO JAIME SAENZ

License Number: EMT571003

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT571003
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	09/28/2020
Address of Record	4210 SABAL PALM DR MULBERRY, FL 33860
Discipline on File	No
Public Complaint	No

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Department of Health

AUSTIN N RYAN

License Number: PMD538330

Data As Of 11/29/2023

Profession	Paramedic
License	PMD538330
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	01/12/2021
Address of Record	5179 lake deeson woods ctr LAKELAND, FL 33805
Discipline on File	No
Public Complaint	No

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Department of Health

MICHAEL RUSHING

License Number: EMT580998

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT580998
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	11/17/2022
Address of Record	10019 Courtney Palms Blvd Unit 202 TAMPA, FL 33619
Discipline on File	No
Public Complaint	No

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Department of Health

JONATHAN RODRIGUEZ

License Number: EMT550470

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT550470
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	10/06/2015
Address of Record	3706 DMG DR LAKELAND, FL 33811
Discipline on File	No
Public Complaint	No

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Department of Health

JUSTIN RHONE A

License Number: EMT553227

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT553227
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	07/14/2016
Address of Record	3025 Barnhard Dr. APT 213 RIVERVIEW, FL 33569
Discipline on File	No
Public Complaint	No

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Department of Health

ANTHONY VELASQUEZ-LUNA

License Number: EMT553708

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT553708
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	08/31/2016
Address of Record	326 gretna lane WINTER HAVEN, FL 33880
Discipline on File	No
Public Complaint	No

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Department of Health

JOSE VAZQUEZ JR

License Number: PMD18829

Data As Of 11/29/2023

Profession	Paramedic
License	PMD18829
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	05/06/1999
Address of Record	OPS-EMS Section 6590 Amory Court WINTER PARK, FL 32792
Discipline on File	No
Public Complaint	No

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Department of Health

MATTHEW EVY TOMPKINS

License Number: EMT545452

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT545452
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	04/09/2014
Address of Record	9001 Scales Rd Lakeland LAKELAND, FL 33810
Discipline on File	No
Public Complaint	No

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Department of Health

JENNA THRUSH

License Number: EMT581935

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT581935
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	02/15/2023
Address of Record	624 flamingo drive LAKELAND, FL 33803
Discipline on File	No
Public Complaint	No

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Department of Health

JASON E THOMAS

License Number: PMD520881

Data As Of 11/29/2023

Profession	Paramedic
License	PMD520881
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	03/11/2011
Address of Record	3706 Dmg Dr LAKELAND, FL 33811
Discipline on File	No
Public Complaint	No

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Department of Health

JUSTIN K TENNIS

License Number: EMT567008

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT567008
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	09/16/2019
Address of Record	423 Pablo st LAKELAND, FL 33803
Discipline on File	No
Public Complaint	No

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Department of Health

LOGAN PRINCE TEDANA

License Number: EMT550599

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT550599
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	10/15/2015
Address of Record	3706 DMG Dr. LAKELAND, FL 33811
Discipline on File	No
Public Complaint	No

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Department of Health

JOHN-WESLEY DALTON STORY

License Number: EMT563842

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT563842
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	01/30/2019
Address of Record	857 857 lone pine rd BABSON PARK, FL 33827
Discipline on File	No
Public Complaint	No

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Department of Health

LYNSY SNAPP

License Number: EMT577432

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT577432
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	02/08/2022
Address of Record	1611 lakewood rd LAKELAND, FL 33805
Discipline on File	No
Public Complaint	No

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Department of Health

BAILEY M SHAW

License Number: PMD543254

Data As Of 11/29/2023

Profession	Paramedic
License	PMD543254
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	05/04/2023
Address of Record	4218 Rushing RD. LAKELAND, FL 33810
Discipline on File	No
Public Complaint	No

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Department of Health

BRYAN ANTHONY SERRANO RIVERA

License Number: PMD537345

Data As Of 11/29/2023

Profession	Paramedic
License	PMD537345
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	07/27/2020
Address of Record	1063 Demetree Ln LAKELAND, FL 33811
Discipline on File	No
Public Complaint	No

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Department of Health

SARAH NICOLE SARGENT

License Number: EMT546458

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT546458
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	07/23/2014
Address of Record	3706 DMG drive LAKELAND, FL 33811
Discipline on File	No
Public Complaint	No

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Department of Health

JOSE RAFAEL SANTIAGO SABALIER

License Number: PMD532865

Data As Of 11/29/2023

Profession	Paramedic
License	PMD532865
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	02/09/2018
Address of Record	2609 E civitan ave LAKELAND, FL 33801
Discipline on File	No
Public Complaint	No

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Department of Health

WILLIAM SANABRIA JR

License Number: PMD518665

Data As Of 11/29/2023

Profession	Paramedic
License	PMD518665
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	02/11/2010
Address of Record	4084 Festival Pointe Blvd Mulberry MULBERRY, FL 33860
Discipline on File	No
Public Complaint	No

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Department of Health

CORY ALTON YORK

License Number: PMD544446

Data As Of 11/29/2023

Profession	Paramedic
License	PMD544446
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	10/19/2023
Address of Record	13215 Jess Walden Rd DOVER, FL 33527
Discipline on File	No
Public Complaint	No

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Department of Health

EDWARD I YBARRA

License Number: EMT572358

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT572358
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	01/25/2021
Address of Record	904 lake Deeson point LAKELAND, FL 33805
Discipline on File	No
Public Complaint	No

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Department of Health

COREY LEONARD WILLS

License Number: EMT560712

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT560712
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	05/30/2018
Address of Record	754 Ave N SE WINTER HAVEN, FL 33880
Discipline on File	No
Public Complaint	No

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Department of Health

CHISM CORTELYOU WEST

License Number: PMD533860

Data As Of 11/29/2023

Profession	Paramedic
License	PMD533860
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	08/30/2018
Address of Record	13220 13220 Wellington Hills D Riverview RIVERVIEW, FL 33579
Discipline on File	No
Public Complaint	No

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Department of Health

BRANDEN WATSON

License Number: EMT578965

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT578965
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	06/09/2022
Address of Record	2100 SE Salerno Rd PORT ST. LUCIE, FL 34997
Discipline on File	No
Public Complaint	No

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Department of Health

ADAM MICHAEL ZITER

License Number: EMT585075

Data As Of 11/29/2023

Profession	Emergency Medical Technician
License	EMT585075
License Status	CLEAR/ACTIVE
License Expiration Date	12/1/2024
License Original Issue Date	09/19/2023
Address of Record	2421 Timberlane South Apt. B LAKELAND, FL 33801
Discipline on File	No
Public Complaint	No

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Affordable Transport, Inc.

Item #10a

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
FM6807367	01-31-2026	$888

SCHEDULES	BUSINESS ACTIVITY	ISSUE DATE
2,2N,3, 3N,4,5	PRACTITIONER	01-05-2023

MBAKWEM, ALEXANDER C, MD
3706 DMG DR
LAKELAND, FL 338111043

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON D.C. 20537

Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON D.C. 20537

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
FM6807367	01-31-2026	$888

SCHEDULES	BUSINESS ACTIVITY	ISSUE DATE
2,2N,3, 3N,4,5	PRACTITIONER	01-05-2023

MBAKWEM, ALEXANDER C, MD
3706 DMG DR
LAKELAND, FL 338111043

Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

Form DEA-223 (9/2016)

ATI Ambulance

8-3-2023

Medical Director Service Agreement

This agreement is for Medical Director services and supervision between Affordable Transport Inc. (ATI), Lakeland, Fl and Alexander Mbakwem M.D. (Dr. Mbakwem) an Internal Medicine Specialist located in Lakeland, Fl.

Whereas Affordable Transport Inc is in the business of providing both ALS and BLS EMS services in Polk County along with neighboring counties and requires the services and supervision of a medical supervisor to provide oversight and direction to the services it provides and Dr. Mbakwem is a medical doctor in Polk County with knowledge and interest in providing the services and oversight that ATI requires, the parties agree to the following;

Dr. Mbakwem shall provide Medical Director services to ATI on an ongoing basis with an effective date beginning May 1st 2016. This agreement shall automatically renew unless either party terminates this agreement with 90 days notice prior to the renewal date. This agreement shall terminate sooner should either ATI lose its ALS or BLS certification or Dr. Mbakwem loses his MD status.

Medical Director shall be board certified and active in a broad based clinical medical specialty with demonstrated experience in prehospital care and hold an ACLS certificate or equivalent as determined in Chapter 64J-1.022, F.A.C. Prehospital care experience shall be documented by the provider.

Medical Director shall maintain his own liability insurance.

Medical Director shall receive $6000 per year for his services to ATI and paid on a monthly basis.

Duties and responsibilities of the Medical Director

Medical Director shall assist with development, review and approve medically correct standing orders and protocols for the provision of both ALS and BLS transportation by ATI EMS staff.

Such ALS and BLS procedures are to be used for routine transports and when communication cannot be established with a supervising physician or when any delay

ATI Ambulance

in patient care would potentially threaten the life of health of the patient. The Medical Director shall issue standing orders and protocols to the provider to ensure that the provider transports each of its patients to facilities that offer a type and level of care appropriate to the patient's medical condition if available within the service region. The medical director or his appointee shall provide continuous 24-hour-per-day, 7-day-per-week medical direction which shall include in addition to the development of protocols and standing orders, direction to personnel of the provider as to availability of medical direction "off-line" service to resolve problems, system conflicts, and provide services in an emergency as that term is defined by Section 252.34(3), F.S.

Medical Director shall assist in the development and implementation of a patient care quality assurance system to assess the medical performance of paramedics and EMTs. This shall include at least a quarterly audit of 3%-5% of the ALS and BLS transports and performance by EMS staff by the Medical Director. The quality assurance program is not limited to audits but may also include a more prompt review of patient care records, direct observation, and comparison of performance standards for equipment, system protocols and procedures. The Medical Director shall be responsible for participating in quality assurance programs developed by ATI.

Medical Director shall meet with ATI management on not less than a quarterly basis to review and provide feedback and direction on ATI transport performance, training programs and personnel.

Medical Director shall provide feedback of his audits to ATI with recommended changes, training needs, procedure modifications and other observations and suggestion to ensure ATI: a) provides safe services which meet the state standards for ALS and BLS transports, b) maintains up to date standards and protocols based on current medical practices and c) provides proper training to both its ALS and BLS staff to ensure safe patient transport.

Medical Director shall work with ATI to establish written protocols for the performance of the following and as warranted shall provide written evidence of review and compliance to ensure that the paramedics and EMTs are trained to properly perform the use of all ALS and BLS equipment utilized during the treatment

ATI Ambulance

and transport of patients, the appropriate use of medications as per ATI protocols, performance of airway patency techniques including endotracheal intubation, and on routine interfacility transports the monitoring and maintenance of medication drips as well as non-medicated IV fluid infusions by both paramedics and EMTs.

Upon signing the effective date is as shown above.

Alexander Mbakwem, M.D.

Richard Jensen, President ATI

AC#11433792

STATE OF FLORIDA
DEPARTMENT OF HEALTH
DIVISION OF MEDICAL QUALITY ASSURANCE

DATE	LICENSE NO.	CONTROL NO.
01/21/2023	ME 92808	840002

THE MEDICAL DOCTOR

NAMED BELOW HAS MET ALL REQUIREMENTS OF
THE LAWS AND RULES OF THE STATE OF FLORIDA.

Expiration Date: **JANUARY 31, 2025**
ALEXANDER CHIBUZO MBAKWEM, MD
1629 LAKELAND HILLS BOULEVARD
LAKELAND, FL - 33805

Ron DeSantis
GOVERNOR

Joseph A. Ladapo, MD, PhD
State Surgeon General

DISPLAY IF REQUIRED BY LAW

Affordable Transport, Inc.

Item #10b

ATI service the counties of; Highlands, Polk, Orange, Osceola, Hardee, Seminole

Affordable Transport, Inc.

Additional Requirements

1. Attach letter of any investigation or formal disciplinary action involving your agency by the Florida Department of Health, or any local, state, or federal agency.

ATI has no disciplinary actions standing against the company or any individuals working for the company.

2. The financial ability of the applicant to provide the proposed services based on, at minimum, attach the following criteria:

a. Audited financial statements or federal tax returns or, for newly formed corporations, personal audited financial statements from the principal(s), as defined by the county administrator.

ATI is a privately held company and as such has no audited financial statements

b. Pro forma statements.

ATI has no proforma statements, however the expected capital goals/expenditures for 2024 includes the following:

- Acquire 3 additional new vehicles for services in Highlands and Orange Counties
- Re-open Highlands County Operations Sub-Station in coordination with new contracts with Advent (secondary services contract), HCA and/or multiple facility (SNF/ALF) contracts
- Continued replacement of Ventilators and IV Pumps
- Estimated budget costs $500,000

c. Credit and bank references, and current official credit report.

Bank and Accountant reference letters attached as 2.a and 2.b

ATI does not have any credit ratings/reports

d. Disclosure of any and all pending liabilities.

ATI has no outstanding WC claims and recently was audited by it's carrier (Zenith) without any recommendations (see attached)

ATI has no outstanding claims for vehicle accidents or professional liability. The last exposure/claims occurred where in early 2021. These were fully covered by insurance.

TheZenith®
A FAIRFAX Company

SAFETY AND HEALTH SERVICE

November 28, 2023

Richard Jensen, Owner
Affordable Transport, Inc.
3706 DMG Dr
Lakeland, FL 33811
rjensen@ATIambulance.net

Zenith Safety & Health Service: November 21, 2023
Policy #: Z137424502, Z137424503 (January 10, 2023 - January 10, 2024)
Agency: McGriff Insurance Services, Inc. - St Petersburg

Dear Mr. Jensen,

This letter summarizes my recent service provided on November 14, 2023 to evaluate current efforts to prevent strains and sprains from patient handling and injuries from motor vehicle accidents (MVA) since these have led in workplace injuries over the past three years based on Zenith Insurance Worker's Compensation injury data, including the most recent injury involving a MVA. The follow up email was to provide additional resources on preventing strains and sprains during patient handling. Providing this service will assist in preventing workplace injuries from personnel assisting patients, and from motor vehicle accidents. Please extend my thanks to Mr. Daniel Perez, Operations Manager, and Ms. Teresa Hall, Manager, for the time and courtesy provided.

We reviewed protocols for assisting patients during transfers including assistance when patients are transferred to second floors in residences. It is good to hear that all stretchers have been switched to auto assist systems and each vehicle is equipped with a stair chair to transfer patients upstairs as well as preplanning to properly assign personnel to assist with patient transfers.

We reviewed a recent incident involving one of your vehicles that was stopped at a light when they were rear ended. The employee in the back was not properly secured and was coached on use of the waist and shoulder belt system for the rear seat.

The resources provided on safely assisting patients during ambulatory care are just an example of the many safety and health and even claim management resources available through the Zenith Solution Center.

Your ongoing efforts to prevent musculoskeletal injuries from assisting patients and for preventing MVA appear satisfactory. I did not have any recommendations based on the service provided. I also thank you for addressing the prior recommendation.

I also requested access for Ms. Hall to the MyZenith Portal that includes the Zenith Solution Center. She is now able to access Zenith Workers' Compensation claims data and the wealth of resources on the Zenith Solution Center. A topic of interest for Mr. Perez and Ms. Hall was Bloodborne Pathogen training which can also be found in the ZSC.

TheZenith®
A FAIRFAX Company

Recommendations

New

There are no new recommendations from this visit

Completed Since Last Visit

Number		Completion Date
2022-7-1	**Vehicle Fueling - Close Driver Door After opening fuel door**	09/02/2022
	Several incidents have occurred from the driver door left open and closing on the driver's hand while fueling. Coach team members to open the fuel door and then close the driver side door while fueling to prevent the driver side door from closing due to wind or other unforeseen forces.	

Outstanding

There are no outstanding recommendations

My next service date will be in the May/June 2024 timeframe to continue evaluating patient handling practices to prevent strains and sprains from this activity and MVA prevention and control efforts since these have led in injury frequency and severity based on Zenith Insurance Workers' Compensation Claims Data. Performing these services may help to prevent injuries from assisting patients and from MVAs, and therefore may help to reduce future insurance costs. If you have any questions or comments, please do not hesitate to contact me at (407) 492-8701, via email at abrioso@thezenith.com.

Sincerely,

Alberto Brioso

Alberto Brioso, MS, CIH, CSP, CPE, ARM
Safety & Health Technical Specialist
Phone: 4074928701
abrioso@thezenith.com

CC:
Stephanie Grosso, McGriff Insurance Services, Inc. - St Petersburg, SGrosso@mcgriff.com
Daniel Perez, Operations Manager, Affordable Transport, Inc., dperez@affordabletransport.net
Teresa Hall, Manager, Affordable Transport, Inc., thall@affordabletransport.net

Zenith Insurance Company (Zenith) assists employers in evaluating workplace safety exposures. Surveys and related services may not reveal every hazard, exposure and/or violation of safety practices. Inspections by Zenith do not result in any warranty that the workplace, operations, machinery, appliances or equipment are safe or in compliance with applicable regulations. Any recommendations and related services are not and should not be construed as legal advice or be used as a substitute for legal advice. Employee protection is ultimately the responsibility of the employer. Policy coverage is not contingent upon the provision, efficacy or sufficiency of these services.

Affordable Transport, Inc.

ATI 2024 Management Key Objectives (bullet points only for Highlands COPCN – public record)

Operations:

- **Improve current trips/crew/shift ratios**
- **12 added PMD**
- **20 added EMT**
- **Implement AI support for coding/billing/QA dept.**
- **Review employee benefit options**
- **Re-open substation – Highlands county – timing determined by contracts**

Equipment:

- **3 additional vehicles to fleet (12 new vehicles split between Polk/Highlands/Orange)**
- **Review and replace vents and IV pumps**

Market Growth

- **New markets – Undisclosed**
- **Contracting opportunities - Undisclosed**

HIGHLANDS COUNTY FIRE RESCUE

COPCN ALS AIR AMBULANCE VEHICLES

Name of Service: NA - NO AIR SERVICE Date: _____

FAA #	Manufacturer Name	MFR Year/Model	Serial #	State ALS Permit #

AFFIDAVIT OF PUBLICATION

Highlands News Sun

Published Daily

Sebring, Highlands County, Florida

Case No. Affordable Transport Inc

STATE OF FLORIDA
COUNTY OF HIGHLANDS

Before the undersigned authority, Janet Emerson, personally appeared who on oath says that she is the Classified Advertising Legal Clerk of Highlands News Sun, a newspaper published at Sebring in Highlands County, Florida; that the attached copy or reprint of the advertisement, to the right, being a Public Notice, was published in said newspaper by print in the issues of or by publication on the newspaper's website, if authorized, on:

January 07, 2024

Affiant further says that the Highlands News Sun newspaper complies with all legal requirements for publication in chapter 50, Florida Statutes.
SIGNED:

Janet Emerson

Sworn to and subscribed before me this 7th day of January 2024 by Janet Emerson, who is personally known to me.

Nancy Y Whirley, Customer Service Supervisor, Notary Number: HH 293555
Notary expires: July 26, 2026

NANCY Y. WHIRLEY
Notary Public
State of Florida
Comm# HH293555
Expires 7/26/2026

00035703 00146116

HIGHLANDS COUNTY FIRE RESCUE
4506 KENILWORTH BLVD
SEBRING, FL 33870

NOTICE OF PUBLIC HEARING TO CONSIDER ISSUANCE OF CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY NOTICE IS HEREBY GIVEN TO WHOM IT MAY CONCERN:

Notice is hereby given that the Highlands County Board of County Commissioners will hold a public hearing to consider the issuance of a Certificate of Public Convenience and Necessity described below, on February 6, 2024, at 9:00 a.m. or as soon thereafter as possible, in the Board Room of the County Commission Building, 600 Commerce Avenue, Sebring, Florida.

Highlands County Fire Rescue has received from AFFORDABLE TRANSPORT, INC., a registered Florida corporation and licensed EMS service provider by the State of Florida Department of Health, an application for renewal of their Certificate of Public Convenience and Necessity (COPCN) to allow such services as are considered Class I nonemergency medical transport pursuant to Section 5-55 of the Code of Ordinances, Highlands County, Florida. The Class I nonemergency medical transport encompasses providing nonemergency transport services to persons who are confined to stretcher and/or wheelchair and whose condition is such that these persons do not need and are not likely to need basic life support or advanced life support during transport. The Class 2 Basic Life Support Ambulance class of service encompasses providing basic life support services on inter-facility transports. The Class 3 Advanced Life Support Ambulance encompasses providing advanced life support services on inter-facility transports. Both classes of service may at the owner's requested transport points be to a medical facility and may render on scene assistance to patients prior to transport. The applicant intends to serve the geographical area of Highlands County, Florida, including all incorporated areas within that County.

A copy of this notice is available for public inspection during regular business hours in the office of the Clerk of the Board of County Commissioners at the Highlands County Government Center, 590 South Commerce Avenue, Sebring, Florida 33870. The application and further information on the application may be inspected by the public at the Highlands County Fire Rescue, 4506 Kenilworth Boulevard, Sebring, Florida 33870, between the hours of 8:00 A.M. and 5:00 P.M. Monday through Friday, except holidays. Inquiries or written testimony should be directed to Dustin Feck, Interim Deputy Chief, at that address or by phone at (863) 402-6630. Photocopies may be obtained at that location for fifteen cents ($0.15) per page, single sided, and twenty cents ($0.20) per page, double sided.

All interested persons may appear and be heard at the time and place specified above.

Any person who might wish to appeal any decision made by the Board of County Commissioners of Highlands County, Florida, in public hearing or meeting is hereby advised that he or she will need a record of the proceedings, and for such purpose, he or she may need to ensure that a verbatim record of the proceedings is made which will include the testimony and evidence upon which such appeal is to be based.

The Board of County Commissioners of Highlands County, Florida, does not discriminate upon the basis of any individual's disability status. This nondiscriminatory policy involves every aspect of the Board's functions, including one's access to, participation, employment or treatment in its programs or activities. Anyone requiring reasonable accommodation as provided for in the Americans with Disabilities Act or Section 286.26, Florida Statutes, should contact Sherri Bennett, ADA Coordinator, at (863) 402-6509 (voice), 863-402-6508 (TTY), or via Florida Relay Service 711, or by e-mail: HRBoard@highlandsfl.gov. Requests for CART or interpreter services should be made at least 24 hours in advance to permit coordination of the service.

BOARD OF COUNTY COMMISSIONERS
OF HIGHLANDS COUNTY, FLORIDA
By: Kevin Roberts, Chair
ATTEST:
Jerome Kaszubowski, Clerk
Jan. 7, 2024

Client#: 1903262 569AFFORTRA

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/23/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME: Blair Houtas
McGriff Insurance Services LLC 12485 28th Street N St Petersburg, FL 33716 727 823-5551	PHONE (A/C, No, Ext): 727 803-8116 FAX (A/C, No): E-MAIL ADDRESS: Blair.Houtas@mcgriff.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Landmark American Insurance Co	33138
INSURER B : Zenith Insurance Company	13269
INSURER C : National Interstate Ins. Co.	32620
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Affordable Transport Inc.
3706 DMG Drive
Lakeland, FL 33811-1043

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY			LHC801156	02/10/2023	02/10/2024	EACH OCCURRENCE	$2,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$50,000
	X $25,000 per Claim						MED EXP (Any one person)	$5,000
	Deductible						PERSONAL & ADV INJURY	$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$5,000,000
	POLICY PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$2,000,000
	OTHER:							$
C	AUTOMOBILE LIABILITY			AAL000003607	02/10/2023	02/10/2024	COMBINED SINGLE LIMIT (Ea accident)	$1,000,000
	ANY AUTO						BODILY INJURY (Per person)	$
	X OWNED AUTOS ONLY SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	$
	DED RETENTION $							$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			Z137424504	01/10/2024	01/10/2025	X PER STATUTE OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N: Y	N / A					E.L. EACH ACCIDENT	$1,000,000
	(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$1,000,000
							E.L. DISEASE - POLICY LIMIT	$1,000,000
A	*Professional			LHC801156	02/10/2023	02/10/2024	$2,000,000/$5,000,000	
A	*Abuse			LHC801156	02/10/2023	02/10/2024	$1,000,000/$1,000,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

*Professional Liability and Abuse Liability coverage is on a Claims Made Basis.
Highlands County BOCC is included as Additional Insured in accordance with the policy provisions of the General Liability and Auto Liability policies as required by written contract.
30 Days Notice of Cancellation except 10 Days for Non-Payment.

CERTIFICATE HOLDER

Highlands County BOCC
600 South Commerce
Sebring, FL 33870

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



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HIGHLANDS COUNTY BOARD OF COUNTY COMMISSIONERS
CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY

WHEREAS, *Affordable Transportation Inc* applied for a Class 1 Nonemergency Medical Transportation licensure I Highlands County to provide nonemergency medical transport to the citizens of the county who are confined to stretchers and wheelchairs and whose condition is such that these persons do not need nor are likely to need, immediate medical attention during transport: and

WHEREAS, *Affordable Transportation Inc,* has met all the requirements of Sections 5-52 thru 5-59 of the Code of Ordinances, Highlands County, Florida; and

WHEREAS, *Affordable Transportation Inc*, has indicated that they will comply with all the requirements of Chapter 5 of the Code of Ordinances, Highlands County, Florida, that pertain to the class of service licensed, and will offer twenty-four-hour service to all of Highlands County.

NOW, THEREFORE, the Board of County Commissioners of Highlands County, Florida, does hereby issue a license to *Affordable Transportation Inc*, for Class 1 Nonemergency Medical Transport for a period of two years.

This license is effective January 7, 2024, and will expire January 7, 2026, unless earlier revoked by the Board of County Commissioners.

Attest: _____
Jerome Kaszubowski, Clerk of Courts
Highlands County Florida

_____
Kevin Roberts, Chairman, Board of County Commissioners

Date: January 7, 2024

HIGHLANDS COUNTY BOARD OF COUNTY COMMISSIONERS

CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY

WHEREAS, *Affordable Transportation Inc.* applied for a Class 2 Basic Life Support Ambulance and Class 3 Advanced Life Support Ambulance certificate of public convenience and necessity to provide Advanced Life Support interfacility transfers and, at the County's request, transport patients to a medical facility; and

WHEREAS, *Affordable Transportation Inc.,* has met all the requirements of Sections 5-52 thru 5-59 of the Code of Ordinances, Highlands County, Florida; and

WHEREAS, *Affordable Transportation Inc.*, has stated that it will provide twenty-four hour service to all of the geographic areas of Highlands County, will continue to comply with all the requirements of Florida law, Part III of Chapter 401, Florida Statutes, Chapter 64J-1, Florida Administrative Code, the Code of Ordinances, Highlands County, Florida, and the requirements of any other state and federal agencies regulating emergency medical transportation services.

NOW, THEREFORE, the Board of County Commissioners of Highlands County, Florida, does hereby issue this Certificate of Public Convenience and Necessity to *Affordable Transportation Inc.*, for Class 2 Basic Life Support Ambulance and Class 3 Advanced Life Support Ambulance pursuant to the terms, conditions, and limitations of Chapter 5 of the Code of Ordinances, Highlands County, Florida, for the remaining period of that Certificate of Public Convenience and Necessity as set forth herein, subject to and conditioned upon the following requirements:

(1) *Affordable Transportation Inc.,* complies with all requirements of Florida law, Part III of Ch. 401, Florida Statutes, Chapter 64J-1, Florida Administrative Code, the Code of Ordinances, Highlands County, Florida, and the requirements of any other state or federal agencies regulating emergency medical transportation services.

(2) By acceptance of this certificate, *Affordable Transportation Inc.*, agrees to indemnify the County and its elected officials, officers, employees, agents, and insurers, for all claims and losses arising out of the operations of *Affordable Transportation Inc.* specifically including, but not limited to, all claims and losses arising out of, resulting from or related to employment, by *Affordable Transportation Inc.,* of off-duty full-time or part-time employees of the County.

(3) *Affordable Transportation Inc.* satisfies its obligations stated in Section 5-58(c) of the Code of Ordinances, Highlands County, Florida, which are included herein by this reference.

(4) *Affordable Transportation Inc.,* is authorized to provide only Advanced Life Support interfacility transfers between facilities described in Section 5-51 of the Code of Ordinances, Highlands County, Florida, and, at the County's request, transport patients to a medical facility subject to the terms, conditions, and limitations of Licensure by the State of Florida, and Divisions 1 and 2 of Article IV of Chapter 5 of the Code of Ordinances, Highlands County, Florida.

(5) *Affordable Transportation Inc.* shall provide the services herein authorized twenty-four hours each day to all geographic areas of Highlands County.

(6) This Certificate of Public Convenience and Necessity is effective December 21, 2023 and will expire December 21, 2025, unless earlier revoked by the Board of County Commissioners.

Attest: _____
Jerome Kaszubowski, Clerk of Courts, Highlands County Florida

_____
Kevin Roberts, Chairman, Board of County Commissioners

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER: **Dustin Fitch, Interim Deputy Chief**

SUBJECT/TITLE: **Public Hearing to consider approval of Atlantic Palm Beach, Inc. d/b/a AMR application for a Class 1, Class 2 and 3 Certificate of Public Convenience and Necessity (COPCN).**

STATEMENT OF ISSUE

Atlantic Palm Beach, Inc. d/b/a AMR submitted a new application of COPCN Class 1 - Non-Emergency Medical Transportation, Class 2 -Basic Life Support Ambulance and Class 3 -Advanced Life Support Ambulance application to Highlands County EMS on December 18, 2023. The application was found complete and was publicly noticed on December 23, 2023, pursuant to Section 5-56(b) of the Code of Ordinances, Highlands County, Florida.

RECOMMENDED ACTION

Move to approve Atlantic Palm Beach, Inc. d/b/a AMR application for a Class 1, Class 2 and 3 Certificate of Public Convenience and Necessity (COPCN).

FISCAL IMPACT

There is no fiscal impact.

Attachments: Application.pdf
notice AMR.pdf
COPCN - Class 1.pdf
COPCN - Class 2 & 3 -.pdf

Highlands County Fire Rescue

CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY
NON-GOVERNMENTAL ENTITY
MEDICAL TRANSPORTATION SERVICE LICENSE APPLICATION

Please type. Answer all questions that apply to the level of service to be provided. Attach additional sheets as needed.

STATEMENTS AND MATERIALS SUBMITTED WILL BE SUBJECT TO VERIFICATION

CHECK TYPE OF APPLICATION FOR CLASSIFICATION OF SERVICE

☐ New ☑ Renewal

■ Class 1 (NEMT) ■ Class 2 (BLS) ■ Class 3 (ALS) ☐ Class 4 (Air)

Atlantic Palm Beach Ambulance, Inc. d/b/a AMR
Name of Service

1105 Barnett Drive Ste C | Lake Worth | FL | 33461
Mailing Address | City | State | Zip Code

888-624-1900
Telephone

1. Private | yaima.acosta@gmr.net
Owner's Name | Email Address

1105 Barnett Drive Ste C | Lake Worth | FL | 33461
Mailing Address | City | State | Zip Code

(Attach names of elected officials associated with your service)

2. Yaima Acosta | 407-868-0928 | yaima.acosta@gmr.net
General Manager/Contact Person | Telephone | Email Address

3. Date incorporated/formation of business association: 03/31/1992 (Attachment # 1)

(Attach articles of incorporation; names and address of shareholders along with number of outstanding shares.)

Additional pages may be added as needed

Highlands County Fire Rescue

4. Attach FCC license/communications contract: (Attachment #2_____)

5. Address of present/proposed main station and any substations (attach list if more than three substations):

   Main Station: 1105 Barnett Drive Ste C Lake Worth, FL 33461

   Substation: _____

   Substation: _____

   Substation: _____

6. Financial Information: (Attachment #3_____)

   Provide a financial statement as listed in Highlands County Code of Ordinances Section 5-56.

7. Insurance: (Attachment #4_____)

   Provide copies of Certificates of Insurance as listed in Highlands County Code of Ordinances Section 5-52.

8. Vehicle information: Complete and attach appropriate form.

9. Personnel information: Complete and attach appropriate form.

10. All COPCN applicants:

    A. Attach contract with a medical director as provided by State Law and include copy of DEA license (Class 2, 3, and 4 applicants only).

    B. Statement describing geographical area served by your company.

    C. Statement of facts and data describing the need for your service in Highlands County.

    D. Schedule of proposed fees to be charged for your service.

    E. Identify staffing patterns and operational hours for each permitted vehicle in your fleet.

Highlands County Fire Rescue

COPCN MANAGEMENT INFORMATION FORM

Name of service: Atlantic Palm Beach Ambulance Inc.d/b/a AMR

Website address: _____

Highlands County business address:

_____

City and Zip Code: _____

Headquarters business address:
1105 Barnett Drive Ste C

City and Zip Code: Lake Worth 33461

Dispatch telephone number: 888-624-1900

Management Contact Information

Name: Yaima Acosta

24-hour contact number: 407-868-0928

Name: Angela McCue-Carreras

24-hour contact number: 954-304-7823

Highlands County Fire Rescue

Yaima Acosta — Director of Operations
Signature of Owner/Manager — Title

STATE OF FLORIDA
COUNTY OF ORANGE

Sworn to (or affirmed) and subscribed before me this 14th day of December, 20 23, by

Yaima Acosta (name of person making statement).

Jerae A. Blanton
(Signature of Notary Public - State of Florida)

Seal

JERAE ANTOINETTE BLANTON
Notary Public - State of Florida
Commission # HH 266439
My Comm. Expires May 22, 2026
Bonded through National Notary Assn.

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known: [X] OR Produced Identification [ ]

Type of Identification Produced: _____



Detail by Entity Name

Foreign Profit Corporation
ATLANTIC/PALM BEACH AMBULANCE, INC.

Filing Information

Document Number	P38131
FEI/EIN Number	33-0506808
Date Filed	03/31/1992
State	DE
Status	ACTIVE
Last Event	REINSTATEMENT
Event Date Filed	12/08/2000

Principal Address

6363 S. FIDDLER'S GREEN CIRCLE
SUITE 1400
GREENWOOD VILLAGE, CO 80111

Changed: 02/27/2020

Mailing Address

6363 S. FIDDLER'S GREEN CIRCLE
SUITE 1400
GREENWOOD VILLAGE, CO 80111

Changed: 02/27/2020

Registered Agent Name & Address

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

Name Changed: 03/14/2006

Address Changed: 03/14/2006

Officer/Director Detail

Name & Address

Title SENIOR VICE PRESIDENT, CHIEF MEDICAL OFFICER

RACHT, ED
6363 S. FIDDLER'S GREEN CIRCLE
SUITE 1400
GREENWOOD VILLAGE, CO 80111

Title PRESIDENT, CEO, COO

VAN HORNE, EDWARD B.
6363 S. FIDDLER'S GREEN CIRCLE
SUITE 1400
GREENWOOD VILLAGE, CO 80111

Title SENIOR VICE PRESIDENT OF REVENUE MANAGEMENT

THOMAS, ERIC J.
209 STATE HIGHWAY 121 BYPASS
SUITE 21
LEWISVILLE, TX 75067

Title VICE PRESIDENT - TAX

METCALF, KARL
6363 S. FIDDLER'S GREEN CIRCLE
SUITE 1400
GREENWOOD VILLAGE, CO 80111

Title SENIOR VICE PRESIDENT, CHIEF HUMAN RESOURCE OFFICER

JACOBA, LISA
6363 S. FIDDLER'S GREEN CIRCLE
SUITE 1400
GREENWOOD VILLAGE, CO 80111

Title EXECUTIVE VICE PRESIDENT, CFO, CAO, ASSISTANT SECRETARY, DIRECTOR

PREISSLER, MICHAEL
209 STATE HIGHWAY 121 BYPASS
SUITE 21
LEWISVILLE, TX 75067

Title SENIOR VICE PRESIDENT, CIO

TULEY, SEAN
6363 S. FIDDLER'S GREEN CIRCLE
SUITE 1400
GREENWOOD VILLAGE, CO 80111

Title EXECUTIVE VICE PRESIDENT, GENERAL COUNSEL, SECRETARY

COOK, THOMAS A.A.
1001 BOARDWALK SPRINGS PLACE
SUITE 250

O'FALLON, MO 63368

Title SVP, CHIEF COMPLIANCE OFFICER

MARDOSZ, JENNIFER
6363 S. FIDDLER'S GREEN CIRCLE
SUITE 1400
GREENWOOD VILLAGE, CO 80111

Annual Reports

Report Year	Filed Date
2021	04/17/2021
2022	04/23/2022
2023	03/01/2023

Document Images

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05/11/1998 -- ANNUAL REPORT	View image in PDF format

03/17/1997 -- ANNUAL REPORT	View image in PDF format

A Global Medical Response Solution

RADIO COMMUNICATIONS:

FROM VEHICLES:	Via Medical Radios
	UHF Frequencies (State)
	Via Cellular Phones-All facilities
FROM BASE STATION:	Via Medical Radios
	UHF Frequencies (State)
	Via Cellular Phones-All facilities

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Federal Communications Commission
Public Safety and Homeland Security Bureau

RADIO STATION AUTHORIZATION

LICENSEE: AMERICAN MEDICAL RESPONSE, INC.

ATTN: JEFFREY MARANI
AMERICAN MEDICAL RESPONSE, INC.
6200 SOUTH SYRACUSE WAY, SUITE 200
GREENWOOD VILLAGE, CO 80111

Call Sign	File Number
WPMH479	0010542112

Radio Service
PW - Public Safety Pool, Conventional

Regulatory Status
PMRS

Frequency Coordination Number

FCC Registration Number (FRN): 0004896650

Grant Date	Effective Date	Expiration Date	Print Date
05-13-2023	05-13-2023	07-28-2033	05-13-2023

STATION TECHNICAL SPECIFICATIONS

Fixed Location Address or Mobile Area of Operation

Loc. 1 **Address:** 5109 Carder Rd.
City: ORLANDO **County:** ORANGE **State:** FL
Lat (NAD83): 28-36-21.2 N **Long (NAD83):** 081-25-04.3 W **ASR No.:** 1244200 **Ground Elev:** 28.9

Loc. 2 **Area of operation**
Operating within a 32.0 km radius around fixed location 1

Loc. 3 **Address:** 9840 INTERNATIONAL DRIVE
City: ORLANDO **County:** ORANGE **State:** FL
Lat (NAD83): 28-25-22.0 N **Long (NAD83):** 081-27-35.0 W **ASR No.:** **Ground Elev:** 29.0

Loc. 4 **Address:** Bithlo Antenna Farm
City: Bithlo **County:** ORANGE **State:** FL
Lat (NAD83): 28-35-12.6 N **Long (NAD83):** 081-04-57.5 W **ASR No.:** 1212124 **Ground Elev:** 20.4

Loc. 5 **Area of operation**
Operating within a 32.0 km radius around fixed location 3

Loc. 6 **Area of operation**
Operating within a 32.0 km radius around fixed location 4

Loc. 7 **Address:** E SIDE OF US 301 .5 MI N OF SR 470
City: SUMTERVILLE **County:** SUMTER **State:** FL
Lat (NAD83): 28-45-50.0 N **Long (NAD83):** 082-03-35.0 W **ASR No.:** 1029186 **Ground Elev:** 18.0

Loc. 8 **Area of operation**
Operating within a 32.0 km radius around fixed location 7

Conditions:
Pursuant to §309(h) of the Communications Act of 1934, as amended, 47 U.S.C. §309(h), this license is subject to the following conditions: This license shall not vest in the licensee any right to operate the station nor any right in the use of the frequencies designated in the license beyond the term thereof nor in any other manner than authorized herein. Neither the license nor the right granted thereunder shall be assigned or otherwise transferred in violation of the Communications Act of 1934, as amended. See 47 U.S.C. § 310(d). This license is subject in terms to the right of use or control conferred by §706 of the Communications Act of 1934, as amended. See 47 U.S.C. §606.

Licensee Name: AMERICAN MEDICAL RESPONSE, INC.

Call Sign: WPMH479 **File Number:** 0010542112 **Print Date:** 05-13-2023

Fixed Location Address or Mobile Area of Operation

Loc. 9 Area of operation
Statewide: FL

Antennas

Loc No.	Ant No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
1	1	000453.02500000	FB	1		11K2F3E	100.000	196.000	109.0	107.9	
1	1	000453.07500000	FB	1		11K2F3E	100.000	196.000	109.0	107.9	
1	1	000463.00000000	FB2	1		11K2F3E	100.000	176.000	109.0	107.9	
1	1	000463.00000000	FB	1		11K2F3E	100.000	196.000	109.0	107.9	
1	1	000463.02500000	FB2	1		11K2F3E	100.000	176.000	109.0	107.9	
1	1	000463.02500000	FB	1		11K2F3E	100.000	196.000	109.0	107.9	
1	1	000463.05000000	FB2	1		11K2F3E	100.000	176.000	109.0	107.9	
1	1	000463.05000000	FB	1		11K2F3E	100.000	196.000	109.0	107.9	
1	1	000463.07500000	FB2	1		11K2F3E	100.000	176.000	109.0	107.9	
1	1	000463.07500000	FB	1		11K2F3E	100.000	196.000	109.0	107.9	
1	1	000463.10000000	FB2	1		11K2F3E	100.000	176.000	109.0	107.9	
1	1	000463.10000000	FB	1		11K2F3E	100.000	196.000	109.0	107.9	
1	1	000463.12500000	FB2	1		11K2F3E	100.000	176.000	109.0	107.9	
1	1	000463.12500000	FB	1		11K2F3E	100.000	196.000	109.0	107.9	
1	1	000463.15000000	FB2	1		11K2F3E	100.000	176.000	109.0	107.9	
1	1	000463.15000000	FB	1		11K2F3E	100.000	196.000	109.0	107.9	
1	1	000463.17500000	FB2	1		11K2F3E	100.000	176.000	109.0	107.9	
1	1	000463.17500000	FB	1		11K2F3E	100.000	196.000	109.0	107.9	

Reference Copy

Licensee Name: AMERICAN MEDICAL RESPONSE, INC.

Call Sign: WPMH479 **File Number:** 0010542112 **Print Date:** 05-13-2023

Antennas

Loc No.	Ant No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
2	1	000453.07500000	MO	80		11K2F3E	100.000	100.000			
2	1	000458.07500000	MO	80		11K2F3E	100.000	100.000			
2	1	000463.00000000	MO	80		11K2F3E	100.000	100.000			
2	1	000463.02500000	MO	80		11K2F3E	100.000	100.000			
2	1	000463.05000000	MO	80		11K2F3E	100.000	100.000			
2	1	000463.07500000	MO	80		11K2F3E	100.000	100.000			
2	1	000463.10000000	MO	80		11K2F3E	100.000	100.000			
2	1	000463.12500000	MO	80		11K2F3E	100.000	100.000			
2	1	000463.15000000	MO	80		11K2F3E	100.000	100.000			
2	1	000463.17500000	MO	80		11K2F3E	100.000	100.000			
2	1	000468.00000000	MO	80		11K2F3E	100.000	100.000			
2	1	000468.02500000	MO	80		11K2F3E	100.000	100.000			
2	1	000468.05000000	MO	80		11K2F3E	100.000	100.000			
2	1	000468.07500000	MO	80		11K2F3E	100.000	100.000			
2	1	000468.10000000	MO	80		11K2F3E	100.000	100.000			
2	1	000468.12500000	MO	80		11K2F3E	100.000	100.000			
2	1	000468.15000000	MO	80		11K2F3E	100.000	100.000			
2	1	000468.17500000	MO	80		11K2F3E	100.000	100.000			
3	1	000453.02500000	FB2	1		11K2F3E	100.000	300.000	118.6	119.3	01-11-2007
4	1	000453.05000000	FB2	1		11K2F3E	100.000	82.000	298.7	306.9	01-11-2007

Reference Copy

Licensee Name: AMERICAN MEDICAL RESPONSE, INC.

Call Sign: WPMH479 **File Number:** 0010542112 **Print Date:** 05-13-2023

Antennas

Loc No.	Ant No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
5	1	000458.02500000	MO	300		11K2F3E	100.000	100.000			01-11-2007
5	1	000453.02500000	MO	300		11K2F3E	100.000	100.000			01-11-2007
6	1	000453.05000000	MO	300		11K2F3E	100.000	100.000			01-11-2007
6	1	000458.05000000	MO	300		11K2F3E	100.000	100.000			01-11-2007
7	1	000453.07500000	FB2	1		11K2F3E	100.000	176.000	128.0	113.5	01-24-2013
8	1	000453.07500000	MO	300		11K2F3E	100.000	100.000			01-24-2013
8	1	000458.07500000	MO	300		11K2F3E	100.000	100.000			01-24-2013
9	1	000463.00000000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000468.00000000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000463.02500000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000468.02500000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000463.05000000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000468.05000000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000463.07500000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000468.07500000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000463.10000000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000468.10000000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000463.12500000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000468.12500000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000463.15000000	MO	500		11K2F3E	40.000	40.000			10-31-2017

Reference Copy

Licensee Name: AMERICAN MEDICAL RESPONSE, INC.

Call Sign: WPMH479 **File Number:** 0010542112 **Print Date:** 05-13-2023

Antennas

Loc No.	Ant No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
9	1	000468.15000000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000463.17500000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000468.17500000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000462.97500000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000467.97500000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000462.95000000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000467.95000000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000463.01250000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000468.01250000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000463.03750000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000468.03750000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000463.06250000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000468.06250000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000463.08750000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000468.08750000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000463.11250000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000468.11250000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000463.13750000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000468.13750000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000463.16250000	MO	500		11K2F3E	40.000	40.000			10-31-2017

Reference Copy

Licensee Name: AMERICAN MEDICAL RESPONSE, INC.

Call Sign: WPMH479 **File Number:** 0010542112 **Print Date:** 05-13-2023

Antennas

Loc No.	Ant No.	Frequencies (MHz)	Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters	Ant. AAT meters	Construct Deadline Date
9	1	000468.16250000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000463.18750000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000468.18750000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000462.96250000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000467.96250000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000462.98750000	MO	500		11K2F3E	40.000	40.000			10-31-2017
9	1	000467.98750000	MO	500		11K2F3E	40.000	40.000			10-31-2017

Control Points

Control Pt. No. 1

Address: 4728 OLD WINTER GARDEN RD

City: ORLANDO **County:** ORANGE **State:** FL **Telephone Number:** (407)592-5105

Associated Call Signs

<NA>

Waivers/Conditions:

NONE

Reference Copy

AMR HoldCo Inc.

Consolidated Balance Sheets
(Amounts in thousands, unaudited)

	December 2022
ASSETS	
Cash and cash equivalents	$ 120,217
Insurance collateral	168,358
Accounts receivable, net	611,957
Supplies inventory	46,525
Prepaid expenses	42,323
Other current assets	38,267
Total current assets	1,027,647
Property and equipment, net	314,340
Operating right-of-use assets	194,388
Finance right-of-use assets	3,518
Intangible assets, net	953,262
Goodwill	839,358
Other assets	96,796
Total assets	$ 3,429,309
LIABILITIES AND EQUITY	
Accounts payable	$ 43,621
Accrued wages, benefits and taxes	132,624
Accrued interest	-
Other accrued liabilities	261,339
Current portion of lease obligations and long-term debt	45,056
Total current liabilities	482,640
Operating lease obligations	175,848
Finance lease obligations and long-term debt	4,559
Deferred income taxes	102,076
Insurance reserves	221,086
Other long-term liabilities	12,046
Total liabilities	998,255
Investment by Parent	2,233,553
Additional paid-in capital	-
Accumulated other comprehensive income (loss)	(3,423)
Retained earnings	200,924
Total equity	2,431,054
Total liabilities and equity	$ 3,429,309

AMR HoldCo Inc.

Consolidated Statement of Operations and Comprehensive Income (Loss)
(Amounts in thousands, unaudited)

	Year ended December 31, 2022
Net revenue	$ 3,223,810
Operating Expenses:	
Employee wages, benefits and taxes	1,941,937
Maintenance, fuel and other direct expenses	206,526
Insurance expense	114,519
Other operating expenses	970,557
Depreciation and amortization	152,328
Acquisition, integration and other charges	37,680
Total operating expenses	3,423,547
Operating income (loss)	(199,737)
Interest income (expense), net	2,956
Equity in earnings of unconsolidated affiliates	355
Other income (loss), net	(6,477)
Net income (loss) before income taxes	(202,903)
Income tax (benefit) expense	(68,258)
Net income (loss)	$ (134,645)
Comprehensive income (loss):	
Net income (loss)	(134,645)
Other comprehensive income (loss)	
Unrealized holding gains (losses) on investments	(12,093)
Defined benefit pension plan net gain (loss)	6,190
Deferred income tax benefit (expense), net	1,176
Total other comprehensive income (loss), net of income tax	(4,727)
Comprehensive income (loss)	$ (139,372)

AMR HoldCo Inc.

Consolidated Statements of Changes in Equity
(amounts in thousands, unaudited)

	Investment by Parent / Prior Parent	Accumulated Other Comprehensive Income (Loss)	Retained Earnings (Accumulated Deficit)	Total Equity
Balance at December 31, 2021 (Successor)	$ 2,364,331	$ 1,304	$ 335,569	$ 2,701,204
Net working capital distributed to Parent	(144,900)	-	-	(144,900)
Acquisitions funded by Parent	14,122	-	-	14,122
Net income (loss)	-	-	(134,645)	(134,645)
Other comprehensive income (loss), net of tax expense of [	-	(4,727)	-	(4,727)
Balance at December 31, 2022 (Successor)	$ 2,233,553	$ (3,423)	$ 200,924	$ 2,431,054

AMR HoldCo Inc.

Consolidated Statements of Cash Flows
(Amounts in thousands, unaudited)

	Year ended December 31, 2022
Cash flows from operating activities	
Net income (loss)	$ (134,645)
Adjustments to reconcile net income (loss) to net cash provided by (used in) operating activities:	
Depreciation and amortization	152,328
Loss on disposal of property and equipment	6,291
Unrealized loss (gain) on marketable equity securities	10,039
Other, net	5,264
Deferred income taxes	(45,664)
Equity in earnings of unconsolidated affiliates	355
Changes in operating assets / liabilities, net of acquisitions:	
Accounts receivable, net	(37,625)
Accounts payable	(504)
Accrued wages, benefits and taxes	(32,279)
Accrued interest	-
Accrued liabilities	23,971
Other assets and liabilities, net	59,203
Net cash provided by (used in) operating activies	6,734
Cash flows from investing activities	
Acquisition of businesses, net of cash and restricted cash acquired	(14,122)
Proceeds from the sale of property and equipment	816
Purchases of property and equipment	(125,965)
Net change in investments held as insurance collateral	1,816
Purchases of marketable securities	(52,317)
Sales and maturities of marketable securities	47,107
Other investing activities, net	(28,549)
Net cash provided by (used in) investing activities	(171,214)
Cash flows from financing activities	
Net working capital, overhead allocations and other transfers contributed by (distributed to) Prior Parent	-
Net working capital and other transfers contributed by (distributed to) Parent	(126,985)
Payments on finance lease obligations and long-term debt	(8,931)
Proceeds from issuance of long-term debt	1,184
Net cash used provided by (used in) financing activities	(134,732)
Effect of exchange rate changes on cash, cash equivalents, restricted cash and restricted cash equivalents	(5,264)
(Decrease) increase in cash, cash equivalents, restricted cash and restricted cash equivalents	(304,476)
Cash and cash equivalents, beginning of period (including restricted cash and restricted cash equivalents of $59.7 million)	439,600
Cash and cash equivalents, end of period (including restricted cash and restricted cash equivalents of $14.9 million)	$ 135,124

ANNUAL REPORT PURSUANT TO SECTION 10.09 OF THE INDENTURE, DATED AS OF OCTOBER 2, 2020

FOR THE YEAR ENDED DECEMBER 31, 2022

Global Medical Response, Inc.

4400 State Hwy 121
Lewisville, Texas 75056

(972) 459-4919

KPMG LLP
Suite 800
1225 17th Street
Denver, CO 80202-5598

Independent Auditors' Report

The Board of Directors
Global Medical Response, Inc.:

Opinion

We have audited the consolidated financial statements of Global Medical Response, Inc. and its subsidiaries (the Company), which comprise the consolidated balance sheets as of December 31, 2022 and December 31, 2021, and the related consolidated statements of operations, changes in stockholder's equity, and cash flows for each of the years in the three-year period ended December 31, 2022, and the related notes to the consolidated financial statements.

In our opinion, the accompanying consolidated financial statements present fairly, in all material respects, the financial position of the Company as of December 31, 2022 and December 31, 2021, and the results of its operations and its cash flows for each of the years in the three-year period ended December 31, 2022 in accordance with U.S. generally accepted accounting principles.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Consolidated Financial Statements section of our report. We are required to be independent of the Company and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Consolidated Financial Statements

Management is responsible for the preparation and fair presentation of the consolidated financial statements in accordance with U.S. generally accepted accounting principles, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the consolidated financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Company's ability to continue as a going concern for one year after the date that the consolidated financial statements are issued.

Auditors' Responsibilities for the Audit of the Consolidated Financial Statements

Our objectives are to obtain reasonable assurance about whether the consolidated financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the consolidated financial statements.

KPMG LLP, a Delaware limited liability partnership and a member firm of the KPMG global organization of independent member firms affiliated with KPMG International Limited, a private English company limited by guarantee.

KPMG

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the consolidated financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the consolidated financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the consolidated financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Company's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

KPMG LLP

Denver, Colorado
March 30, 2023

Global Medical Response, Inc.
CONSOLIDATED BALANCE SHEETS
(Amounts in thousands)

	December 31, 2022	December 31, 2021
ASSETS		
Current assets:		
Cash and cash equivalents	$ 146,333	$ 469,927
Insurance collateral	168,358	231,903
Accounts receivable, net	1,109,198	1,094,052
Spare parts, medical supplies and fuel	89,534	95,054
Prepaid expenses	47,616	43,916
Other current assets	71,861	61,985
Total current assets	1,632,900	1,996,837
Property and equipment, net	1,310,229	1,117,671
Operating right-of-use assets	254,439	237,732
Finance right-of-use assets	131,020	158,936
Intangible assets, net	1,470,516	1,494,417
Goodwill	2,278,701	2,204,597
Other assets	120,063	53,372
Total assets	$ 7,197,868	$ 7,263,562
LIABILITIES AND EQUITY		
Current liabilities:		
Accounts payable	80,677	70,316
Accrued wages, benefits and taxes	213,209	241,769
Accrued interest	26,941	47,624
Other accrued liabilities	384,814	317,152
Current portion of lease obligations	95,355	96,165
Current portion of long-term debt	111,586	91,929
Total current liabilities	912,582	864,955
Operating lease obligations	222,564	198,437
Finance lease obligations	108,160	134,533
Long-term debt	5,326,824	5,151,889
Deferred income taxes	171,397	242,500
Insurance reserves	221,086	194,829
Other long-term liabilities	44,729	44,437
Total liabilities	7,007,342	6,831,580
Commitments and contingencies		
Equity:		
Common stock	—	—
Additional paid-in capital	217,195	233,899
Retained earnings (deficit)	(23,246)	196,779
Accumulated other comprehensive income (loss)	(3,423)	1,304
Total equity	190,526	431,982
Total liabilities and equity	$ 7,197,868	$ 7,263,562

The accompanying Notes to Consolidated Financial Statements are an integral part of these statements.

Global Medical Response, Inc.
CONSOLIDATED STATEMENTS OF OPERATIONS
(Amounts in thousands)

	Year Ended December 31,		
	2022	2021	2020
Net revenue	$ 5,168,388	$ 4,914,940	$ 4,351,388
Operating expenses:			
Employee wages, benefits and taxes	2,764,421	2,447,032	2,341,116
Maintenance, fuel and other direct expenses	493,047	391,391	329,074
Insurance expense	150,588	143,750	134,027
Other operating expenses	1,265,690	1,127,800	869,415
Governmental grants	—	(106,194)	(52,556)
Depreciation and amortization	329,241	323,164	372,958
Acquisition, integration and other charges	54,210	37,430	44,904
Total operating expenses	5,057,197	4,364,373	4,038,938
Operating income	111,191	550,567	312,450
Interest expense, net	389,124	345,688	361,090
Loss on debt extinguishment	—	23,171	17,105
Equity in (earnings) loss of unconsolidated affiliates	(1,602)	677	(282)
Other (income) loss, net	6,477	(718)	(664)
Net income (loss) before income taxes	(282,808)	181,749	(64,799)
Income tax (benefit) expense	(62,783)	60,530	(23,114)
Net income (loss)	$ (220,025)	$ 121,219	$ (41,685)
Comprehensive income (loss):			
Net income (loss)	(220,025)	121,219	(41,685)
Other comprehensive income (loss)			
Unrealized gains (losses) on derivative financial instruments	—	14,774	30,372
Unrealized holding gains (losses) on investments	(12,093)	(4,699)	3,383
Defined benefit pension plan net gain (loss)	6,190	2,840	(7,063)
Deferred income tax benefit (expense), net	1,176	(3,181)	(6,509)
Total other comprehensive income (loss), net of income tax	(4,727)	9,734	20,183
Comprehensive income (loss)	$ (224,752)	$ 130,953	$ (21,502)

The accompanying Notes to Consolidated Financial Statements are an integral part of these statements.

Global Medical Response, Inc.
CONSOLIDATED STATEMENTS OF STOCKHOLDER'S EQUITY
(Amounts in thousands)

	Common Stock	Additional Paid-in Capital	Retained Earnings	Accumulated Other Comprehensive Income (Loss)	Total
Balance at December 31, 2019	$ —	$ 758,524	$ 117,245	$ (28,613)	$ 847,156
Stock-based compensation expense	—	5,084	—	—	5,084
Cash taxes paid on net settled stock awards	—	(14,972)	—	—	(14,972)
Net income (loss)	—	—	(41,685)	—	(41,685)
Other comprehensive income (loss), net of tax benefit (expense) of $(6.5) million	—	—	—	20,183	20,183
Balance at December 31, 2020	$ —	$ 748,636	$ 75,560	$ (8,430)	$ 815,766
Stock-based compensation expense	—	7,034	—	—	7,034
Cash contributed by (distributed to) Parent	—	(521,639)	—	—	(521,639)
Net income (loss)	—	—	121,219	—	121,219
Other comprehensive income (loss), net of tax benefit (expense) of $(3.2) million	—	—	—	9,734	9,734
Other	—	(132)	—	—	(132)
Balance at December 31, 2021	—	$ 233,899	$ 196,779	$ 1,304	$ 431,982
Stock-based compensation expense	—	7,213	—	—	7,213
Cash contributed by (distributed to) Parent	—	(23,917)	—	—	(23,917)
Net income (loss)	—	—	(220,025)	—	(220,025)
Other comprehensive income (loss), net of tax benefit (expense) of $1.2 million	—	—	—	(4,727)	(4,727)
Balance at December 31, 2022	$ —	$ 217,195	$ (23,246)	$ (3,423)	$ 190,526

The accompanying Notes to Consolidated Financial Statements are an integral part of these statements.

Global Medical Response, Inc.
CONSOLIDATED STATEMENTS OF CASH FLOWS
(Amounts in thousands)

	Year Ended December 31,		
	2022	2021	2020
Cash flows from operating activities:			
Net income (loss)	$ (220,025)	$ 121,219	$ (41,685)
Adjustments to reconcile net income (loss) to net cash provided by (used in) operating activities			
Depreciation and amortization	329,241	323,164	372,958
Amortization of deferred financing costs and debt discount	27,745	27,463	26,704
Loss on debt extinguishment	—	23,171	17,105
Stock-based compensation expense	7,213	7,034	5,084
Loss (gain) on disposal of property and equipment	6,903	(559)	6,349
Unrealized loss (gain) on marketable equity securities	10,039	(5,078)	(3,596)
Other, net	(5,264)	5,604	1,695
Deferred income taxes	(69,927)	49,914	7,430
Equity in earnings of unconsolidated affiliates	1,602	(677)	(282)
Changes in assets and liabilities, net of effects of acquisitions			
Accounts receivable, net	(12,049)	(239,908)	(35,523)
Accounts payable	8,939	21,010	10,795
Accrued wages, benefits and taxes	(11,673)	(24,323)	69,749
Accrued interest	(20,683)	(3,033)	41,680
Accrued liabilities	52,742	47,076	(12,541)
Other assets and liabilities, net	(24,816)	46,038	30,147
Net cash provided by (used in) operating activities	79,987	398,115	496,069
Cash flows from investing activities:			
Acquisition of businesses, net of cash and restricted cash acquired	(120,162)	(118,306)	(16,411)
Proceeds from asset disposals related to sales and insurance recoveries	10,591	1,248	4,523
Purchases of property and equipment	(187,305)	(143,115)	(182,931)
Net change in investments held as insurance collateral	1,816	1,580	642
Purchases of marketable securities	(52,317)	(72,227)	(93,025)
Sales and maturities of marketable securities	47,107	42,152	67,239
Other investing activities, net	(37,778)	(10,111)	3,274
Net cash provided by (used in) investing activities	(338,048)	(298,779)	(216,689)
Cash flows from financing activities:			
Payments on finance lease obligations	(36,860)	(44,917)	(54,310)
Principal payments on long-term debt	(88,853)	(814,105)	(2,285,881)
Payment of deferred financing costs	(3,482)	(21,390)	(27,317)
Proceeds from issuance of long-term debt	37,093	1,430,700	2,276,306
Cash contributed by (distributed to) Parent	(23,917)	(521,639)	—
Other financing activities, net	—	(132)	(14,972)
Net cash provided by (used in) financing activities	(116,019)	28,517	(106,174)
Effect of exchange rate changes on cash, cash equivalents, restricted cash and restricted cash equivalents	5,264	(5,604)	(1,477)
(Decrease) increase in cash, cash equivalents, restricted cash and restricted cash equivalents	(368,816)	122,249	171,729
Cash and cash equivalents, beginning of period (including restricted cash and restricted cash equivalents of $60.8 million, $58.2 million, and $13.8 million, respectively)	530,771	408,522	236,793
Cash and cash equivalents, end of period (including restricted cash and restricted cash equivalents of $15.6 million, $60.8 million, and $58.2 million, respectively)	$ 161,955	$ 530,771	$ 408,522
Supplemental disclosure of cash flow information			
Equipment (primarily aircraft) additions financed with the issuance of debt	$ 157,436	$ 74,604	$ 81,363
Cash paid (received) during the period for:			
Interest	$ 382,049	$ 317,836	$ 286,961
Income taxes, net of refunds received	$ 11,131	$ 11,169	$ (45,331)

The accompanying Notes to Consolidated Financial Statements are an integral part of these statements.

CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY): 12/01/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Aon Risk Services Central, Inc.
Philadelphia PA Office
100 North 18th Street
15th Floor
Philadelphia PA 19103 USA

CONTACT NAME:
PHONE (A/C. No. Ext): (866) 283-7122 **FAX (A/C. No.):** (800) 363-0105
E-MAIL ADDRESS:

INSURED
American Medical Response, Inc.
6501 S. Fiddlers Green Circle
Suite 100
Greenwood Village CO 80111 USA

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A:	Lloyd's Syndicate No. 1729	AA1120157
INSURER B:	ACE American Insurance Company	22667
INSURER C:	ACE Fire Underwriters Insurance Co.	20702
INSURER D:	Indemnity Insurance Co of North America	43575
INSURER E:	ACE Property & Casualty Insurance Co.	20699
INSURER F:	Great American Security Ins Co	31135

COVERAGES **CERTIFICATE NUMBER:** 570102872588 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. **Limits shown are as requested**

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
B	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE / X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY / PRO-JECT / LOC OTHER:			XSLG72962722 SIR applies per policy terms & conditions	03/31/2023	03/31/2024	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG SIR	$2,750,000 $100,000 $10,000 $2,750,000 $5,000,000 $2,750,000 $250,000
B	AUTOMOBILE LIABILITY X ANY AUTO OWNED AUTOS ONLY / SCHEDULED AUTOS HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY			ISA H25578193	03/31/2023	03/31/2024	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$10,000,000
F	UMBRELLA LIAB / X OCCUR X EXCESS LIAB / CLAIMS-MADE DED / RETENTION			EXC4901832	03/31/2023	03/31/2024	EACH OCCURRENCE AGGREGATE	$10,000,000 $10,000,000
D B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N: N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		WLRC70317370 AOS WLRC70317333 CA, MA	03/31/2023 03/31/2023	03/31/2024 03/31/2024	X PER STATUTE / OTH-ER E.L. EACH ACCIDENT E.L. DISEASE-EA EMPLOYEE E.L. DISEASE-POLICY LIMIT	$1,000,000 $1,000,000 $1,000,000
A	E&O - Professional Liability - Excess			CSHLC2301663 Claims Made- Lead Carrier SIR applies per policy terms & conditions	03/31/2023	03/31/2024	Per Claim Aggregate SIR	$15,000,000 $15,000,000 $10,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Highlands county board of county commissioners is included as Additional Insured in accordance with the policy provisions of the General Liability policy.

CERTIFICATE HOLDER

AMR
dba Atlantic Palm Beach Ambulance Inc.
Attn: Yaima Acosta
1105 Barnet Dr., Suite D
Lake Worth FL 33461 USA

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Aon Insurance Managers (USA), Inc.

Holder Identifier :

Certificate No : 570102872588

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AGENCY CUSTOMER ID: 570000073826
LOC #:

ADDITIONAL REMARKS SCHEDULE

Page _ of _

AGENCY	NAMED INSURED
Aon Risk Services Central, Inc.	American Medical Response, Inc.
POLICY NUMBER: See Certificate Number: 570102872588	
CARRIER: See Certificate Number: 570102872588 / NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER	
INSURER	
INSURER	
INSURER	

ADDITIONAL POLICIES If a policy below does not include limit information, refer to the corresponding policy on the ACORD certificate form for policy limits.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS	
	WORKERS COMPENSATION							
C		N/A		SCFC70317412 WI	03/31/2023	03/31/2024		
B		N/A		WCUC7031745A OH SIR applies per policy terms & conditions	03/31/2023	03/31/2024		

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497
AMERICAN MEDICAL RESPONSE
NON-MEDICAL TRANSPORT
PBC#VH75
888-624-1900


495
American Medical Response
NON-MEDICAL TRANSPORT
AMR


AMBULANCE
AMR
American Medical Response
246
AMR


AMBULANCE
SEBRING
INTERNATIONAL RACEWAY
American Medical Response
243
DANGER
FLAMMABLE
MATERIALS


AMBULANCE
AMR
American Medical Response
202

Highlands County Fire Rescue

HIGHLANDS COUNTY COPCN CERTIFICATE VEHICLES

Name of Service: Atlantic/Palm Beach Ambulance Inc. d/b/a AMR Date: November 28,

Unit #	Vehicle Type:	Year/Make	Model	Vehicle Identification #	Mileage
243	Ambulance	2019/FORD	Transit T250	1FDYR2CM7KKB86500	183957
246	Ambulance	2014/FORD	VAN	1FDSS3EL9EDB15084	251323
202	Ambulance	2018/FORD	Transit T250	1FDYR2CM7JKB08944	165683
495	Wheelchair	2012/FORD	E150	1FTNE1EW2CDA26543	232064
497	Wheelchair	2011/FORD	E250	1FTNS2EW2BDB23836	254678

Form 1C-CERTVEHICLES

Attach additional page(s), if necessary

Highlands County Fire Rescue COPCN ALS/BLS PERSONNEL

Name of Service: ATLANTIC/PALM BEACH AMBULANCE, INC. DBA AMR Date: 11/29/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Zuniga	Rita	Yes			PMD543152
Conner	Sean	Yes			PMD540075
Dorestan	Noriles	Yes			PMD522036
Herman	Brian	Yes			PMD 508331
Herrera	Augustin	Yes			PMD12296
Martinez	Nicholas	Yes			PMD537068
Meehan	Kevin	Yes			PMD14630
Pierre	Sebastien	Yes			PMD536983
Rodriguez	Raul	Yes			PMD13713
Salvino	Robbie	Yes			PMD512092
Shabazz	Jabril	Yes			PMD9888
Shaw	George	Yes			PMD 10214
Shmueli	Eytan	Yes			PMD 511067
Toporas	Titi	Yes			PMD512421
Keating	Mark	Yes			PMD15932
Pezzuto	Toniann	Yes			PMD525933
Ramirez	Higueyana	Yes			PMD14727

Attach additional page(s), if necessary

Form Personnel -1

Highlands County Fire Rescue COPCN ALS/BLS PERSONNEL

Name of Service: ATLANTIC/PALM BEACH AMBULANCE, INC. DBA AMR Date: 11/29/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Pineros	Felipe	Yes			PMD 543335
Pritchard	Mark	Yes			PMD206180
Ramos	Raul	Yes			PMD16442
Santiago	Jovani	Yes			PMD542070
Smith	Unalysis	Yes			PMD 511307
Sosner	Chandler	Yes			PMD 541116
Tansy	Aryse	Yes			PMD526851
Tilus	Jeffrey	Yes			PM542978
Ugalde	Rafael	Yes			PMD542641
Velazquez	Stephen	Yes			PMD535445
Villagomez	Robert	Yes			PMD517359
Vogel	Richard	Yes			PMD510485
Walker	Thomas	Yes			PMD205167
West	Sarah	Yes			PMD 519289
Young	Ashlyn	Yes			PMD541192
Zambito	Daniel	Yes			PMD544473

Attach additional page(s), if necessary

Form Personnel -1

Highlands County Fire Rescue COPCN ALS/BLS PERSONNEL

Name of Service: ATLANTIC/PALM BEACH AMBULANCE, INC. DBA AMR Date: 11/29/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Dewitt	John	Yes			PMD512475
Gunn	Donald	Yes			PMD531977
Haffield	Jason	Yes			PMD206391
Hernandez	Eliar	Yes			PMD523326
Kaye	Jordan	Yes			PMD538248
Maguire	Christian	Yes			PMD515017
Mannion	Corey	Yes			PMD539045
Martin	Natalie	Yes			PMD539772
Medina	Andres	Yes			PMD 539904
Millares	Michael	Yes			PMD206063
Miller	Geoffrey	Yes			PMD525281
Minnick	Lance	Yes			PMD523667
Miranda	Daniel	Yes			PMD540582
Munson	Erika	Yes			PMD512350
Oliveras	Robert	Yes			PMD514192
Paul	Wagner	Yes			PMD535337

Attach additional page(s), if necessary

Form Personnel -1

Highlands County Fire Rescue COPCN ALS/BLS PERSONNEL

Name of Service: ATLANTIC/PALM BEACH AMBULANCE, INC. DBA AMR Date: 11/29/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Anderson	Donald	Yes			PMD 14366
Annese	Zachary	Yes			EMT 576480
Annese	Zachary	Yes			PMD543934
Azoy	Hortenzia	Yes			PMD 533329
Benitez	Angel	Yes			EMT574249
Benitez	Angel	Yes			PMD543486
Bregler	Abrianna	Yes			PMD 541437
Burburan	Vincent	Yes			PMD543234
Cameron	William	Yes			PMD 517081
Cardenas	Daniel	Yes			PMD18841
Cedeno	Edward	Yes			EMT 580399
Cedeno	Edward	Yes			PMD544355
Conkle	Angela	Yes			PMD511583
Coriolan	Adlain	Yes			PMD515439
Craven	Thomas	Yes			PMD287120
Destephen	Michelle	Yes			PMD507471

Attach additional page(s), if necessary

Form Personnel -1

Highlands County Fire Rescue COPCN ALS/BLS PERSONNEL

Name of Service: ATLANTIC/PALM BEACH AMBULANCE, INC. DBA AMR Date: 11/29/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Cole	Amy		Yes		EMT 563922
Fuller	Devon		Yes		EMT550769
Liggins	Nicole		Yes		EMT512046
Moen	Arthur		Yes		EMT 60796
Rapuano	Edward		Yes		EMT549472
Armbruster	Tara	Yes			PMD502096
Baldacci	Domenica	Yes			PMD522215
Bandele	Kareem	Yes			PMD530549
Diaz	Michael	Yes			PMD 533097
Hisey	Erin	Yes			PMD541776
Kurulkar	Tom	Yes			PMD534221
Peters	Matthew	Yes			PMD542175
Ross	Charles	Yes			PMD525749
Stein	Mark	Yes			PMD 12047
Sundberg	Peter	Yes			PMD539279
Van Der Meulen	Cory	Yes			PMD531130

Attach additional page(s), if necessary

Form Personnel -1

Highlands County Fire Rescue COPCN ALS/BLS PERSONNEL

Name of Service: ATLANTIC/PALM BEACH AMBULANCE, INC. DBA AMR Date: 11/29/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Tomey	Austin		Yes		EMT568909
Toner	Tyler		Yes		EMT556094
Toney	Charles		Yes		EMT84868
Torres	Ismael		Yes		EMT 583930
Toussaint	Jeffrey		Yes		EMT583179
Tran	Nhat		Yes		EMT 580132
Ulysse	Steven		Yes		EMT552444
Vaz	Paulo		Yes		EMT 580811
Vazquez	Rafael		Yes		EMT526716
Velarde Autie	Daniel		Yes		EMT584578
Vidal	Jose		Yes		EMT565640
Villalba	Fabrizio		Yes		EMT582833
West	Joseph		Yes		EMT540279
Wilks	Savion		Yes		EMT551182
Wojie	Margaret		Yes		EMT580675
Ybanez	John		Yes		EMT572155

Attach additional page(s), if necessary

Form Personnel -1

Highlands County Fire Rescue COPCN ALS/BLS PERSONNEL

Name of Service: ATLANTIC/PALM BEACH AMBULANCE, INC. DBA AMR Date: 11/29/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Richter	Christopher		Yes		EMT 585256
Ricketts	Gavin		Yes		EMT577948
Rosa	Efrain		Yes		EMT579918
Royal	John		Yes		EMT 575660
Saint Juste	Jimmy		Yes		EMT 582462
Sanford	Trey		Yes		EMT580597
Santiago	Micah		Yes		EMT581159
Sarli	Joseph		Yes		EMT556372
Scott	Bennie		Yes		EMT574153
Silva	Anderson		Yes		EMT583688
Sipp	Ashley		Yes		EMT580921
Smith	Patrick		Yes		EMT580002
Stephan	Noah		Yes		EMT583718
Thomas	Morgan		Yes		EMT575333
Tirado	Sean		Yes		EMT 580942
Tocco	Zachary		Yes		EMT 371 199

Attach additional page(s), if necessary

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Name of Service: ATLANTIC/PALM BEACH AMBULANCE, INC. DBA AMR Date: 11/29/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Myers	Justin		Yes		EMT 553405
Naranjo	Ricardo		Yes		EMT564941
Nash	Simeon		Yes		EMT564858
Nista	James		Yes		EMT 583671
Odonnell	Austin		Yes		EMT580925
Ortega	Ariana		Yes		EMT560047
Ortiz	Shely		Yes		EMT585275
Pagan	Nicholas		Yes		EMT584914
Palmer	Jayon		Yes		EMT585664
Pamplona	Trent		Yes		EMT580216
Park	Samuel		Yes		EMT 582729
Patterson	Tyler		Yes		EMT546675
Pierre	Djennifer		Yes		EMT534158
Quinchia Jr.	John		Yes		EMT585264
Quintero	Jaime		Yes		EMT581631
Repollet	Anthony		Yes		EMT581635

Attach additional page(s), if necessary

Form Personnel -1

Highlands County Fire Rescue COPCN ALS/BLS PERSONNEL

Name of Service: ATLANTIC/PALM BEACH AMBULANCE, INC. DBA AMR Date: 11/29/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Lista	Angelo		Yes		EMT582045
Lombardo	Riccardo		Yes		EMT 525415
Lutz	Alex		Yes		EMT566714
Madrid	Kevin		Yes		EMT581199
Marcelus	Elizabeth		Yes		EMT 580507
Marin	Aristides		Yes		EMT572892
Marlowe	Edward		Yes		EMT524590
Marsh	Tyler		Yes		EMT 582031
Martinez	Sean		Yes		EMT580797
Mateo	Michael		Yes		EMT581700
Matos	Beny		Yes		EMT582209
Mcintosh	Antonio		Yes		EMT 580229
Mills	Brady		Yes		EMT 577494
Moise	Jordan		Yes		EMT 583323
Montoya	Laura		Yes		EMT576516
Mueller	Robert		Yes		EMT3775785

Attach additional page(s), if necessary

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Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Ippolito	John		Yes		EMT548211
Jarrett	Shakeem		Yes		EMT577462
Jarrett	Taurean		Yes		EMT573387
Jennings	Christian		Yes		EMT582376
Johnson	Michael		Yes		EMT504310
Johnson	Nicholas		Yes		EMT581710
Joseph	Mckenny		Yes		EMT577447
Juarez Martinez	Christopher		Yes		EMT575533
Keatts	Kyle		Yes		EMT564414
Killen	Cindy		Yes		EMT 526074
Krymov	Maxim		Yes		EMT576776
Lahens	Eron		Yes		EMT 582900
Lajeunesse	Emir		Yes		EMT575398
Leiter	Nicole		Yes		EMT574706
Leonard	Cephus		Yes		EMT585058
Lewispounall	Dale		Yes		EMT 578443

Attach additional page(s), if necessary

Form Personnel -1

Highlands County Fire Rescue COPCN ALS/BLS PERSONNEL

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Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Gandhi	Rinkubahen		Yes		EMT573690
Garcia	Anthony		Yes		EMT583537
Garcia	Samalich		Yes		EMT 582592
Gillespie	Nicole		Yes		EMT568433
Grant	Alex		Yes		EMT 578374
Grullon	Henzo		Yes		EMT581943
Hackler	Spencer		Yes		EMT580290
Hall	William		Yes		EMT568611
Haywood	Gregory		Yes		EMT541437
Hebert	Kyle		Yes		EMT583532
Henriques	Felipe		Yes		EMT 581665
Henry	Jahmal		Yes		EMT585056
Hernandez	Jesus		Yes		EMT 583127
Hernandez	John		Yes		EMT561615
Hernandez	Llanari M		Yes		EMT 582265
Hill	Demetrius		Yes		EMT583394

Attach additional page(s), if necessary

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Name of Service: ATLANTIC/PALM BEACH AMBULANCE, INC. DBA AMR Date: 11/29/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Cornish	Ethan		Yes		EMT 579200
Cotrone	Nicholas		Yes		EMT583251
Cruz	Osmel		Yes		EMT565611
Cubillos-Villafuerte	Celine		Yes		EMT584427
Daniels	Wayne		Yes		EMT61280
Diaz	Lary		Yes		EMT 583736
Dilkes	Dean		Yes		EMT 532062
Dutil	Christopher		Yes		EMT566054
Fenelus	Joshua		Yes		EMT580883
Flores	Danis		Yes		EMT 579123
Fontalvo	Jayden		Yes		EMT 580264
Francis	Esau		Yes		EMT581579
Fredieu	Scott		Yes		EMT 88778
Freslassie	Misghana		Yes		EMT582355
Gabriel	Geoffrey		Yes		EMT509326
Gaitan	Eduarda		Yes		EMT579601

Attach additional page(s), if necessary

Form Personnel -1

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Name of Service: ATLANTIC/PALM BEACH AMBULANCE, INC. DBA AMR Date: 11/29/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Bush	Nicholas		Yes		EMT537709
Calendo	Janine		Yes		EMT 577092
Canfield	Catherine		Yes		EMT585486
Carmona	Anthony		Yes		EMT576088
Carney	Sean		Yes		EMT567327
Cattafi	Stephen		Yes		EMT 529113
Cedeno	Nicholas		Yes		EMT574921
Charron	Ian		Yes		EMT571205
Clare	Matthew		Yes		EMT575977
Clifton	Kyriq		Yes		EMT574534
Cobos	Mario		Yes		EMT 526188
Coleman	Tyler		Yes		EMT 574621
Collins	Calvin		Yes		EMT581636
Constantino	Gabriel		Yes		EMT572798
Copeland	Jimmy		Yes		EMT 584259
Cordero	Albert		Yes		EMT 574715

Attach additional page(s), if necessary

Form Personnel -1

Highlands County Fire Rescue COPCN ALS/BLS PERSONNEL

Name of Service: ATLANTIC/PALM BEACH AMBULANCE, INC. DBA AMR Date: 11/29/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Adams	Jeffrey		Yes		EMT534253
Almeida	Jose		Yes		EMT524746
Andre	Walmond		Yes		EMT549045
Antoine	Marvens		Yes		EMT554792
Arce	Jesus		Yes		EMT575959
Avella	Carlos		Yes		EMT566543
Baldridge	Karli		Yes		EMT571992
Barker	Shayna		Yes		EMT585007
Barr	Craig		Yes		EMT584072
Benetatos	Nicholas		Yes		EMT 579972
Bien-Aime	Henry		Yes		EMT 583247
Blackman	Tena		Yes		EMT508808
Bradshaw	Tyler		Yes		EMT583975
Brawner	Kierstin		Yes		EMT581864
Bredy	FritzGerald		Yes		EMT543999
Buck	Stephanie		Yes		EMT574361

Form Personnel -1

Attach additional page(s), if necessary

Highlands County Fire Rescue
COPCN ALS/BLS PERSONNEL

Name of Service: ATLANTIC/PALM BEACH AMBULANCE, INC. DBA AMR

Date: 11/29/2023

Last Name	First Name/M.I.	Paramedic (Y/N)	EMT (Y/N)	Driver (Y/N)	State of Florida Certification(s) Number
Berger	Ronald			Y	
Brissett	Elton			Y	
Cadet	Benito			Y	
Chery	Rollin			Y	
Fleurinord	Chylet Guysimon			Y	
Jean Louis	Jones			Y	
Nicolas	Mackly			Y	
Smith	James			Y	

Form Personnel -1

Attach additional page(s), if necessary

A Global Medical Response Solution

12600 NW 107th Ave
Medley, FL 33178
www.amr.net

November 28, 2023

To whom it my concern:

This letter is to confirm that Dr. Joe Nelson is presently employed by American Medical Response Ambulance under Global Medical Response, in the position of Medical Director Regional on a full-time basis. Dr. Joe Nelson commenced employment with the company on 11/01/1992.

Dr. Nelson follows all the applicable laws and policies under 64J-1.004. Medical Direction which we have included in the document.

If you have any additional information, please do not hesitate to contact by phone at 954-312-1700 Ext 81450 or by email at Elsie.Maisonet@gmr.net

Sincerely,

Elsie Maisonet
Human Resources Manager

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MEDICAL DIRECTOR STATEMENT OF DUTIES AND RESPONSIBILITIES

THIS STATEMENT OF DUTIES AND RESPONSIBILITIES sets forth the duties and responsibilities by and between American Medical Response, Inc. ("AMR") and Joe A. Nelson, DO ("Medical Director"). The terms of this Statement are effective as of January 1, 2019.

WHEREAS, the Medical Director is an employee of AMR;

WHEREAS, the Medical Director is duly qualified and licensed to practice medicine in the state of Florida and approved to act as a medical director;

WHEREAS, the Medical Director acknowledges expertise in the field of medicine, emergency medical services, emergency medical services oversight and administration;

WHEREAS, the Medical Director as an employee of AMR is providing services of a medical director to AMR for its operations in the State of Florida, including but not limited to services to Rural/Metro Fire Dept., and AMR ground ambulance operations in the State of Florida;

DUTIES AND RESPONSIBILITIES:

1. **Medical Director Services.** The Medical Director shall provide the following services to AMR:

   a. Provide comprehensive medical oversight (direct & indirect) for clinical services delivered by AMR's emergency medical services personnel. Physician shall participate in the implementation of clinically sound, evidence-based expectations for the EMS system;

   b. Provide medical oversight and guidance for AMR's quality leadership activities through serving as a liaison between AMR and the local medical community, collaborating with local designated quality organizations and/or committees to define quality standards, identify metrics, review performance data, identify opportunities for improvement, test new processes, and ultimately to adopt best practices.

   c. Review quality improvement and performance reports, provided by AMR and identify opportunities for improvement in patient care or system design and collaborate with all appropriate entities to develop an improvement program.;

   d. Review recorded medical command conversations (if available) to assure appropriate clinical care & decision making by all entities.

   e. Review and respond to requests to review high priority clinical cases within twenty-four (24) hours of being notified;

   f. Make or direct the making of such reports and records relating to patient care as may be required by AMR and/or regulatory bodies, whether public or private;

   g. Develop criteria for establishment and maintenance of credentials for AMR's emergency medical services personnel;

   h. Direct, coordinate, and/or participate in initial, ongoing and remedial education of emergency medical services personnel in accordance with AMR's policies;

   i. Instruct and inform AMR management and governmental boards or agencies to summarily limit, suspend, or withdraw clinical credentials of emergency medical service personnel;

   j. Advise and assist in the organization in implementation of an effective utilization review program for AMR and perform utilization review services;

   k. Assist in the design and development of protocols, guidelines, patient information forms, medical record forms, and consent forms for use in the field or for AMR purposes;

   l. Undertake activities, as reasonably requested by AMR, including but not limited to professional contacts with physicians, healthcare systems, public health agencies, paramedic associations, nursing associations, governmental agencies, and state and local medical societies in order to apprise such individuals and groups of the nature and availability of facilities and services of AMR and facilitate the exchange of information on patient care, administration, medical policy, and utilization review;

   m. Actively participate in the professional development of all staff in AMR and collaborate in communicating medical competency and expertise to the medical community and general public. Give technical advice and assistance as may be requested to facilitate the evaluation, acquisition, implementation and utilization of medical equipment, expansion of AMR services, as well as general strategic planning and collaborative efforts with other healthcare systems;

   n. Authorize, supervise and approve the purchase of necessary medications for pre-hospital use by AMR in accordance with the full scope of practice. Medical Director acknowledges and agrees that controlled medications are specifically included within the definition of medications covered by this Statement and Medical Director will be responsible for approving all local implementation plans for the ordering, distribution and handling of controlled substances (to include oversight and sign-off on all controlled substance records and logs in a timely manner) consistent with local, state & federal requirements. Physician shall maintain all appropriate state & federal permits, registrations or licenses necessary to prescribe controlled substances;

   o. Fulfill all Medical Director Functions including protocol development, education and performance review associated with the operation of any AMR communications centers within the area;

   p. Fulfill all Medical Director Functions associated with the operation of any AMR Inter-facility, Specialty or Critical Care Transport operations;

   q. Perform any other functions associated with the role of a medical director as may be requested by AMR;

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r. Participate in all required activities associated with local and/or national accreditation processes;

s. Participate in sanctioned appropriately research activities

2. **Standard of Care.** Medical Director shall render services in compliance with the accepted medical standard of care in the community and profession.

3. **Compliance with Laws.** The parties will comply in all material respects with all applicable federal and state laws and regulations including, the federal Anti-kickback statute. Medical Director shall also maintain all licenses, certifications or accreditations necessary to provide Services hereunder.

4. **Insurance.** AMR's professional liability insurance covers Medical Director for services that are provided under this Statement.

5. **HIPAA.** Each party shall comply with the privacy provisions of the *Health Insurance Portability and Accountability Act of 1996* and the regulations thereunder ("HIPAA"), and with such other requirements of HIPAA that may become effective during the Term. Each party acknowledges and agrees that it is considered a covered entity under HIPAA. Accordingly, both parties are permitted to use and disclose Protected Health Information in accordance with HIPAA without an additional written authorization of the patient as long as both parties have a direct relationship with the patient. All patient medical records shall be treated as confidential so as to comply with all state and federal laws.

6. **Miscellaneous.** All other terms of this Statement shall be subject to AMR's standard employee policies and procedures. The terms hereof shall be terminated

7.

8. upon termination of the employment relationship between the Medical Director and AMR.

IN WITNESS WHEREOF, the parties have hereto executed this Statement.

AMERICAN MEDICAL RESPONSE, INC.

DocuSigned by:
By: Edward Racht
9901A6553B471...
Dr. Edward Racht, Chief Medical Officer on behalf of Rural/Metro Fire Dept. and all AMR operating affiliates and subsidiaries in the State of Florida.

DR. JOE NELSON

By: Joe A Nelson DO

Joe Nelson, DO, MS, FACOEP, FACEP

Digitally signed by Joe Nelson, DO, MS, FACOEP, FACEP
DN: cn=Joe Nelson, DO, MS, FACOEP, FACEP, o, ou=Emergency Medical Services, email=flemsmd@aol.com, c=US
Date: 2019.03.10 21:45:27 -04'00'

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON D.C. 20537

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
BN3371046	10-31-2025	$888

SCHEDULES	BUSINESS ACTIVITY	ISSUE DATE
2,2N,3, 3N,4,5	PRACTITIONER	10-04-2022

NELSON, JOE ALAN DO
DBA AMERICAN MEDICAL RESPONSE
1105 BARNETT DR STE 3
ATLANTIC/PALM BEACH AMB, INC.
LAKE WORTH, FL 334612603

Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

Form DEA-223 (9/2016)



Interfacility Transport Level of Service

Tx Service UNIT TYPE – Wheelchair Van

CPT A0130 Non-Medicare Reimbursable

LEVEL OF CARE - No Medical Care Provided

- Psychiatric transports ONLY if specially designated vehicle
- Self-medication only, crewmembers prohibited from assisting with medication administration
- Home prescribed O2 allowed
- Home Ventilator allowed, caretaker must accompany client
- Foley catheter allowed
- IV lock and implanted IV ports allowed
- NO IV fluids except self-infused IV pumps (such as Insulin pump or pain medication pump)
- No wounds or tubes, drains, etc. that may discharge bodily fluid or requiring driver to don Personal Protective Equipment OR requiring universal precautions beyond the level of wearing gloves (such as requiring respiratory, contact or reverse isolation)
- All equipment must be self-contained on wheelchair or stretcher

1 companion may ride with patient or in passenger seat if space is available
Service animals may accompany patient

STAFFING – Driver Only



Interfacility Transport Level of Service

Tx Service UNIT TYPE – (BLS) Basic Life Support

Medicare CPT A0428 Rate CPT A0425 Mileage CPT A0422 oxygen

LEVEL OF CARE -

- 911 (pre-hospital) or interfacility BLS or stable patients who require Basic Life Support care only.
- Basic Airway Management/tracheostomy monitoring
- O2 via cannula or mask/venti-mask
- Pulse oximetry, non-continuous when indicated
- *Non medicated IV's, including PICC lines
- Crewmembers may from assist with medication self- administration. (Aspirin, Albuterol, Nitroglycerin) Oral Glucose, Epi-pen when indicated
- use of AED when indicated
- Any patient WITH wounds or tubes, drains, etc. that may discharge bodily fluid or requiring CREW to don Personal Protective Equipment OR requiring universal precautions beyond the level of wearing gloves (such as requiring respiratory, contact or reverse isolation)
- Psychiatric transports with or without physical restraint use
- Home prescribed O2 allowed
- Home Ventilator allowed, caretaker must accompany client
- Foley catheter allowed
- self-infused IV pumps ALLOWED (such as Insulin pump or pain medication pump)
- All equipment must be self-contained on wheelchair or stretcher

1 companion may ride in passenger seat if space is available

Service animals may accompany patient

STAFFING – 2 EMT'S (Emergency Medical Technicians) or 1 EMT and 1 Driver Only (may be trained as an EMR or in First Aid where required)

****

*** Non-Medicated IV: Lactated Ringers, KCL solution, Normal saline, D5W, D5W 1/2 Normal saline, Heparin or saline locks. All are considered NON-MEDICATED for purposes of BLS transport.**



Interfacility Transport Level of Service

Tx Service UNIT TYPE – (ALS) 1 Advanced Life Support

Medicare HCPCS A0426 Rate HCPCS A0425 Mileage

LEVEL OF CARE - Intervention beyond the scope of an EMT including the following:

- Cardiac monitoring
- Monitored patient to / from any ICU, CCU, telemetry, cardiac cath lab, etc. who has been on continuous cardiac monitoring. Does not include discharges to a non-monitored bed. If the patient is to be left and returned, inform sending facility that they must supply equipment and a nurse to stay with the patient, our crew will wait for an additional charge.
- Continuous Pulse Oximetry and/or Capnography
- One or two medications by PO, SQ, IV, IM (Non SCT ALS Medications) route listed in current Protocol
- Trauma Network call
- Neonatal / Pediatric team transports
- Transplant teams
- Other teams with self-contained equipment and licensed physician
- *** Medicated IV, TIER 1, TIER 2, TIER 3

*** TIER 1 ALS Medications: IV PUMP REQUIRED, SCT/CCT IF 2 OR MORE IN USE

Dobutamine (Dobutrex), Isoproternol (Isuprel) IV drip, Norepinephrine (Levophed) IV drip, Phenylephrine (Neosynephrine) IV drip., Vasopressin, Milrinone. Procanamide (Pronestyl), Esmolol (Brevibloc®)

Nitrates: Nitroprusside (Nipride) IV drip, Nicardipine (Cardene)

Enalapril (Vasotec IV)

paralytic/sedative drugs (ex. Succinylcholine (Anectine), Pavulon, Norcuron, Diprivan, Precedex IV drip when initiated by hospital staff)

IF A PUMP IS NOT AVAILABLE, CONTACT THE AMR Medical Officer on Duty (MOD). FOR GUIDANCE. CCT IS REQUIRED IF TWO OR MORE OF THESE DRUGS ARE INFUSING UNLESS AN EXCEPTION IS AUTHORIZED BY THE AMR Medical Officer on Duty (MOD)



Interfacility Transport Level of Service

Tx Service UNIT TYPE – (SCT/CCT)

Specialty/Critical Care Transport

Medicare CPT A0434 Rate CPT A0425 Mileage

LEVEL OF CARE - ALS 2 plus:

- Team transports not included in ALS criteria
- Complex Ventilator Transports (not patient operated)
- **** SCT/CCT medications
- 2 OR MORE*** TIER 1 IV ALS MEDICATIONS
- Arterial lines (A line)
- Swan-Ganz line
- Intra-aortic balloon pump
- Extracorporeal membrane oxygenation (ECMO) (ADULT)
- Resuscitative endovascular balloon occlusion of the aorta (REBOA) Device
- Chest tubes TO A WATER SEAL

Service animals may accompany patient

STAFFING- Combination of 1 EMT and 1 (or more) CCT CREDENTIALED Paramedic

OR Combination of 1 EMT and 1 (or more) Paramedic, WITH Registered Nurse, or Respiratory Therapist.

NOTE: Other personnel may be added to the team as deemed necessary by the attending physician or MOD

****

****SCT/CCT medications: Tier 1 Medications such as Oxytocin (Pitocin) IV drip, paralytic/sedative drugs (ex. Succinylcholine (Anectine), Pavulon, Norcuron, Etomidate, Versed. Diprivan or Precedex IV drip WHEN INITIATED BY SCT/ CCT PARAMEDIC OR WHEN TITRATION IS EXPECTED DURING TRANSPORT Use only a SCT/CCT unit UNLESS AN EXCEPTION IS AUTHORIZED BY THE AMR Medical Officer on Duty (MOD)**



Interfacility Transport Level of Service

Tx Service UNIT TYPE – (NEO) Neonatal Specialty/Critical Care Transport

Medicare CPT A0434 Rate CPT A0425 Mileage

LEVEL OF CARE - SCT plus:

- Team transports of Neonatal patient less than 28 Days old OR Weight less than 5 Kg AND being transported to a Neonatal ICU
- NOTE This is a Neonatal Team transport as required by Florida Statute 401.252
- Extracorporeal membrane oxygenation (ECMO) (PEDIATRIC)
- ISOLETTE transport
- AMR Paramedic must accompany Team in the patient compartment UNLESS AN EXCEPTION IS AUTHORIZED BY THE AMR Medical Officer on Duty (MOD)

STAFFING – Combination of 1 EMT and 1(or more) Paramedic, Neonatal Transport Team Registered Nurse and Second RN or Respiratory Therapist with Level II or Level III NICU experience meeting criteria in 64J-1.006, F.A.C.

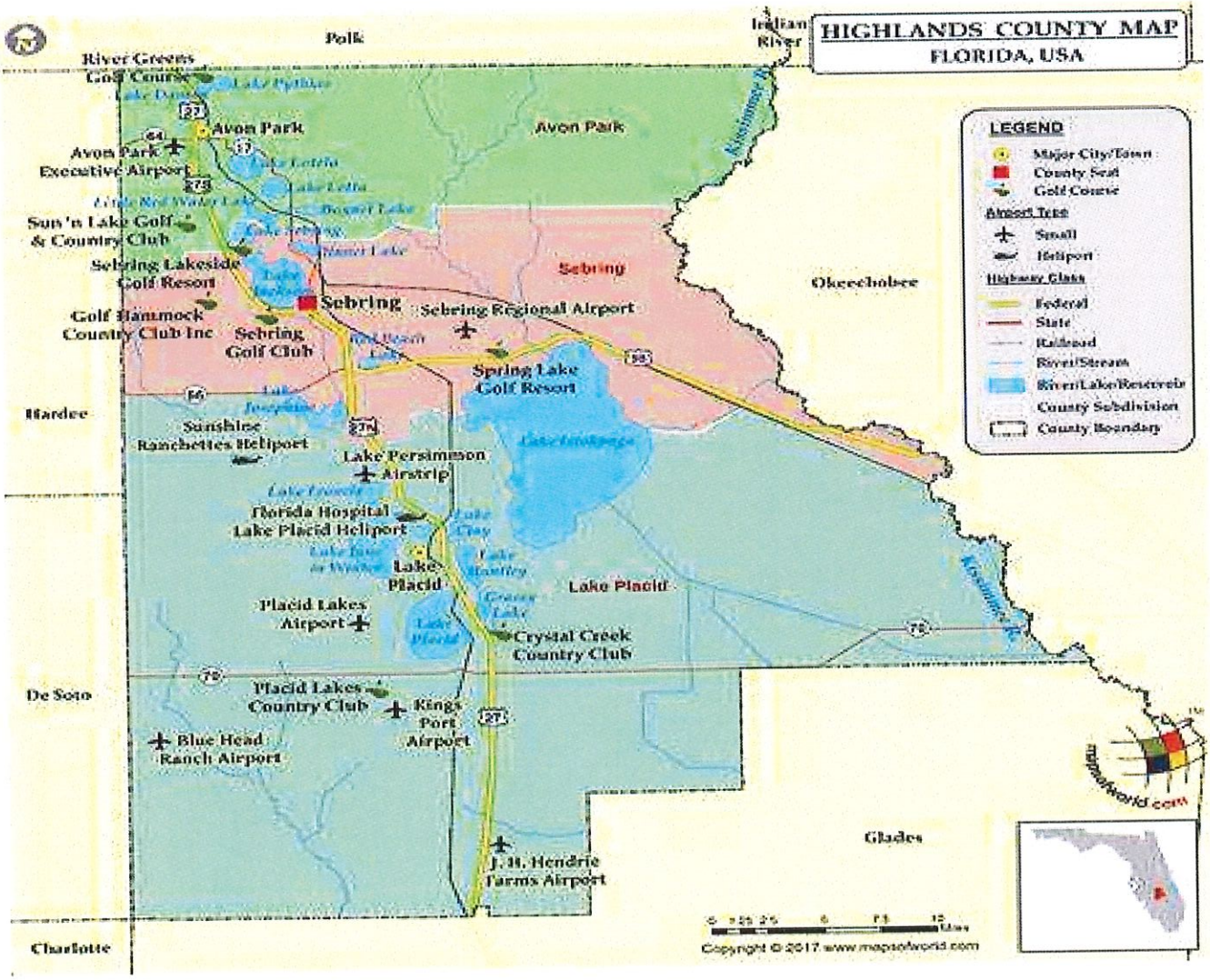
NOTE: Other personnel may be added to the team as deemed necessary by the attending physician or MOD

A Global Medical Response Solution
1105 Barnett Drive
Lake Worth, FL 33461

November 28, 2023

SERVICE AREA TO OPERATE WITHIN

HIGHLANDS COUNTY



A Global Medical Response Solution

www.amr.net

In today's changing environment, Emergency Medical Services will be provided by companies that have the expertise and resources to support communities, health care systems and 9-1-1 providers with quality patient care and dependable nonemergency medical transportation services: These companies will be focused on customer satisfaction, on-time performance, and the consistent delivery of a high standard of care. Increasing demands in patient care, explosive community growth, aging population growth and disaster preparedness/management have created an environment in which the delivery of quality EMS requires focused expertise and resources.

AMR's long-term investments has made it a cornerstone of the community's healthcare services. With over 180 employees and a robust fleet, AMR is uniquely equipped to be a scalable solution for any community needs at a moment's notice. As the nation's largest provider of ground ambulance services, AMR's experience in supporting communities such as Palm Beach County is unmatched. We have the flexibility to provide the County with services to meet any unforeseen circumstances.

AMR provides unparalleled experience as a provider of BLS, ALS, and Critical Care Transport (CCT) and NEMT services across Florida and the entire nation. AMR's Florida Operations include service to 10 of the largest counties, providing efficient, effective, and clinically sophisticated public, private partnerships. In all cases, AMR is committed to raising industry standards and exceeding public expectations.

While 911 and IFT transports are the cornerstone of our business, one of our primary customers in Highlands County is the Sebring Raceway. For many years we have proudly provided rescue services to the racetrack.

At AMR, we believe in building long-term relationships with current providers that are built on mutual trust and integrity. It's a partnership approach that has helped establish AMR as the nation's leading ambulance company. We bring over 50 years of experience to every relationship we enter. Our focus is about providing and enhancing current excellence in the EMS service industry. AMR is committed to providing the right resources and the right support so current EMS resources can better serve the community.

A Global Medical Response Solution

2023/2024 AMR FEE SCHEDULE	
24 HOURS A DAY/7 DAYS A WEEK	
Level of Service/Ambulance Per Trip	Usual & Customary Rate
BLS Non-Emergency	$510.00
BLS Emergency	$510.00
ALS 1 Non-Emergency	$600.00
ALS 1 Emergency	$600.00
ALS 2 (3 medications or more)	$600.00
SCT / CCT	$800.00
Mileage (per mile rate)	$12.00
Oxygen Fee	$30.00
Wait Time per 1/2 hour (BLS)	$50.00
Wait Time per 1/2 hour (ALS+)	$50.00
Team Unloaded Leg Transport (<=25 miles)	$70.00 plus mileage
Team Unloaded Leg Transport (>25 miles)	$70.00 plus mileage
Airport Fee $25.00	

Non-Medical Gurney Rates	
Level of Service/Ambulance Per Trip	Usual & Customary Rate
Gurney (Stretcher) Scheduled >=24 hours	$100.00
Gurney (Stretcher) Scheduled < 24 hours	$100.00
Mileage(per mile rate)	$7.00
COD Flat Rate	$70.00
Non-Medical Wheelchair Rates	
Wheelchair-Scheduled>=24 hours	$65.00
Wheelchair-Scheduled<24 hours	$65.00
Mileage (per mile rate)	$2.99
COD Flat Rate	$35.00

A Global Medical Response Solution

Atlantic Palm Beach Ambulance Inc. d/b/a/ AMR Staff's unit 24 hours per day, 7 days per week. Current staffing patterns consist of 8,10-,12-, and 24-hour shifts.

A Global Medical Response Solution

Additional Requirements 1:

Atlantic Palm Beach Ambulance INC. d/b/a AMR has no investigations or formal disciplinary action from the Florida Department of Health, or any local, state or federal agencies.

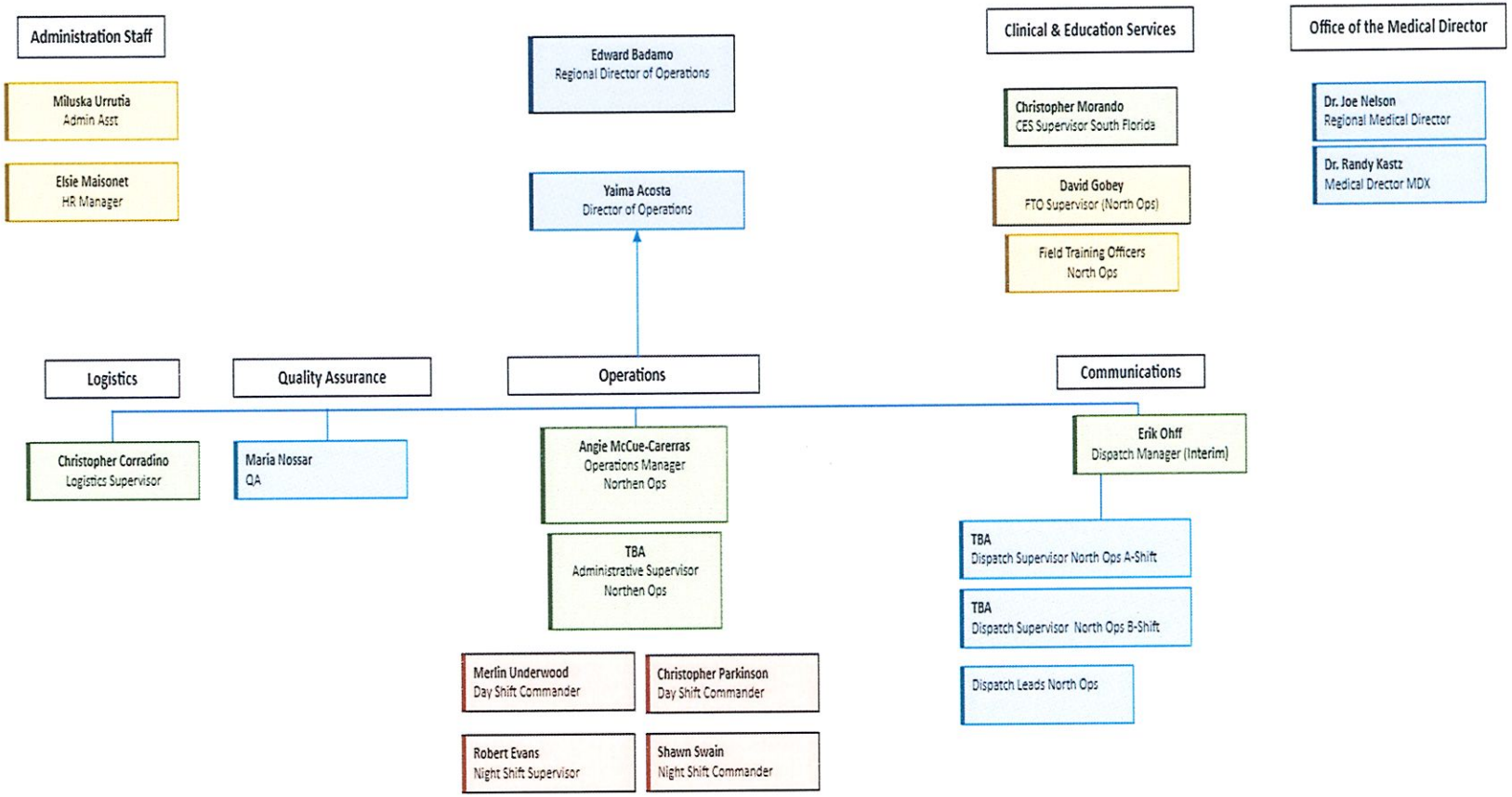
A Global Medical Response Solution

Additional Requirements 2D:

Atlantic Palm Beach Ambulance, Inc d/b/a AMR has no liabilities and no pending liability.

AMR MEDICS

South Florida Operations
Palm Beach Operations



AFFIDAVIT OF PUBLICATION

Highlands News Sun

Published Daily

Sebring, Highlands County, Florida

Case No. AMR

STATE OF FLORIDA
COUNTY OF HIGHLANDS

Before the undersigned authority, Janet Emerson, personally appeared who on oath says that she is the Classified Advertising Legal Clerk of Highlands News Sun, a newspaper published at Sebring in Highlands County, Florida; that the attached copy or reprint of the advertisement, to the right, being a Public Notice, was published in said newspaper by print in the issues of or by publication on the newspaper's website, if authorized, on:

December 23, 2023

Affiant further says that the Highlands News Sun newspaper complies with all legal requirements for publication in chapter 50, Florida Statutes.
SIGNED:

Janet Emerson

Janet Emerson

Sworn to and subscribed before me this 23rd day of December 2023 by Janet Emerson, who is personally known to me.

Nancy Y Whirley, Customer Service Supervisor, Notary Number: HH 293555
Notary expires: July 26, 2026

NANCY Y. WHIRLEY
Notary Public
State of Florida
Comm# HH293555
Expires 7/26/2026

00035703 00145197

HIGHLANDS COUNTY FIRE RESCUE
4506 KENILWORTH BLVD
SEBRING, FL 33870

NOTICE OF APPLICATION FOR RENEWAL OF CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY (COPCN)

Highlands County Emergency Medical Services has received from ATLANTIC PALM BEACH, INC. D/B/A AMR a private not for profit medical provider by the State of Florida Department of Health, an application for a Certificate of Public Convenience and Necessity (COPCN) for Class 1 – Non Emergency Medical Transportation Class 2 – Basic Life Support Ambulance (BLS)and Class 3 Advanced Life Support ambulance (ALS) for Atlantic/Palm Beach Ambulance, Inc., a foreign corporation d/b/a American Medical Response services pursuant to Section 5?55 of the Code of Ordinances, Highlands County, Florida. The applicant intends to serve the geographical area Highlands County, Florida, including all incorporated areas within that County. The Class 1 – Non?Emergency encompasses providing non? emergency transport services to person wo are confined to stretch and /or wheelchair and whose condition is such that these persons do not need and are not likely to need basic life support or advanced life support during transport. The Class 2?Basic Life Support Ambulance class of service encompasses providing basic life support services on inter?facility transports The Class 3 ? Advanced Life Support Ambulance encompasses providing advanced life support services on inter?facility transports

A copy of this notice is available for public inspection during regular business hours in the office of the Clerk of the Board of County Commissioners at the Highlands County Government Center, 590 South Commerce Avenue, Sebring, Florida 33870. The application and further information on the application may be inspected by the public at the Highlands County Fire Rescue Services Administrative Office, 4506 Kenilworth Boulevard, Sebring, Florida 33870, between the hours of 8:00 A.M. and 5:00 P.M. Monday through Friday, except holidays. Inquiries or written testimony should be directed to Dustin Fitch, Interim Deputy Chief, at that address or by phone at (863) 402?7600. Photocopies may be obtained at that location for fifteen cents ($0.15) per single sided page or twenty cents ($0.20) for double sided copies.

Any interested person who may be substantially affected by the applicant's proposed operation may, within 30 days after the date of this notice, file a written objection to the application, specifying the reason therefor with Highlands County Fire Rescue Services 4506 Kenilworth Boulevard, Sebring, Florida 33870.

HIGHLANDS COUNTY
FIRE RESCUE SERVICE
/s/ James K Duppenthaler
Interim Fire Chief
Dec. 23, 2023

HIGHLANDS COUNTY BOARD OF COUNTY COMMISSIONERS
CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY

WHEREAS, *Atlantic Palm Beach Ambulance, Inc. d/b/a AMR* applied for a Class 1 Nonemergency Medical Transportation licensure I Highlands County to provide nonemergency medical transport to the citizens of the county who are confined to stretchers and wheelchairs and whose condition is such that these persons do not need nor are likely to need, immediate medical attention during transport: and

WHEREAS, *Atlantic Palm Beach Ambulance, Inc. d/b/a AMR,* has met all the requirements of Sections 5-52 thru 5-59 of the Code of Ordinances, Highlands County, Florida; and

WHEREAS, *Atlantic Palm Beach Ambulance, Inc. d/b/a AMR*, has indicated that they will comply with all the requirements of Chapter 5 of the Code of Ordinances, Highlands County, Florida, that pertain to the class of service licensed, and will offer twenty-four-hour service to all of Highlands County.

NOW, THEREFORE, the Board of County Commissioners of Highlands County, Florida, does hereby issue a license to *Atlantic Palm Beach Ambulance, Inc. d/b/a AMR*, for Class 1 Nonemergency Medical Transport for a period of two years.

This license is effective January 7, 2024, and will expire January 7, 2026, unless earlier revoked by the Board of County Commissioners.

Attest: _____
Jerome Kaszubowski, Clerk of Courts
Highlands County Florida

_____
Kevin Roberts, Chairman, Board of County Commissioners

Date: January 7, 2024

HIGHLANDS COUNTY BOARD OF COUNTY COMMISSIONERS
CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY

WHEREAS *Atlantic Palm Beach Ambulance, Inc. d/b/a AMR* applied for a Class 2 Basic Life Support Ambulance and Class 3 Advanced Life Support Ambulance certificate of public convenience and necessity to provide Advanced Life Support interfacility transfers and, at the County's request, transport patients to a medical facility; and

WHEREAS, *Atlantic Palm Beach Ambulance, Inc. d/b/a AMR,* has met all the requirements of Sections 5-52 thru 5-59 of the Code of Ordinances, Highlands County, Florida; and

WHEREAS, *Atlantic Palm Beach Ambulance, Inc. d/b/a AMR*, has stated that it will provide twenty-four hour service to all of the geographic areas of Highlands County, will continue to comply with all the requirements of Florida law, Part III of Chapter 401, Florida Statutes, Chapter 64J-1, Florida Administrative Code, the Code of Ordinances, Highlands County, Florida, and the requirements of any other state and federal agencies regulating emergency medical transportation services.

NOW, THEREFORE, the Board of County Commissioners of Highlands County, Florida, does hereby issue this Certificate of Public Convenience and Necessity to *Atlantic Palm Beach Ambulance, Inc. d/b/a AMR*, for Class 2 Basic Life Support Ambulance and Class 3 Advanced Life Support Ambulance pursuant to the terms, conditions, and limitations of Chapter 5 of the Code of Ordinances, Highlands County, Florida, for the remaining period of that Certificate of Public Convenience and Necessity as set forth herein, subject to and conditioned upon the following requirements:

(1) *Atlantic Palm Beach Ambulance, Inc. d/b/a AMR* complies with all requirements of Florida law, Part III of Ch. 401, Florida Statutes, Chapter 64J-1, Florida Administrative Code, the Code of Ordinances, Highlands County, Florida, and the requirements of any other state or federal agencies regulating emergency medical transportation services.

(2) By acceptance of this certificate, *Atlantic Palm Beach Ambulance, Inc. d/b/a AMR*, agrees to indemnify the County and its elected officials, officers, employees, agents, and insurers, for all claims and losses arising out of the operations of *Atlantic Palm Beach Ambulance, Inc. d/b/a AMR* specifically including, but not limited to, all claims and losses arising out of, resulting from or related to employment, by *Rapid Response Medical Transportation LLC d/b/a Rapid Response Ambulance Atlantic Palm Beach Ambulance, Inc. d/b/a AMR,* of off-duty full-time or part-time employees of the County.

(3) *Atlantic Palm Beach Ambulance, Inc. d/b/a AMR* satisfies its obligations stated in Section 5-58(c) of the Code of Ordinances, Highlands County, Florida, which are included herein by this reference.

(4) *Atlantic Palm Beach Ambulance, Inc. d/b/a AMR* is authorized to provide only Advanced Life Support interfacility transfers between facilities described in Section 5-51 of the Code of Ordinances, Highlands County, Florida, and, at the County's request, transport patients to a medical facility subject to the terms, conditions, and limitations of Licensure by the State of Florida, and Divisions 1 and 2 of Article IV of Chapter 5 of the Code of Ordinances, Highlands County, Florida.

(5) *Atlantic Palm Beach Ambulance, Inc. d/b/a AMR* shall provide the services herein authorized twenty-four hours each day to all geographic areas of Highlands County.

(6) This Certificate of Public Convenience and Necessity is effective January 7, 2024, and will expire January 7, 2026, unless earlier revoked by the Board of County Commissioners.

Attest: _____

Jerome Kaszubowski, Clerk of Courts, Highlands County Florida

_____

Kevin Roberts, Chairman, Board of County Commissioners

Date: January 7, 2024

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER:	**Dustin Fitch, Interim Deputy Chief**
SUBJECT/TITLE:	**Public Hearing to consider approval of Positive Mobility Inc. d/b/a Elite Medical Response application for a Class 2 and 3 Certificate of Public Convenience and Necessity (COPCN).**

STATEMENT OF ISSUE

Positive Mobility Inc. d/b/a Elite Medical Response submitted a new application of COPCN Class 2 -Basic Life Support Ambulance and Class 3 -Advanced Life Support Ambulance application to Highlands County EMS on October 2, 2023. The application was found complete and was publicly noticed on November 15, 2023, pursuant to Section 5-56(b) of the Code of Ordinances, Highlands County, Florida.

RECOMMENDED ACTION

Move to approve Positive Mobility Inc. d/b/a Elite Medical Response application for a Class 2 and 3 Certificate of Public Convenience and Necessity (COPCN).

FISCAL IMPACT

There is no fiscal impact.

Attachments: Postive . Elite Medical 11.15.2023.pdf
COPCN - Class 2 & 3.pdf
Cert of Ins Work Comp Elite 1-24-24.pdf
Elite aff.pdf

ELITE MEDICAL RESPONSE
201 Commercial Ct, Sebring, FL 33870 PH: 863-655-0030 FAX: 863-655-0062

DOCUMENT DELIVERY RECEIPT

Delivery of Public Convenience and Necessity Renewal Packet from Positive Mobility, Inc. d/b/a Elite Medical Transport.

Signing of this receipt shall acknowledge hand delivery of complete d/b/a Name Change COPCN Application packet for The Highlands County Board of County Commissioners Certificate of Public Convenience and Necessity (COPCN).

Receiver's
Printed Name: _____ Title: _____

Signature: _____ Date: RECEIVED NOV 15 2023

Signing of this receipt shall acknowledge successful delivery of complete d/b/a Name Change COPCN Application packet for The Highlands County Board of County Commissioners Certificate of Public Convenience and Necessity (COPCN).

Deliverer's
Printed Name: Fred Angeloy Title: Vice Pres.

Signature: _____ Date: 11/15/2023

Highlands County Fire Rescue

CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY
NON-GOVERNMENTAL ENTITY
MEDICAL TRANSPORTATION SERVICE LICENSE APPLICATION

Please type. Answer all questions that apply to the level of service to be provided. Attach additional sheets as needed.

STATEMENTS AND MATERIALS SUBMITTED WILL BE SUBJECT TO VERIFICATION

CHECK TYPE OF APPLICATION FOR CLASSIFICATION OF SERVICE

☑ New ☐ Renewal

☐ Class 1 (NEMT) ■ Class 2 (BLS) ■ Class 3 (ALS) ☐ Class 4 (Air)

Positive Mobility, Inc. d/b/a Elite Medical Response
Name of Service

201 Commercial Court	Sebring	FL	33876
Mailing Address	City	State	Zip Code

(863) 655-0030
Telephone

1. Joel Kestenbaum — JKestenbaum@visionaryhealthcaresolution.com
Owner's Name — Email Address

45 Main St., Suite 804	Brooklyn	NY	11201
Mailing Address	City	State	Zip Code

(Attach names of elected officials associated with your service)

2. Angel Liggins, Highlands Admin Supervisor (954) 793-9398 ALiggins@EMResponse.com
General Manager/Contact Person — Telephone — Email Address

3. Date incorporated/formation of business association: 8-24-2023 (Attachment # 1)

(Attach articles of incorporation; names and address of shareholders along with number of outstanding shares.)

Additional pages may be added as needed

Highlands County Fire Rescue

4. Attach FCC license/communications contract: (Attachment #2)

5. Address of present/proposed main station and any substations (attach list if more than three substations):

   Main Station: Sebring: 201 Commecial Court, Sebring, FL 33876

   Substation: Polk: 4030 Kidron Rd., Lakeland, FL 33881

   Substation: Desoto: 210 W. Gibson St., Arcadia, FL 34266

   Substation: _____

6. Financial Information: (Attachment #3)

   Provide a financial statement as listed in Highlands County Code of Ordinances Section 5-56.

7. Insurance: (Attachment #4)

   Provide copies of Certificates of Insurance as listed in Highlands County Code of Ordinances Section 5-52.

8. Vehicle information: Complete and attach appropriate form.

9. Personnel information: Complete and attach appropriate form.

10. All COPCN applicants:

    A. Attach contract with a medical director as provided by State Law and include copy of DEA license (Class 2, 3, and 4 applicants only).

    B. Statement describing geographical area served by your company.

    C. Statement of facts and data describing the need for your service in Highlands County.

    D. Schedule of proposed fees to be charged for your service.

    E. Identify staffing patterns and operational hours for each permitted vehicle in your fleet.

Highlands County Fire Rescue

Signature of Owner/Manager

Angel Liggins, Highlands Admin Supervisor
Title

STATE OF FLORIDA
COUNTY OF Highlands

Sworn to (or affirmed) and subscribed before me this 15 day of November, 2023, by Angel Liggins (name of person making statement).

AMY M. WIMBERLEY
Notary Public
State of Florida
Comm# HH444633
Expires 10/31/2025

Amy M. Wimberley
(Signature of Notary Public - State of Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known: [X] OR Produced Identification [ ]

Type of Identification Produced:

Attachment #1

Sunbiz.org Division of Corporations an official State of Florida website

Detail by Entity Name

Foreign Limited Liability Company
ELITE MEDICAL RESPONSE LLC

Filing Information

Document Number	M23000011073
FEI/EIN Number	NONE
Date Filed	08/24/2023
State	DE
Status	ACTIVE

Principal Address

45 MAIN ST., STE. 804
BROOKLYN, NY 11201

Mailing Address

45 MAIN ST., STE. 804
BROOKLYN, NY 11201

Registered Agent Name & Address

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

Authorized Person(s) Detail

Name & Address

Title MGR

KESTENBAUM, JOEL
45 MAIN ST., STE. 804
BROOKLYN, NY 11201

Annual Reports

No Annual Reports Filed

Document Images

08/24/2023 -- Foreign Limited View image in PDF format

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Elite Medical Response LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Sandra Thomson
Name of Person

DLA Piper LLP (US)
Firm/Company

650 S. Exeter Street, Suite 1100
Address

Baltimore, MD 21202
City/State and Zip Code

sandra.thomson@us.dlapiper.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sandra Thomson at (410) 580-4253
Name of Contact Person — Area Code — Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:
Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ $125.00 Filing Fee ☐ $130.00 Filing Fee & Certificate of Status ☒ $155.00 Filing Fee & Certified Copy ☐ $160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Elite Medical Response LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")

2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 45 Main Street, Suite 804
Brooklyn, NY 11201
(Street Address of Principal Office)

6. 45 Main Street, Suite 804
Brooklyn, NY 11201
(Mailing Address)

2023 AUG 24 AM 10:11
APPROVED AND FILED

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip code)

Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By: C T Corporation System
(Registered agent's signature)

Madonna Cuddihy, Assistant Secretary

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
☒Manager	Name: Joel Kestenbaum	☐Manager	Name:
☐Member	Address: 45 Main Street, Suite 804	☐Member	Address:
☐Authorized	Brooklyn, NY 11201	☐Authorized	
Person		Person	
☐Other	☐Other	☐Other	☐Other
☐Manager	Name:	☐Manager	Name:
☐Member	Address:	☐Member	Address:
☐Authorized		☐Authorized	
Person		Person	
☐Other	☐Other	☐Other	☐Other
☐Manager	Name:	☐Manager	Name:
☐Member	Address:	☐Member	Address:
☐Authorized		☐Authorized	
Person		Person	
☐Other	☐Other	☐Other	☐Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of an authorized person

Joel Kestenbaum

Typed or printed name of signee

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ELITE MEDICAL RESPONSE LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF AUGUST, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Jeffrey W. Bullock, Secretary of State

7638746 8300

SR# 20233334241

Authentication: 204032543

Date: 08-24-23

You may verify this certificate online at corp.delaware.gov/authver.shtml

ELITE MEDICAL RESPONSE
201 Commercial Ct, Sebring, FL 33870 PH: 863-655-0030 FAX: 863-655-0062

Attachment # 2

November 14, 2023

1. Radio Frequencies: Elite Medical Response uses UHF and VHF Radios, Cell Phones and Tablets.
   Radio Call Number(s): N/A

2. Please list all hospitals or facilities with which you have direct radio communication (attach a separate sheet if needed).
   FROM VEHICLE FROM YOUR BASE STATION
   Desoto County leant 1 radio to the crew on duty to run back up for Desoto County.
   The crew has direct communication with Desoto Fire Rescue and Desoto Memorial ER.

3. Does your communications system provide biotelemetry capability between your personnel and supervising physician(s)? Yes _____ No **X**

Terms & Conditions of Quotation and Sale:

1. Acceptance

a. Purchaser may sign the Seller's quotation and/or issue a valid purchase order with Seller listed as the vendor.

b. All quotations are subject to confirmation by the Seller on receipt of any order and the Seller reserves the right to refuse any order.

c. Quotations provided by the Seller will only remain valid for the period as indicated in the quotation after which the Seller reserves the rights to requote if requested by the Purchaser to proceed further.

2. Title

a. Title to the Goods shall remain vested in the Seller and shall not pass to the Purchaser until all sums due to the Seller under the Contract have been paid in full.

3. Quotation

a. All quotations, indication of costs, and financial commitments given or made by the Seller are based on the assumption of the validity of the information provided being fully accurate and correct in all circumstances. The Seller maintains the right at any stage to re-negotiate any contract, cost agreement, or any other relevant commitment should any information provided by the Purchaser fail to be fully valid, accurate, and correct.

b. Change Orders will need to be processed for additional out-of-scope material and labor, or other required deviations from quotation.

4. Payment Terms

a. Unless otherwise agreed in writing, all sums payable in respect of the Seller must be paid in the full amount as indicated by the invoice in accordance with the payment terms listed.

b. All payments to the Seller shall be made in USD.

c. If payment is not made in accordance with clause 4a, the Seller reserves the right to charge a late payment fee of 1.5% per month, or lesser amount required by law, on amounts not paid.

d. A convenience fee may be applied to payments over $5,000.00 that are made utilizing a credit card.

e. Seller will have the right to make delivery in installments, each of which may be separately invoiced and paid as billed without regard to subsequent deliveries.

f. Seller reserves the right in its absolute discretion to refuse to grant credit.

5. Taxes

a. The Purchaser shall reimburse the Seller for all taxes or other charges which the Seller may be required to pay to any government (national, state, or local) upon the sale or transportation of the Goods.

b. If Purchaser is tax exempt, a tax exemption certificate must be provided to Seller.

6. Delivery

a. If transport is arranged by the Seller, the risk in the Goods shall pass to the Purchaser at the time of the delivery at the said delivery point.

b. If transport is arranged by the Purchaser, risk in the Goods shall pass to the Purchaser immediately after the Goods pass out of the control of the Seller, or its authorized agents.

c. Unless otherwise included in the quotation, freight will be Prepaid & Add to invoice.

Additional Comments:

Prices are valid until 11/05/2023

Accepted By: _____ Date: 9/22/23

Attachment #3

Heartland National Bank

June 28, 2023

Ref: Positive Mobility
201 Commercial Court
Sebring Fl 33876

To whom it may concern:

Positive Mobility has been a customer of Heartland National Bank since May 1. 2008. All accounts have been handled as agreed.

They are a customer in good standing with Heartland National Bank.

Very truly yours,

Janice T. Walker

Janice T. Walker
Sr. Vice President

320 U.S. Hwy. 27 North Sebring, FL 33870-2147 863-386-1300 Fax: 863-386-1302

Attachment #4

477

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 11/15/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Brown & Brown of Florida Inc. - Heacock
32313 Broadway St., Suite 200
Sebring FL 33870

CONTACT NAME: Courtney Stuart
PHONE (A/C, No, Ext): 863-385-5171 **FAX (A/C, No):** 863-385-4130
E-MAIL ADDRESS: cstuart@heacock.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Michigan Construction Industry	
INSURER B : National Interstate Insurance	32620
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED POSIMOB-01
Positive Mobility, Inc
DBA Elite Medical Response
201 Commercial Court
Sebring FL 33876

COVERAGES **CERTIFICATE NUMBER:** 32896904 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
B	X COMMERCIAL GENERAL LIABILITY	Y		LPK455001804	4/1/2023	4/1/2024	EACH OCCURRENCE	$ 1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
							MED EXP (Any one person)	$ 5,000
							PERSONAL & ADV INJURY	$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 3,000,000
	X POLICY PRO-JECT LOC						PRODUCTS - COMP/OP AGG	$ 3,000,000
	OTHER:							$
B	AUTOMOBILE LIABILITY	Y		ACA455001804	4/1/2023	4/1/2024	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY X SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
							PIP	$ 10,000
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	$
	DED RETENTION $							$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N	N / A		WC100-0016375-2023A	1/1/2023	1/1/2024	X PER STATUTE X OTH-ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT	$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000
B	Professional Liability			LPL455001804	4/1/2023	4/1/2024	Per Occurrence	1,000,000
B	Sexual/Physical Abuse Liability			LPK455001804	4/1/2023	4/1/2024	Aggregate	3,000,000
							Each Occur/Aggregate	1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Highlands County, a political subdivision of the State of Florida, its elected officials and agents, employees, and volunteers are included as Additional Insured with regards to the General Liability and Auto Liability policies as required by written contract.

CERTIFICATE HOLDER

Highlands County Board of County Commissioners
600 S Commerce Ave
Sebring FL 33870

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

BLANKET ADDITIONAL INSURED ENDORSEMENT

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM
AUTO DEALERS COVERAGE FORM
TRUCKERS COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by this endorsement.

Who Is An Insured under **COVERED AUTOS LIABILITY COVERAGE** is amended to include as an "insured", any person or organization you are required to add as an additional insured on this policy under a written contract, agreement or permit which must be:

a. currently in effect or becoming effective during the term of the policy; and

b. executed prior to the "bodily injury" or "property damage."

The insurance provided to this additional insured is limited as follows:

1. That person or organization is an additional insured only with respect to liability arising out of your operations performed for that additional insured as specified in the written contract, agreement or permit.

2. The limits of insurance applicable to the additional insured are those in written contract, agreement, permit or in the Declarations for this policy, whichever are less. These limits of insurance are inclusive of and not in addition to the Limit of Insurance for Liability Coverage shown in the Declarations.

3. Coverage is not provided for "bodily injury" or "property damage" arising out of the sole negligence of the additional insured.

Any coverage provided hereunder will be excess over any other valid and collectible insurance available to the additional insured whether primary, excess, contingent or on any other basis unless a contract specifically requires that this insurance be primary.

When this insurance is in excess, we will have no duty to defend the additional insured against any "suit" if any other insurer has a duty to defend the additional insured against that "suit." If no other insurer defends, we will undertake to do so, but we will be entitled to the additional insurer's rights against all those other insurers.

All other terms and conditions of this policy remain unchanged.

 Includes copyrighted material of Insurance Services Office, Inc.

POLICY NUMBER: LPK 4550018 04

COMMERCIAL GENERAL LIABILITY
CG 20 10 04 13

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location(s) Of Covered Operations
As required by written contract.	As required by written contract.
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

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C. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

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Highlands County Fire Rescue

HIGHLANDS COUNTY COPCN CERTIFICATE VEHICLES

Name of Service: Positive Mobility, Inc. Date: 11-15-2023

Unit #	Vehicle Type:	Year/Make	Model	Vehicle Identification #	Mileage
M-1	BLS	2014/FORD	E350	IFDSS3ELXEDB14798	
M-2	ALS/BLS	2020/FORD	TRANSIT	IFDBRICG7LKB66890	
M-3	BLS	2007CHEVY	3500	IGBHG396871229462	
M-4	ALS/BLS	2020/FORD	TRANSIT	1FDBRICGXLKN79004	
M-5	ALS/BLS	2022/FORD	TRANSIT	IFDBRICGINKA76203	
M-6	ALS	2018/FORD	TRANSIT	IFDYR2CM4JKA48329	
M-7	ALS/BLS	2022/FORD	TRANSIT	1FDBRICG7NKA76237	
M-8	ALS	2017/FORD	E350	1FDWE3FS5HDC61159	
M-11	BLS	2014/FORD	E350	IFDSS3EL8EDB14816	
M-19	ALS/BLS	2017/DODGE	3500	3C7WRSBJ5HG770772	
M-22	ALS	2013/DODGE	3500	3C7WRSBL7DG545328	
M-23	BLS	2014/FORD	E350	IFDSS3EL9EDB14789	
M-26	BLS	2016/FORD	F350	IFDWF37P86EA42680	
M-27	ALS	2018/FORD	TRANSIT	1 FDYR2CM2JKA48331	

Form 1C-CERTVEHICLES

Attach additional page(s), if necessary

EMPLOYEE ROSTER

NAME	TITLE	CERTS	CERTS
Kim Bagford	CFO	n/a	
Julian Bembry	EMT	EMT 563634	
Caitlin Cedeno	EMT	EMT 575194	
Holly Chevalier	Logistics	n/a	
Michael Chevalier	Mechanic	n/a	
Steven Cutts	Paramedic	PMD516396	EMT506387
Max D'Amour	EMT	EMT566049	
Christopher Davies	Paramedic	PMD 540776	EMT 563498
Christopher Evans	EMS Driver	DL# E152101881450	
Michael Fulton	System Status & Safety Manager	n/a	
Thomas Gamble	EMT	EMT564883	
Jared Gross	Paramedic	PMD535922	
Chelsee Harrison	EMT	EMT 570268	
Travis Hill	Mechanic	n/a	
Shawn Howarth	EMT	EMT568626	
Ashley Jordan	Billing Specialist	n/a	
William Kozak	EMS Driver	DL# K220937913910	
Alphonse Lanza	Paramedic	PMD12233	
Cord Leyendecker	Paramedic	PMD 521035	EMT 528959
Angel Liggins	Admin Supervisor	n/a	
Julio Lopez Clemente	Paramedic	PMD 533137	EMT585259
Ashley Maddox	EMT	EMT 582283	
Bridget Maddox	EMT	EMT 578547	
Paul Mailly	Paramedic	PMD 517873	
Anthony Malantonio	Dispatcher	n/a	
Dejung Mangum	EMT	EMT 566051	
Heather McCraw Russell	EMT	EMT 570321	
Victoria Millican	EMT	EMT579860	
Meggan Mills	EMS Driver	DL# M420-550-97-691-0	
Contonya Nelson	EMD Dispatcher	IAED Member ID: 107979	
Rachel Quetot	Dispatcher	n/a	
Summer Solyntjes	Dispatcher	n/a	
Renita Sutton	Dispatcher	n/a	
Cody Sweatt	EMT	EMT 578388	
Amanda Torres	EMT	EMT 576840	
Johnnathan Vasquez	EMT	EMT581101	
Krystal Weaver	EMT	EMT 574135	
Andrea Webb	EMD Dispatcher		
Randell Weinberg	Paramedic	PMD518663	
Amy Wimberley	HR	n/a	
Tonya Wingfield	Admin Assistant	n/a	
Fernando Yi	EMS Driver	DL# Y000241623210	
Rajane Young	Dispatcher	n/a	

DocuSign Envelope ID: F22579B6-7C03-493A-B989-EB4764A0B1F4

Attachment #10. A.

November 13, 2023

The existing written medical protocols between Positive Mobility Inc. and Dr. Hinda Greene D.O., revised April of 2020 are now in effect and in agreement between Positive Mobility Inc. D/B/A Elite Medical Response and Dr. Hinda Greene D.O. Any and all amendments or exceptions are also in effect.

DocuSigned by:

9291ECE39DEB455...

Hinda Greene D. O. Medical Director

Positive Mobility Inc. D/B/A Elite Medical Response

201 Commercial Court

Sebring, Florida 33876

DocuSigned by:

Brooke Liddle

6D751988F0C945D...

Brooke Liddle, Chief of Operations

Positive Mobility Inc D/B/A Elite Medical Response

201 Commercial Court

Sebring, Florida 33876

Attachment #10.A.

MEDICAL DIRECTOR SERVICE AGREEMENT
For Positive Mobility, Inc.

This Medical Director Service Agreement is made this 20th day of September, 2009, by and between Positive Mobility, Inc., Sebring, FL (COMPANY) and Dr. Hinda Greene (MEDICAL DIRECTOR) with respect to the following facts:

WHEREAS, COMPANY operates a private ambulance service providing Advanced Life Support (ALS) and Basic Life Support (BLS) services in the State of Florida; and,

WHEREAS, in order to comply with state and local law, COMPANY must act under the auspices of a MEDICAL DIRECTOR and desires to contract with MEDICAL DIRECTOR to facilitate its provision of ambulance service and to ensure compliance with applicable law; and

WHEREAS, MEDICAL DIRECTOR is a licensed physician with experience in the provision of pre-hospital care and is willing to contract with COMPANY to function as its MEDICAL DIRECTOR, upon certain terms and conditions, as set forth herein.

NOW, THEREFORE, for good and valuable consideration, the adequacy of which is hereby acknowledged; the parties agree as follows:

1. **Licensure and Certification.**

1.1 State Licensure of MEDICAL DIRECTOR.

MEDICAL DIRECTOR is a physician (either MD or DO) licensed by the state medical authority in the state in which COMPANY operates and possesses certification in Advanced Cardiac Life Support according to the standards of the American Heart Association. MEDICAL DIRECTOR shall, at all times, maintain this licensure and certification, in good standing with all applicable licensing boards, entities and/or agencies and will provide COMPANY with evidence of current licensure/certification sufficient to satisfy state and local EMS licensing requirements.

1.1.2 Sole Provider of Medical Direction Services.

The MEDICAL DIRECTOR shall be the sole contractor of Medical Direction Services to the COMPANY as set forth in this agreement. The MEDICAL DIRECTOR may, from time to time, assign fulfillment of his/her duties to another Physician of similar background and qualifications termed an Associate Medical Director for periods of time not to exceed three (3) consecutive weeks in duration, when the MEDICAL DIRECTOR is ill, on vacation or otherwise not available. The MEDICAL DIRECTOR shall be responsible for providing any remuneration to the covering Physician.

#15

1.2 DEA Registration of MEDICAL DIRECTOR.

MEDICAL DIRECTOR is a physician (either MD or DO) registered through the United States Department of Justice, Drug Enforcement Agency, either individually or through a hospital, to provide controlled substances, scheduled drugs and/or narcotics. MEDICAL DIRECTOR shall at all times maintain his registration in good standing with the United States Drug Enforcement Agency (DEA) and will provide COMPANY with evidence of current United States DEA registration sufficient to satisfy state and local EMS licensing requirements.

1.3 COMPANY Licensure.

COMPANY is, or shall become, licensed by all applicable state, county and local agencies to provide ALS and BLS ambulance service in the operating area in which COMPANY is located. COMPANY shall at all times maintain its licensure and/or certification in good standing with all applicable state, county and local agencies and will, upon request by the MEDICAL DIRECTOR, present evidence of such licensure or certification.

1.4 Licensure of COMPANY Personnel.

COMPANY shall ensure that its field employees shall become, and will remain, certified/licensed by all applicable state, county and local agencies to provide ALS and BLS services contemplated under this agreement.

1.5 Agreement to Maintain Licensure.

COMPANY warrants and covenants that its personnel will remain certified or licensed in accord with all governing EMS regulatory agencies and authorities and will submit proof of such valid and current licensure to the MEDICAL DIRECTOR upon request. COMPANY understands the importance of ensuring that its personnel remain validly licensed/certified and covenants that it currently has and will maintain a program or system designed to monitor and ensure that its pre-hospital providers, volunteers, agents, employees and/or anyone acting under this Agreement remain properly and currently certified and/or licensed.

2. Duties and Responsibilities of MEDICAL DIRECTOR.

2.1 Familiarity with Governing Laws and Standards.

The MEDICAL DIRECTOR represents and warrants that he/she has reviewed all applicable state, county, regional and local laws, rules and regulations concerning the administration of an ALS/BLS ambulance service and the responsibilities of a MEDICAL DIRECTOR overseeing such an operation. The MEDICAL DIRECTOR is responsible for ensuring the COMPANY operations comply with all state, regional, local and county laws, rules and regulations concerning the medical control and supervision of ALS/BLS ambulance service.

2.2 Ensure Compliance with State Law.

The MEDICAL DIRECTOR will ensure COMPANY compliance with all applicable state laws, rules, regulations, OSHA requirements and all applicable county or local regulations or laws. The MEDICAL DIRECTOR'S responsibility for COMPANY compliance with such laws is limited to informing COMPANY of the requirements, setting-up appropriate operational structures or policies and providing written guidance for COMPANY compliance. In the event the COMPANY or its employees do not comply with laws or regulations within ten (10) days after being informed in writing of any non-compliance by the MEDICAL DIRECTOR, COMPANY shall assume sole liability for civil or criminal penalties imposed as a result of non-compliance.

2.3 Authority to Suspend Clinical Personnel.

The MEDICAL DIRECTOR shall have authority to temporarily suspend from clinical duty any COMPANY employee whose job performance is deemed hazardous to patient care, until such time as administrative action on the MEDICAL DIRECTOR'S concern is completed by COMPANY. MEDICAL DIRECTOR agrees to immediately inform COMPANY Managing Director and Director of Operations of any such suspension undertaken to protect patient care.

2.4 Establishment of Standards and Training.

The MEDICAL DIRECTOR will supervise, set standards and establish procedures, if needed, for the clinical performance of COMPANY emergency medical technicians, paramedics, mobile intensive care transport nurses and other clinical personnel as allowed or required under the laws and regulations of the state, county and/or municipality in which COMPANY operates.

2.4.1 MEDICAL DIRECTOR will assist EMS management in setting up an evaluation process to verify the clinical skill level of COMPANY EMS personnel and establish minimal benchmarks of proficiency.

2.4.2 MEDICAL DIRECTOR shall act as consultant to the COMPANY regarding the appropriateness and medical soundness of its training and continuing education programs.

2.4.3 MEDICAL DIRECTOR will assist the COMPANY in providing as needed, educational programs on relevant clinical topics which meet the continuing educational requirements of the clinical personnel.

2.4.4 MEDICAL DIRECTOR will attend scheduled case reviews in order to provide input and direction to COMPANY clinical personnel.

2.5 Medical Control.

COMPANY clinical personnel will work under the MEDICAL DIRECTOR'S license and MEDICAL DIRECTOR will provide supervision and medical control of COMPANY emergency medical technicians, paramedics, mobile intensive care transport nurses and other clinical personnel as required by the laws of the state, county and/or municipality in which COMPANY operates. MEDICAL DIRECTOR shall participate in the development, review, approval and oversight of standards and protocols governing the operation of COMPANY emergency medical services as required by the laws of the state, county and/or municipality in which COMPANY operates, and shall oversee COMPANY system for monitoring compliance with those standards and protocols. In the event that no such system exists, or is deemed inadequate, MEDICAL DIRECTOR will assist COMPANY in developing and implementing such a system. These standards and protocols include:

2.5.1 Medical protocols.

2.5.2 Transport protocols.

2.5.3 Standards for training, testing and certification of personnel.

2.5.4 On-scene control of patient care, including the interactions between first responders and ambulance personnel, if appropriate.

2.5.5 Standards and procedures related to Do Not Resuscitate (DNR) orders.

2.5.6 Standards and procedures related to patients who decline treatment/transport or elect to proceed Against Medical Advice (AMA).

2.5.7 Standing orders which permit specified ALS and BLS procedures when communication cannot be established with a supervising physician or when a delay in patient care would potentially threaten the life or health of a patient, as allowed by state, county or local law.

2.5.8 Standing orders and protocols to ensure that the COMPANY transports each of its patients to facilities that offer a type and level of care appropriate to the patient's condition, as allowed by state, county of local law.

2.5.9 The MEDICAL DIRECTOR or his/her appointee shall be available to provide continuous 24-hour-per-day, 7-day-per-week medical direction.

2.6 Quality Assurance.

MEDICAL DIRECTOR shall oversee a quality assurance program for COMPANY. In the event that no such system exists, or is deemed inadequate, MEDICAL DIRECTOR will assist COMPANY in developing and implementing such a system. The program shall meet the following minimum requirements:

2.6.1 A documented review and audit of selected COMPANY EMS responses on a monthly basis to ensure compliance with patient care protocols, procedures and standing orders.

2.6.2 In addition to the audits contemplated in paragraph 2.6.1, MEDICAL DIRECTOR shall conduct medical audits of EMS system performance with regard to specific cases as follows:

a. Whenever an audit is requested by a physician involved with an incident or by a patient's personal physician.

b. Whenever a paramedic requests an audit of a case in which that paramedic was involved.

c. Whenever an audit is requested by COMPANY management.

d. Whenever the MEDICAL DIRECTOR has determined that an audit should be conducted.

2.6.3 The method and extent of investigation employed during an audit conducted under this paragraph shall be determined by the MEDICAL DIRECTOR and may range from a simple review of written documentation to a full review of taped communications, interviews with personnel involved, and a formal review conference attended by all personnel involved in the patient's care.

2.6.4 The tone and purpose of an audit shall be positive and educational. Persons whose work is the subject of an audit shall be invited to attend. Whenever audit findings indicate that exemplary care was provided, recognition shall be given. Whenever audit findings indicate a deficiency in clinical performance, appropriate recommendations shall be given to management.

2.6.5 As the quality assurance audits are completed, a written report of the audit(s) will be submitted to the Operations Manager, with a copy to the Division Chief Executive Officer. The report shall include:

a. The number of cases reviewed.

b. A general impression of the care provided.

c. Areas of non-compliance (if any) and recommendations to remedy or improve the system and ensure the delivery of optimal patient care and transportation.

2.7 Liaison.

MEDICAL DIRECTOR shall function as the COMPANY liaison with EMS agencies and medical providers in the community.

2.8 Oversight of controlled substances, non-controlled substances, medications and medical fluids.

2.8.1 Controlled and non-controlled substances.

MEDICAL DIRECTOR shall oversee COMPANY system for administration, acquisition and control of controlled or non-controlled substances as deemed necessary for the provision of care prescribed in the medical treatment protocols. In the event no such system exists, or is deemed inadequate, MEDICAL DIRECTOR will assist COMPANY in developing and implementing such a system.

2.8.2 Security Procedures.

MEDICAL DIRECTOR will oversee security procedures of COMPANY for medications, fluids and controlled substances are in compliance with all applicable DEA, state, county, regional and municipal laws governing the maintenance, use, storage and security of such substances. In the event no such procedures exists, or are deemed inadequate, MEDICAL DIRECTOR, will assist COMPANY in developing and implementing such a system.

3. Duties and Responsibilities of COMPANY.

3.1 Company Standards.

COMPANY shall meet or exceed all applicable standards and requirements of the laws of the state, county or municipality in which COMPANY operates for licensure and operation as an ALS and BLS provider, as applicable.

3.2 Maintenance of Clinical Licenses.

COMPANY will establish procedures to ensure that all of its clinical personnel are certified and/or licensed, and remain currently certified or licensed, as paramedics, emergency medical technicians, mobile intensive transport nurses or other appropriate pre-hospital care givers as required by the laws and regulations of the state, county and/or municipality in which COMPANY operates.

3.3 Agreement to Follow Clinical Directives.

COMPANY will communicate with MEDICAL DIRECTOR and follow MEDICAL DIRECTOR'S advice with regard to recommendations and remedial or corrective measures on clinical aspects of the operation of COMPANY emergency service system, including inspection, evaluation and approval of the system performance specifications, medical audit, review and critique of the performance of the EMS clinical providers or critique of the quality assurance program.

3.4 MEDICAL DIRECTOR Access.

COMPANY will allow access to its facilities and records and fully cooperate with MEDICAL DIRECTOR in implementing any necessary programs and following his/her directives.

3.5 Adherence to Protocol.

COMPANY will follow all protocols, procedures and directives issued by the MEDICAL DIRECTOR. COMPANY will adhere to the protocols propounded by the MEDICAL DIRECTOR and will comply with all field performance guidelines, protocols and/or training guidelines governing COMPANY as they currently exist or as they may, from time to time, be amended or supplemented.

3.6 Participation in EMS Program.

COMPANY agrees to participate, and agrees to cause it's employees to participate, in all necessary and applicable county, regional, state or national EMS programs required by the laws and regulations of the state, county and/or municipality in which COMPANY operates.

3.7 Indemnification.

COMPANY will defend and indemnify any action brought against MEDICAL DIRECTOR or an Associate Medical Director arising out of the duties and responsibilities set forth in the Agreement.

3.7.1 COMPANY has the right to control the defense of any such action and in its sole discretion settle, compromise or resolve said action upon such terms as COMPANY believes appropriate.

3.7.2 MEDICAL DIRECTOR shall cooperate in the defense of any such claim and will participate in the defense as, when, and where requested by the COMPANY.

3.7.3 COMPANY shall purchase "MEDICAL DIRECTOR Coverage" to protect against loss arising out of MEDICAL DIRECTOR'S or Associate Medical Director's administrative duties on behalf of COMPANY. COMPANY purchase, acquisition and maintenance of a policy of MEDICAL DIRECTOR'S coverage shall fully satisfy COMPANY duty to defend and indemnify MEDICAL DIRECTOR for administrative duties.

3.7.4 COMPANY shall maintain professional liability coverage of at least $1 million per occurrence and $3 million aggregate in any given year for MEDICAL DIRECTOR or an Associate Medical Director for duties related to COMPANY business operation.

3.8 Administration.

COMPANY will supply all materials needed for the audit of patient care and will fully cooperate with MEDICAL DIRECTOR during all inspections.

3.8.1 COMPANY will provide clinical and administrative support as appropriate the duties set forth in Section 2 of this agreement.

3.9 Response to MEDICAL DIRECTOR Requests.

COMPANY will respond in a timely manner and institute appropriate changes in clinical operation, procedure or protocol needed to affect an improvement in patient care, or correct any deficiencies in equipment or violation of applicable laws or regulations.

4. **Terms.**

4.1 Duration.

This Agreement shall take effect when signed by all parties and shall continue until terminated by mutual agreement of the parties or as otherwise provide herein.

4.2 Termination upon Notice.

Either party may terminate this Agreement, with or without cause, upon ninety (90) days advance written notice to the other party.

4.3 Termination Due to Suspension of Licensure.

This Agreement shall terminate immediately in the event that the license/certification or right to practice or provide transport service held by COMPANY or MEDICAL DIRECTOR is suspended or revoked.

5. **Independent Contractor Relationship.**

5.1 MEDICAL DIRECTOR is an Independent Contractor.

The MEDICAL DIRECTOR is an Independent Contractor with COMPANY and as such is not entitled to benefits, programs and rights normally offered to managerial level employees of COMPANY.

5.2 COMPANY Not Responsible for Deductions.

MEDICAL DIRECTOR shall be treated as an Independent Contractor with COMPANY for federal or state tax purposes.

5.3 Nature of Relationship.

The parties acknowledge that the relationship created by this Agreement is that of two (2) independent contracting parties and that no partnership, joint venture or any affiliation or relationship between the parties shall be created hereby.

6. Miscellaneous.

6.1 No Authority to Contract.

It is expressly understood and agreed that MEDICAL DIRECTOR shall have no right or authority of any type to make any contract or binding promise of any nature on behalf of COMPANY, whether oral or in writing, without express prior written consent of COMPANY.

6.2 Proprietary Information.

Any and all information, records, specifications, and any other type of date, whether written or oral, which is:

a. Provided by COMPANY to MEDICAL DIRECTOR in the course of the performance of MEDICAL DIRECTOR'S services,

b. Belongs to COMPANY and to which MEDICAL DIRECTOR has access, or

c. Is developed by MEDICAL DIRECTOR during the performance of services under this Agreement, is proprietary information and shall remain trade secrets and the exclusive property of COMPANY.

d. MEDICAL DIRECTOR shall not disclose any of the aforesaid trade secrets and/or proprietary information, directly or indirectly, or use such information in any way, either during the term of this Agreement or any time thereafter, except as authorized and required in the course of MEDICAL DIRECTOR'S services under the terms of this Agreement.

e. All files, records, documents, drawings, specifications, compilations of information, data, equipment and any other thing related to the business of COMPANY, whether prepared by MEDICAL DIRECTOR or otherwise coming into MEDICAL DIRECTOR'S possession, shall be returned to COMPANY at the termination of this Agreement. MEDICAL DIRECTOR shall not keep copies of any COMPANY information in any form after termination of this Agreement.

6.3 Assignment.

MEDICAL DIRECTOR'S rights and obligations under this Agreement are personal and not assignable, except as done through written authorization of an Associate Medical Director who may act at the behest of the MEDICAL DIRECTOR.

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6.4 Amendment of Agreement.

Any amendment or modification of this Agreement will be effective only if it is in writing and signed by MEDICAL DIRECTOR and an officer of COMPANY duly authorized to execute such an Agreement.

6.5 Arbitration.

Any unresolved dispute that may arise under this Agreement or relating to any breach hereof shall be submitted to and resolved by arbitration by the American Arbitration Association in accordance with its commercial arbitration rules and the laws of the state in which COMPANY operates the ambulance service giving rise to this Agreement. The written determination of the arbitrator shall be final, binding and conclusive on the parties.

6.5.1 Not withstanding the provisions of paragraph 6.5 of the Agreement, the parties agree that money damages would not be a sufficient remedy for any breach of paragraph 6.2 hereof and, in addition to any other remedy available herein, COMPANY is entitled to equitable and/or injunctive relief as a remedy for any such breach.

In the event of a breach or alleged breach of paragraph 6.2 by MEDICAL DIRECTOR, the parties agree that COMPANY may apply to a court of competent jurisdiction for equitable and/or injunctive relief to halt such breach.

6.6 Headings.

The paragraph headings used in this Agreement are for reference and convenience only, and shall not in any way limit or amplify the terms and provisions hereof.

6.7 Severability.

Each and every provision of this Agreement is severable and independent of any other term or provisions of this Agreement. If any term or provision of this Agreement is held void, unenforceable or invalid for any reason whatsoever by any court of competent jurisdiction or the American Arbitration Association, such invalidity shall not affect the remainder of the Agreement.

6.8 Entire Agreement.

This Agreement contains the entire agreement between the parties and supersedes all other agreements, whether oral or written, between the parties hereto. Each party acknowledges that no representations, inducements, promises or agreements have been made by any party, or any one acting on behalf of a party, which are not contained in this Agreement and that no other agreement, statement or promise not contained in this Agreement shall be valid or binding.

+5

6.9 Waiver.

No waiver by COMPANY of any failure by MEDICAL DIRECTOR to keep or perform any provision of this Agreement shall be deemed to be a waiver of any proceeding or succeeding breach of this same or other provision by MEDICAL DIRECTOR.

6.10 Construction of Agreement.

This Agreement shall be interpreted so as to give affect to the intentions of the parties.

6.10.1 The purpose of this Agreement is to fully comply with all applicable state, county, municipal or regional laws and regulations concerning the requirement that COMPANY operates under the direction of a MEDICAL DIRECTOR and to define the relationship between the parties. MEDICAL DIRECTOR will perform such additional functions as are required of a MEDICAL DIRECTOR by laws of the state, county and/or municipality in which COMPANY operates.

6.10.2 This Agreement has been negotiated between unrelated parties each of which have been represented, or have had the opportunity to be represented, by experienced and knowledgeable counsel. Accordingly, any rule of law, as well as any statute, law, ordinance, legal decision, law principle or any other authority that would require a legal interpretation of any ambiguities in this Agreement against any party who has drafted it, is not applicable and is hereby waived. The provisions of this Agreement shall not be interpreted or construed against any party to this Agreement based upon the fact that it, or its attorney, drafted the Agreement.

7. **Notices.**

7.1 Notice Effective When Mailed.

All notices, demands or mailings shall be in writing and shall be deemed made on the date of personal delivery or five (5) days after being sent by Certified US Mail, Return Receipt Requested, to the following addresses:

COMPANY

Positive Mobility, Inc.
201 Commercial Court
Sebring, FL 33876

MEDICAL DIRECTOR

Dr. Hinda Greene
3640 Lakeview Drive
Sebring, FL 33870

IN WITNESS WHEREOF, the parties represent and declare that they have carefully read this agreement and know and understand the contents thereof, and agree to all of the terms and conditions herein, and have signed the Agreement freely and voluntarily.

COMPANY: Positive Mobility, Inc.

BY:_____

Ron Layne, President

DATE: 9-20-2009

MEDICAL DIRECTOR: Dr. Hinda Greene, DO

BY:_____

Dr. Hinda Greene, DO

DATE: 9-20-2009

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
FG2222317	09-30-2025	$888

SCHEDULES	BUSINESS ACTIVITY	ISSUE DATE
2,2N,3, 3N,4,5	PRACTITIONER	10-03-2022

GREENE, HINDA MARSHA, DO
201 COMMERCIAL CT
SEBRING, FL 338766524

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON D.C. 20537

Sections 304 and 1008 (21 USC 824 and 958) of the Controlled Substances Act of 1970, as amended, provide that the Attorney General may revoke or suspend a registration to manufacture, distribute, dispense, import or export a controlled substance.

THIS CERTIFICATE IS NOT TRANSFERABLE ON CHANGE OF OWNERSHIP, CONTROL, LOCATION, OR BUSINESS ACTIVITY, AND IT IS NOT VALID AFTER THE EXPIRATION DATE.

CONTROLLED SUBSTANCE REGISTRATION CERTIFICATE
UNITED STATES DEPARTMENT OF JUSTICE
DRUG ENFORCEMENT ADMINISTRATION
WASHINGTON D.C. 20537

DEA REGISTRATION NUMBER	THIS REGISTRATION EXPIRES	FEE PAID
FG2222317	09-30-2025	$888

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GREENE, HINDA MARSHA, DO
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Form DEA-223 (9/2016)

STATE OF FLORIDA
DEPARTMENT OF HEALTH
DIVISION OF MEDICAL QUALITY ASSURANCE

AC# 1088882

DATE	LICENSE NO.	CONTROL NO.
03/24/2022	OS 5993	91210

THE OSTEOPATHIC PHYSICIAN

NAMED BELOW HAS MET ALL REQUIREMENTS OF
THE LAWS AND RULES OF THE STATE OF FLORIDA.

Expiration Date : MARCH 31, 2024

HINDA MARSHA GREENE, DO

LICENSEE SIGNATURE

ELITE MEDICAL RESPONSE
201 Commercial Ct, Sebring, FL 33870 PH: 863-655-0030 FAX: 863-655-0062

Attachment # 10. B.

November 14, 2023

1. List the address and/or describe the location of your base station and all substations (attach separate sheet if needed). List hours of operation and staffing for each location

   Main base – 201 Commercial Court, Sebring, FL 33876 – HR's 24/7 365 days – BLS & ALS
   Polk base – 4030 Kidron Rd., Lakeland, FL 33811 – HR's 24/7 365 days – BLS
   Desoto base – 210 W. Gibson St., Arcadia, FL 34266 – HR's 24/7 365 days – ALS

2. Describe the geographic area to be served by your service. Attach map showing area described, if necessary. All of Highlands County to include Sebring, Avon Park, Lake Placid, Venus & Lorida.

Attachment # 10. C.

ELITE MEDICAL RESPONSE

201 Commercial Ct, Sebring, FL 33870 PH: 863-655-0030 FAX: 863-655-0062

November 14, 2023

Chief Dustin Finch
Highlands County Fire Rescue
4506 Kenilworth Blvd
Sebring, Florida 33870

Re: Highlands County COPCN Application

Dear Mr. Finch,

Regarding a statement of facts for our COPCN Application. Positive Mobility, Inc. d/b/a Elite Medical Response was the first company in Highlands County to be properly licensed and insured to do medical transportation. We have been transporting patients into and out of area hospitals for over 17 years.

Sincerely,

Fred Angelo
Vice President
Government Relations
(561) 721-5988

Attachment # 10. D.

ELITE MEDICAL RESPONSE

201 Commercial Ct, Sebring, FL 33870 PH: 863-655-0030 FAX: 863-655-0062

	2023 PMT FEE	
	PRIVATE PAY RATES	
SERVICE LEVEL		PMT FEE
MILEAGE	A0425	$12.50 PER MILE
ALS (EMERGENT)	A0427	$750.00
BLS (EMERGENT)	A0429	$650.00
ALS 2	A0433	$850.00
CCT	A0434	$950.00
ALS (NON EMERGENT)	A0428	$650.00
BLS (NON EMERGENT)	A0426	$550.00
BARI TRANSPORT (ADDED TO LOS)		$250 CREW OF 4
ADD MEMBER FOR BARI		$50 PER PERSON
NON MEDICAL "NMS"		
NON MED STR "NMS"		$100.00
MILEAGE NMS, NMS BARI, NMS B/R		$3.50 PER MILE
WAIT TIME FIRST HOUR		FREE
ADDITIONAL WAIT TIME		$150 PER HOUR
NMS BARI TRANSPORT		$250 CREW OF 4
ADD MEMBER FOR BARI		$50 PER PERSON
ADDITIONAL SERVICES		
BODY REMOVAL		$250.00
ALS STANDBY		$150.00 PER HOUR
BLS STANDBY		$125.00 PER HOUR

Attachment #10. E.

ELITE MEDICAL RESPONSE

201 Commercial Ct, Sebring, FL 33870 PH: 863-655-0030 FAX: 863-655-0062

November 14, 2023

Chief Dustin Finch
Highlands County Fire Rescue
4506 Kenilworth Blvd
Sebring, Florida 33870

Re: Highlands County COPCN Application

Dear Mr. Finch,

Regarding Elite Medical Response (EMR) staffing patterns for our COPCN Application. Elite Medical Response staffs (1) BLS ambulances during peak hours with minimum staffing of (1) EVOC Driver / First Responder and (1) EMT=B each. We additionally staff (2) ALS/CCT ambulances 24/7 with a minimum staffing of (1) EMT-Basic and (1) Paramedic.

Sincerely,

Fred Angelo
Vice President
Government Relations
(561) 721-5988

Highlands County Fire Rescue

COPCN MANAGEMENT INFORMATION FORM

Name of service: Positive Mobility, Inc. d/b/a Elite Medical Response

Website address: _____

Highlands County business address:
201 Commercial Court

City and Zip Code: Sebring 33876

Headquarters business address:
201 Commercial Court

City and Zip Code: Sebring 33876

Dispatch telephone number: (877) 605-3204

Management Contact Information

Name: Angel Liggins, Highlands Admin Supervisor

24-hour contact number: (954) 793-9398

Name: Michael Fulton, Systems Status & Safety Mgr.

24-hour contact number: (772) 559-8488

Highlands County Fire Rescue

Additional requirements:

1. Attach letter of any investigation or formal disciplinary action involving your agency by the Florida Department of Health, or any local, state, or federal agency.

2. The financial ability of the applicant to provide the proposed services based on, at minimum, attach the following criteria:

    a. Audited financial statements or federal tax returns or, for newly formed corporations, personal audited financial statements from the principal(s), as defined by the county administrator.
    b. Pro forma statements.
    c. Credit and bank references, and current official credit report.
    d. Disclosure of any and all pending liabilities.

3. Attach the management plan of the applicant.

All applicants:

1. Return signed, notarized application along with a non-refundable application fee of $500, and vehicle permit fees of $100 per vehicle listed on Highlands County COPCN Certificate Vehicle form made payable to the Highlands County Board of County Commissioners.

2. Renewal applicants: Return signed, notarized application along with a non-refundable application fee of $500, and vehicle permit fees of $100 per vehicle listed on the Highlands County COPCN Certificate Vehicle form made payable to the Highlands County Board of County Commissioners. If request for renewal is less than three months from the expiration of COPCN or application inaccuracies caused by the applicant create a delay of renewal to extend beyond the expiration of the services current COPCN, a $250 late fee will be imposed and required paid prior to notification of renewal request.

HIGHLANDS COUNTY BOARD OF COUNTY COMMISSIONERS

CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY

WHEREAS, *Positive Mobility, Inc. d/b/a Elite Medical Response.* applied for a Class 2 Basic Life Support Ambulance and Class 3 Advanced Life Support Ambulance certificate of public convenience and necessity to provide Advanced Life Support interfacility transfers and, at the County's request, transport patients to a medical facility; and

WHEREAS, *Positive Mobility, Inc. d/b/a Elite Medical Response,* has met all the requirements of Sections 5-52 thru 5-59 of the Code of Ordinances, Highlands County, Florida; and

WHEREAS, *Positive Mobility, Inc. d/b/a Elite Medical Response.*, has stated that it will provide twenty-four hour service to all of the geographic areas of Highlands County, will continue to comply with all the requirements of Florida law, Part III of Chapter 401, Florida Statutes, Chapter 64J-1, Florida Administrative Code, the Code of Ordinances, Highlands County, Florida, and the requirements of any other state and federal agencies regulating emergency medical transportation services.

NOW, THEREFORE, the Board of County Commissioners of Highlands County, Florida, does hereby issue this Certificate of Public Convenience and Necessity to *Positive Mobility, Inc. d/b/a Elite Medical Response.*, for Class 2 Basic Life Support Ambulance and Class 3 Advanced Life Support Ambulance pursuant to the terms, conditions, and limitations of Chapter 5 of the Code of Ordinances, Highlands County, Florida, for the remaining period of that Certificate of Public Convenience and Necessity as set forth herein, subject to and conditioned upon the following requirements:

(1) *Positive Mobility, Inc. d/b/a Elite Medical Response.,* complies with all requirements of Florida law, Part III of Ch. 401, Florida Statutes, Chapter 64J-1, Florida Administrative Code, the Code of Ordinances, Highlands County, Florida, and the requirements of any other state or federal agencies regulating emergency medical transportation services.

(2) By acceptance of this certificate, *Positive Mobility, Inc. d/b/a Elite Medical Response.*, agrees to indemnify the County and its elected officials, officers, employees, agents, and insurers, for all claims and losses arising out of the operations of *Positive Mobility, Inc. d/b/a Elite Medical Response.* specifically including, but not limited to, all claims and losses arising out of, resulting from or related to employment, by *Positive Mobility, Inc. d/b/a Elite Medical Response,* of off-duty full-time or part-time employees of the County.

(3) *Positive Mobility, Inc. d/b/a Elite Medical Response.* satisfies its obligations stated in Section 5-58(c) of the Code of Ordinances, Highlands County, Florida, which are included herein by this reference.

(4) *Positive Mobility, Inc. d/b/a Elite Medical Response.,* is authorized to provide only Advanced Life Support interfacility transfers between facilities described in Section 5-51 of the Code of Ordinances, Highlands County, Florida, and, at the County's request, transport patients to a medical facility subject to the terms, conditions, and limitations of Licensure by the State of Florida, and Divisions 1 and 2 of Article IV of Chapter 5 of the Code of Ordinances, Highlands County, Florida.

(5) *Positive Mobility, Inc. d/b/a Elite Medical Response* shall provide the services herein authorized twenty-four hours each day to all geographic areas of Highlands County.

(6) This Certificate of Public Convenience and Necessity is effective February 6, 2024 and will expire February 6, 2026, unless earlier revoked by the Board of County Commissioners.

Attest: _____
Jerome Kaszubowski, Clerk of Courts, Highlands County Florida

_____
Kevin Roberts, Chairman, Board of County Commissioners

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 01/24/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME: Nick Rains	
Rains Insurance 204 N 2ND ST FORT PIERCE FL 34950-4406	PHONE (A/C, No, Ext): (772) 464-4740	FAX (A/C, No): (772) 409-4722
	E-MAIL ADDRESS: Nick@rainsinsurance.com	
	INSURER(S) AFFORDING COVERAGE	**NAIC #**
	INSURER A : Wellfleet New York Insurance Company - A Stock	
INSURED Positive Mobility Inc. DBA Elite Medical Response 201 Commercial Ct Sebring FL 33876	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** 1 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☐ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC ☐ OTHER:						EACH OCCURRENCE	$
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
							GENERAL AGGREGATE	$
							PRODUCTS - COMP/OP AGG	$
								$
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident)	$
							BODILY INJURY (Per person)	$
							BODILY INJURY (Per accident)	$
							PROPERTY DAMAGE (Per accident)	$
								$
	☐ **UMBRELLA LIAB** ☐ OCCUR ☐ **EXCESS LIAB** ☐ CLAIMS-MADE ☐ DED ☐ RETENTION $						EACH OCCURRENCE	$
							AGGREGATE	$
								$
A	**WORKERS COMPENSATION AND EMPLOYERS' LIABILITY** ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N ☐ **(Mandatory in NH)** If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		N9WC388434	01/04/2024	01/04/2025	☐ PER STATUTE ☐ OTH-ER	
							E.L. EACH ACCIDENT	$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

Highlands County BOCC

600 South Commerce Dr.
Sebring FL 33870

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



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AFFIDAVIT OF PUBLICATION

Highlands News Sun

Published Daily

Sebring, Highlands County, Florida

Case No. Positive Mobility Class 2 & 3

STATE OF FLORIDA
COUNTY OF HIGHLANDS

Before the undersigned authority, Janet Emerson, personally appeared who on oath says that she is the Classified Advertising Legal Clerk of Highlands News Sun, a newspaper published at Sebring in Highlands County, Florida; that the attached copy or reprint of the advertisement, to the right, being a Public Notice, was published in said newspaper by print in the issues of or by publication on the newspaper's website, if authorized, on:

December 08, 2023

Affiant further says that the Highlands News Sun newspaper complies with all legal requirements for publication in chapter 50, Florida Statutes.
SIGNED:

Janet Emerson

Sworn to and subscribed before me this 8th day of December 2023 by Janet Emerson, who is personally known to me.

Nancy Y Whirley, Customer Service Supervisor, Notary Number: HH 293555
Notary expires: July 26, 2026

NANCY Y. WHIRLEY
Notary Public
State of Florida
Comm# HH293555
Expires 7/26/2026

00035703 00143743

HIGHLANDS COUNTY FIRE RESCUE
4506 KENILWORTH BLVD
SEBRING, FL 33870

NOTICE OF APPLICATION FOR CLASS 2 AND CLASS 3 CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY (COPCN)

Highlands County Fire Rescue has received from POSITIVE MOBILITY, INC., d/b/a/ ELITE MEDICAL RESPONSE, a private for profit registered Florida corporation and licensed EMS service provider by the State of Florida Department of Health, an application for renewal of their Certificate of Public Convenience and Necessity (COPCN) to allow such services as are considered, Class 2 Basic Life Support ambulance and Class 3 Advanced Life Support ambulance pursuant to Section 5-55 of the Code of Ordinances, Highlands County Florida. The Class 2-Basic Life Support Ambulance class of service encompasses providing basic life support services on inter-facility transports. The Class 3 Advanced Life Support Ambulance encompasses providing advanced life support services on inter facility transports. Both classes 2 and 3 of service may at the county's request transport patients to a medical facility and may render on-scene assistance to victims prior to transport. The applicant intends to serve the geographical area of Highlands County Florida, including all incorporated areas within that County.

A copy of this notice is available for public inspection during regular business hours in the office of the Clerk of the Board of County Commissioners at the Highlands County Government Center, 590 South Commerce Avenue, Sebring, Florida 33870. The application and further information on the application may be inspected by the public at the Highlands County Fire Rescue Service Administrative Office, 4506 Kenilworth Boulevard, Sebring, Florida 33870 between the hours of 8:00 a.m. and 5:00 p.m. Monday through Friday, except holidays. Inquiries or written testimony should be directed to Dustin Fitch, Interim Deputy Chief, at that address or by 'phone at 863-402-7600. Photocopies may be obtained at that location for fifteen cents ($0.15) per single sided page or twenty cents ($0.20) for double sided copies.

Any interested person who may be substantially affected by the applicant's proposed operation may, within 30 days after the date of this notice, file a written objection to the application, specifying the reason therefor with Highlands County Fire Rescue, 4506 Kenilworth Boulevard, Sebring, Florida 33870.

HIGHLANDS COUNTY FIRE RESCUE

/s/ James K. Duppenthaler
Interim Fire Chief
Dec. 8, 2023

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER:

SUBJECT/TITLE: **Request direction related to future mobile home development standards, code changes and/or process changes.**

STATEMENT OF ISSUE

On December 5, 2023, the Board held a mobile home workshop to gain information related to certain County impacts stemming from existing mobile home parks in Highlands County, proper planning for the future of mobile home parks in Highlands County and tools available or necessary for the County to perpetuate smart growth. Specific direction was not given at the workshop with respect to the next steps related to future mobile home development in Highlands County and direction is needed.

RECOMMENDED ACTION

Discuss and direct the County Administrator and County Attorney how to proceed related to future mobile home development in Highlands County.

FISCAL IMPACT

Laurie Hurner, County Administrator
Sherry Sutphen, County Attorney

Attachments: Mobile_Home_Workshop_Presentation.pdf



MOBILE HOME WORKSHOP

HIGHLANDS COUNTY BOARD OF COUNTY COMMISSIONERS

AGENDA

- Opening Comments
  - Introduction of Workshop
  - Introduction of Team
- Presentation
- Questions and Answers
- Closing
- Adjourn



Mobile or Manufactured Home



Modular Home



Tiny Home on Wheels



Park Model



Tiny Home on Foundation

PROPERTY APPRAISAL

USE CODE	BUILDING CODE	PARCEL COUNT	UNITS	AVG TAXABLE VALUE	2023 COUNTY MILLAGE	AVG TAXES	NOTES
01	Single Family	31,461		$ 122,359	7.85	$ 960.52	
01	Mobile Home	5,353		$ 40,834	7.85	$ 325.55	
03	Multi-Family >10	56	1,587	$ 37,605	7.85	$ 295.20	
08	Multi-Family <10	682	1,510	$ 53,883	7.85	$ 422.98	

MOBILE HOME RENTAL PARKS (SAMPLE)

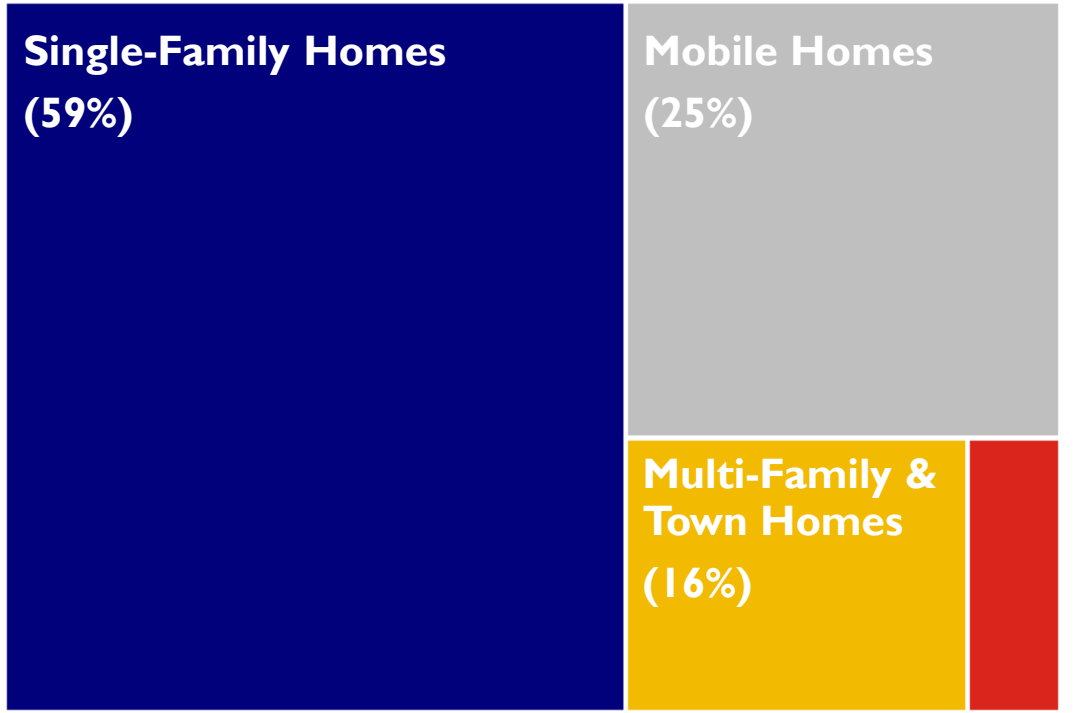
	Year	Site Count	Avg tax value	Millage	Avg taxes	Notes
Park 1	2022	216	$ 83,054	7.85	$ 651.97	
Park 2	1998	1,080	$ 55,117	7.85	$ 432.67	$ 10.3m Differential
Park 3	1984	398	$ 41,412	7.85	$ 325.08	$ 2.0m Differential



2019 HIGHLANDS COUNTY HOUSING STUDY

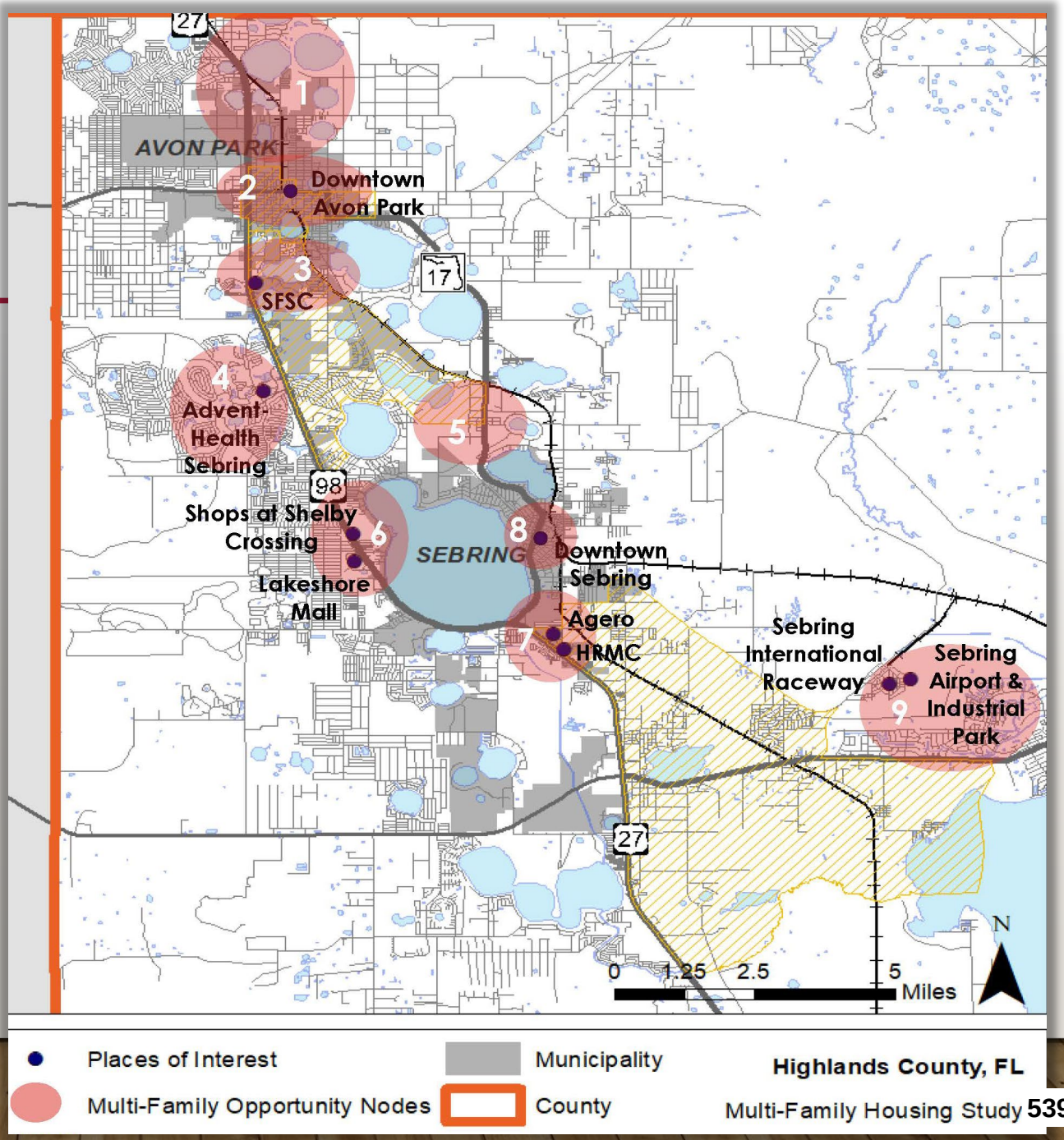
2019 HIGHLANDS COUNTY HOUSING STUDY

- Lack of Multi-Family Housing Options
- Rental Development Lags Behind
  - Desirable area for vacation homes
  - As a second home location
- In the last decade, 2013 - 2023:
  - 63 permits issued for duplexes
  - 65 permits issued for apartment units
- Future rental unit needs:
  - 685 additional multi-family units by 2028



HOUSING STUDY RECOMMENDATIONS

1. Diversify Housing Options to include more Multi-Family (MF) Units
   - 21% of the County's population rents
   - 12.5% of housing units are MF units
2. Identified and Recommend Pursuing the Development of Nine Multi-Family Nodes



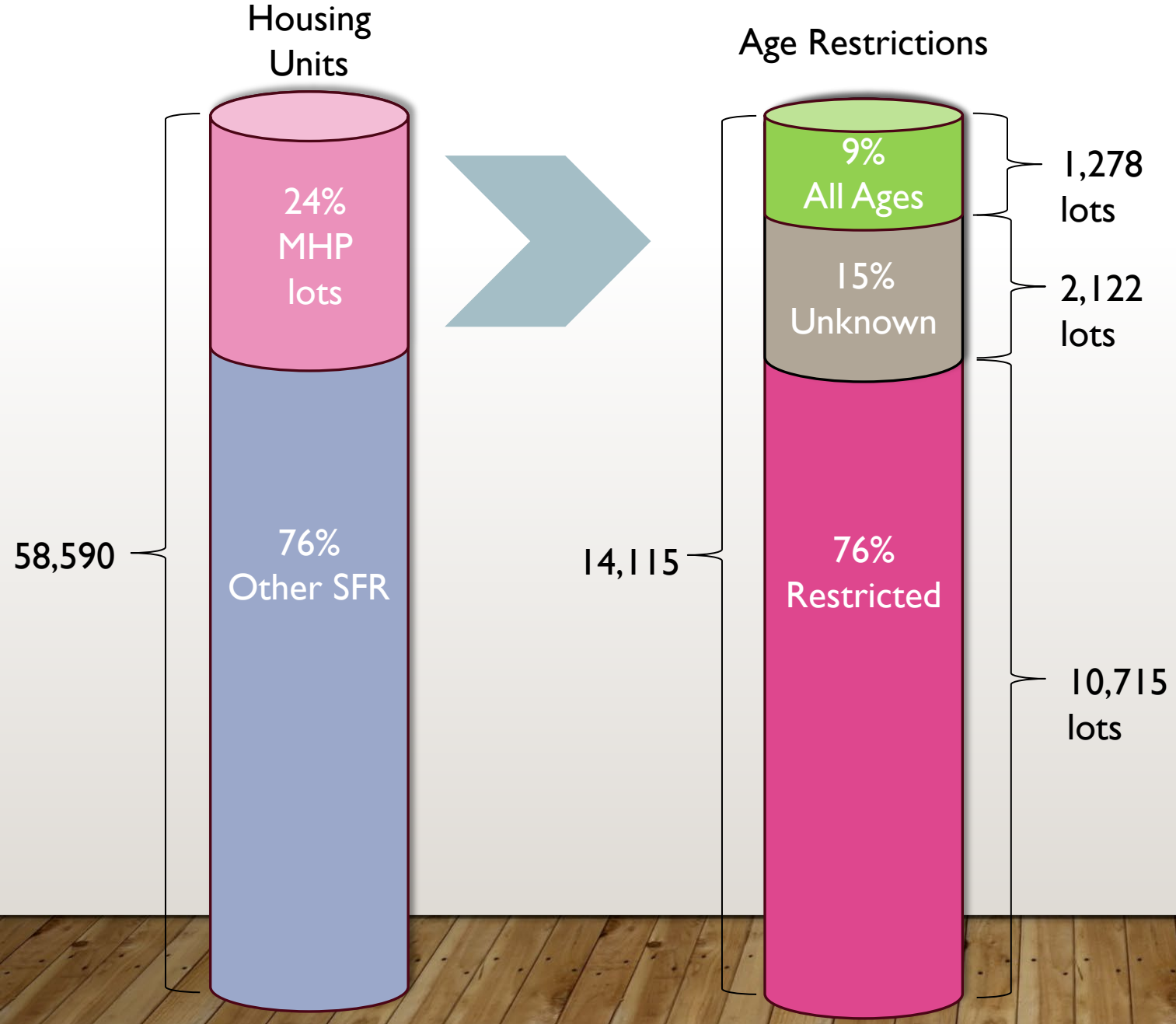
AFFORDABLE AND WORKFORCE HOUSING



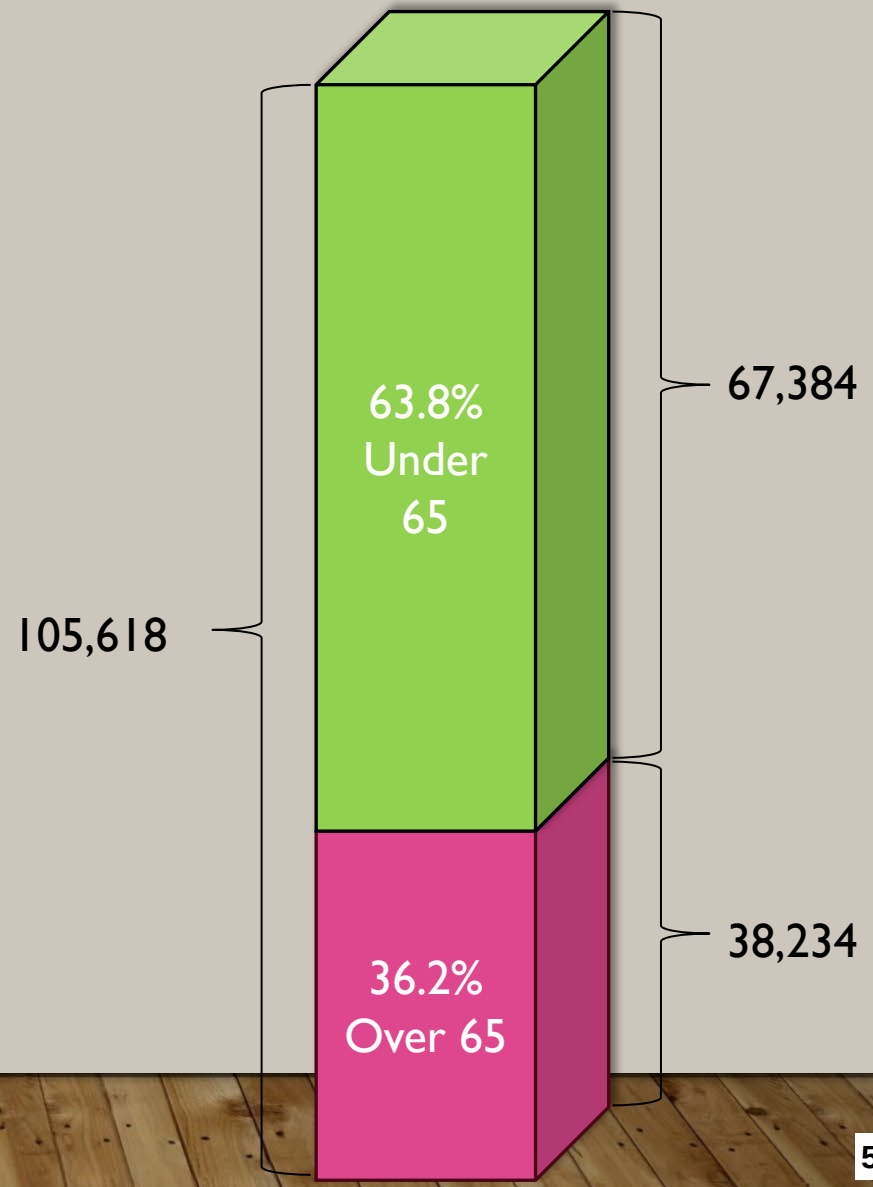
Mobile Homes and Manufactured Homes **do not** meet the long-term housing needs of the workforce community or those who would qualify for housing assistance programs like SHIP.

AMI adjusted for household size		**Affordable Housing Maximum Rental Rates**	
Persons in Household	"Moderate" Income (120% AMI)	Number of Bedrooms	Rent Limit
1	$55,080	1	$1,474
2	$62,880	2	$1,770
3	$70,800	3	$2,044
4	$78,600	4	$2,280
5	$84,960	5	$2,517

HOUSING DISTRIBUTION



POPULATION DISTRIBUTION



POPULATION AND HOUSING CHARACTERISTICS

Population Estimates, July 1, 2022, (V2022)	105,618
Persons under 5 years, percent	3.90%
Persons under 18 years, percent	16.60%
Persons 65 years and over, percent	36.20%
Female persons, percent	51.00%

Housing units, July 1, 2022, (V2022)	58,590
Owner-occupied housing unit rate, 2017-2021	76.60%
Median value of owner-occupied housing units, 2017-2021	$131,900
Median selected monthly owner costs -with a mortgage, 2017-2021	$1,074
Median selected monthly owner costs -without a mortgage, 2017-2021	$369
Median gross rent, 2017-2021	$839

Potential Mobile Home or RV Parks:

Properties currently having the correct zoning, land use, and lot size, but have not submitted for development

Potential Mobile Home Subdivisions: 5

Potential Density (Low End): 425

Potential Density (High End): 831

Potential Mobile Home or RV Parks: 13

Potential Density (Low End): 2,109

Potential Density (High End): 3,771

Total density allowed:
4,602 units

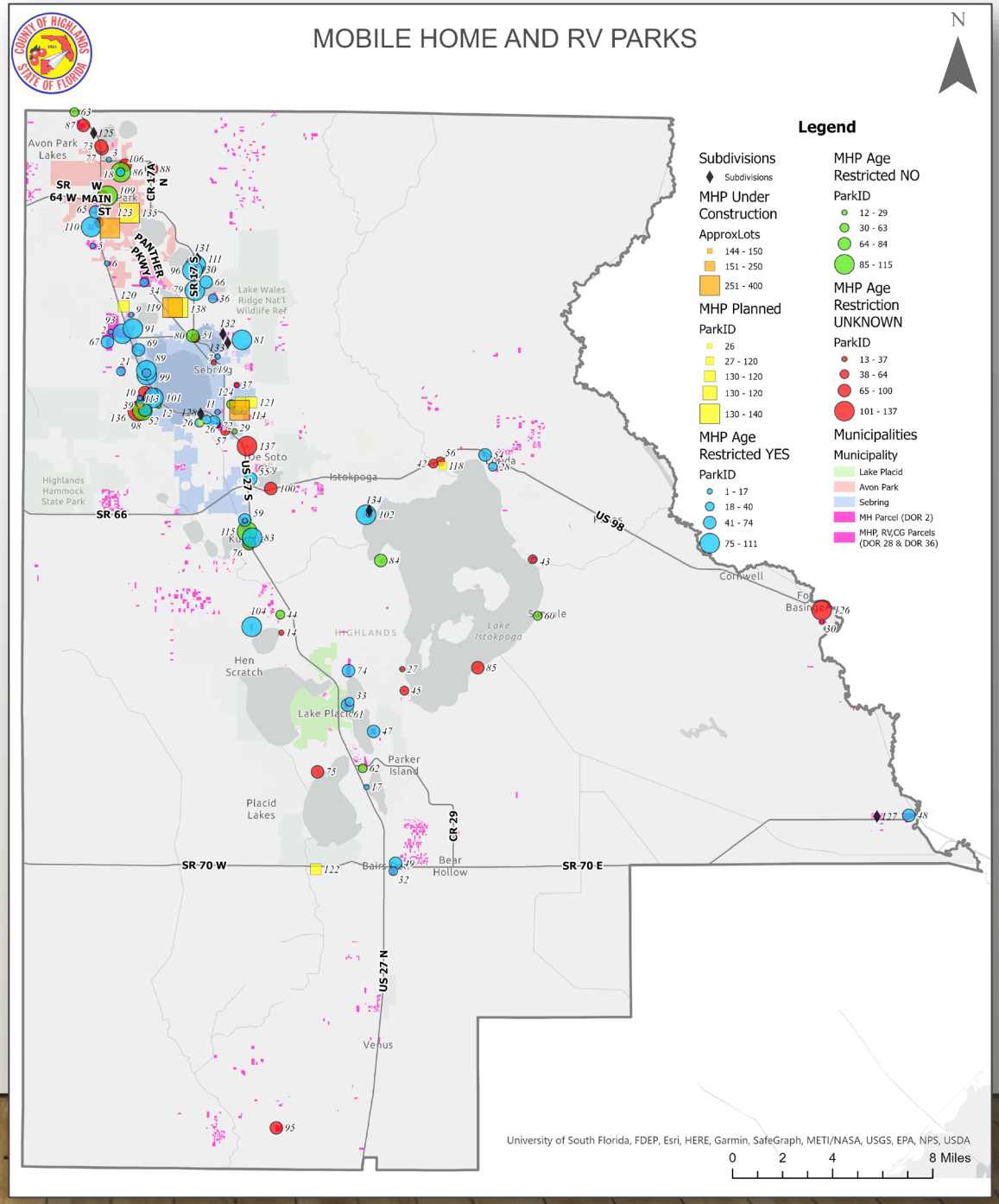


MOBILE HOME PARK DISTRIBUTION & DENSITY

97
Current Mobile Home Parks

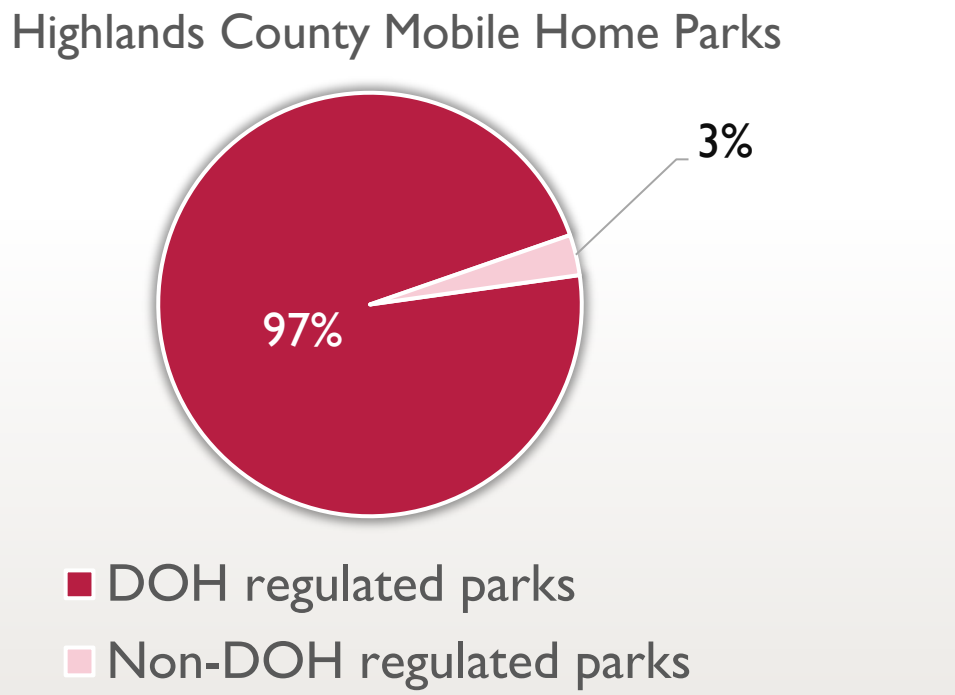
14,115
MH & RV Park Lots

5,261
Parcels with DOR Code=2



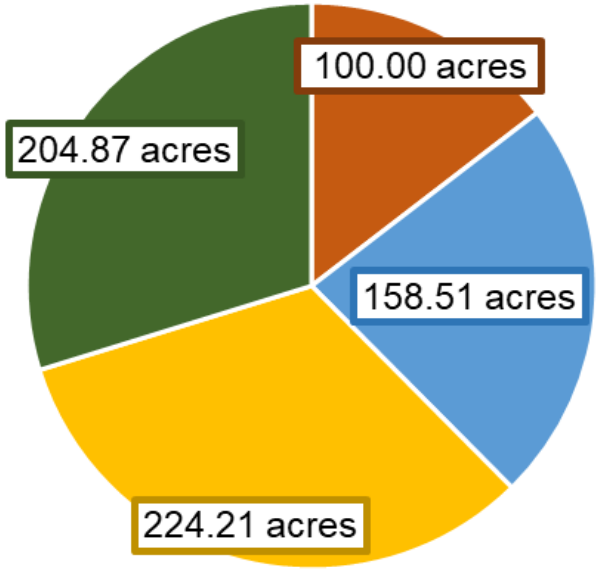
FLORIDA DEPARTMENT OF HEALTH LICENSURE AND INSPECTION MOBILE HOME PARKS

- Certain mobile homes, lodging and recreational vehicle parks, are licensed annually by the Florida Department of Health (DOH).
- Routine inspections are conducted for drinking water, sewage and solid waste disposal, fire protection, and insect and rodent control.
- Post-storm inspections are conducted during emergency response to natural disasters.
- Plans are reviewed for new or renovated parks and temporary campgrounds to ensure compliance with state regulations before a permit is issued.



# of Highlands MHPs total	97
# of Highlands MHPs licensed by DOH	94
# of DOH MHPs failed inspection in 2023	14 (15%)
DOH staff time for MHP in FY 2022-2023	1,070 hours

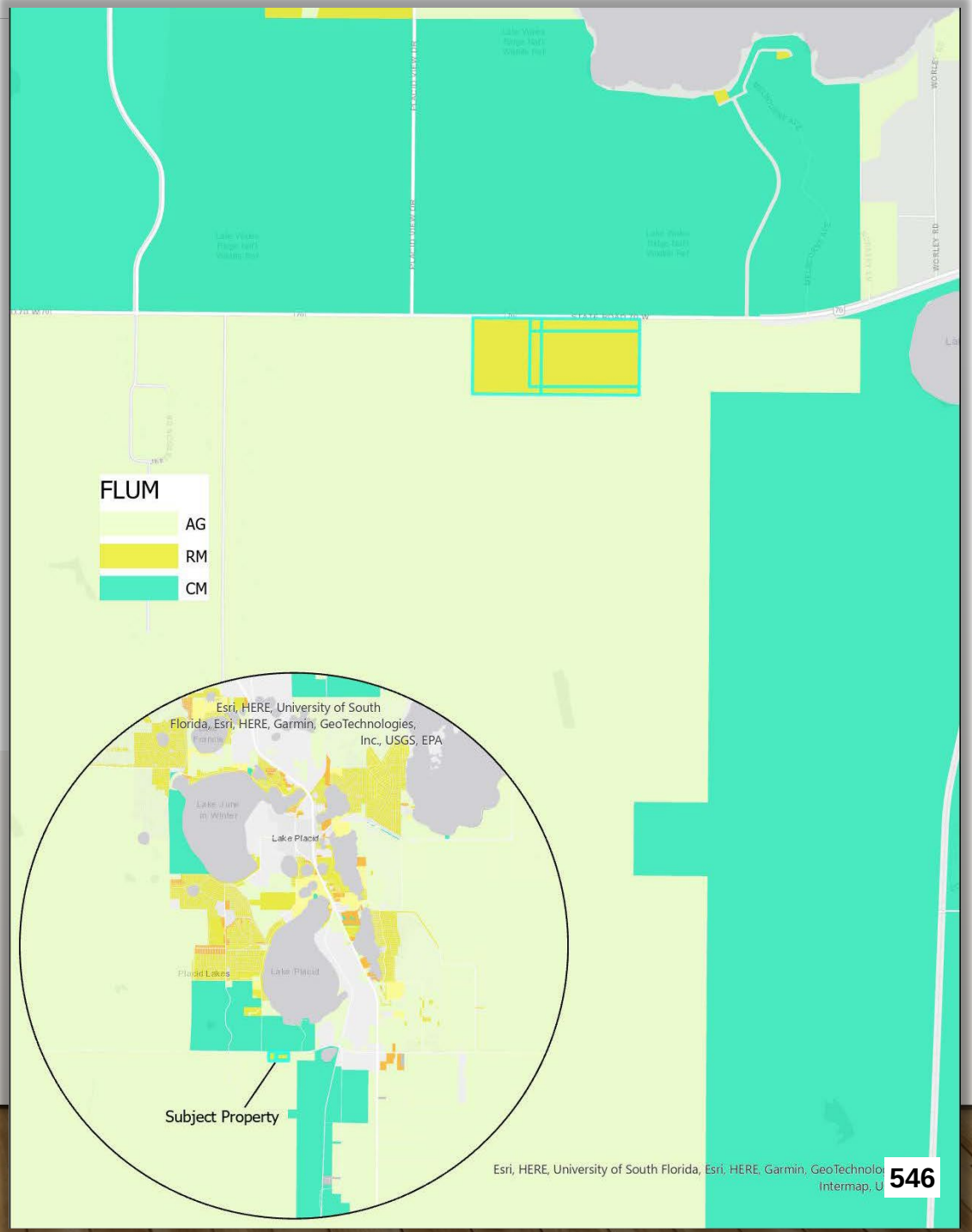
Zoning Changes since 2018 to allow Mobile Home or RV Parks



2018 (1 change) 2020 (1 change) 2022 (3 changes) 2023 (6 changes)

Density Increases

11 Zoning Changes totaling 687.59 acres
Density Allowed prior to 2018: 1,999
New Density Allowed after zoning changes: 4,996
Difference: Increase of 2,997 or 250%



THE VALUE OF GOOD PLANNING (RISKS AND LIABILITIES OF BAD PLANNING)

What is the Florida Comprehensive Plan?

The Comprehensive Plan, or Comp Plan for short, includes the following elements: Future Land Use, Transportation, Housing, Infrastructure, Natural Resources, Recreation and Open Space, Intergovernmental Coordination, Economic Development, Capital Improvements, Public School Facilities, and Property Rights.

THE VALUE OF GOOD PLANNING (RISKS AND LIABILITIES OF BAD PLANNING)

COMPREHENSIVE PLANS LEAD TO BETTER DECISION MAKING FOR GROWTH BY:

- ENCOURAGING PLANNED GROWTH
- ENCOURAGING ORGANIZED AND PLANNED IMPROVEMENTS FOR DEVELOPMENTS
- **REDUCING RISKS AND LIABILITIES FOR COUNTY DEPARTMENTS (FIRE, EMS, SHERIFF, TRANSPORTATION, GARBAGE, ETC.)**

OJ slide

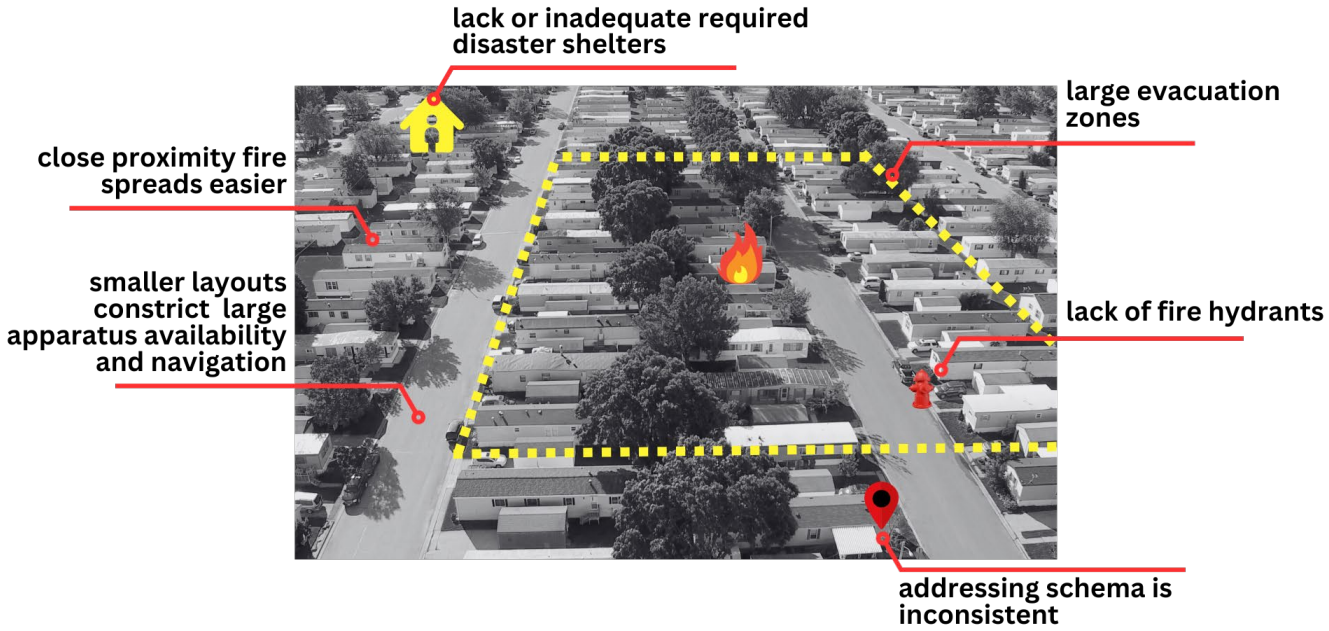
THE VALUE OF GOOD PLANNING (RISKS AND LIABILITIES OF BAD PLANNING)

COMPREHENSIVE PLANS LEAD TO BETTER DECISION MAKING FOR GROWTH BY:

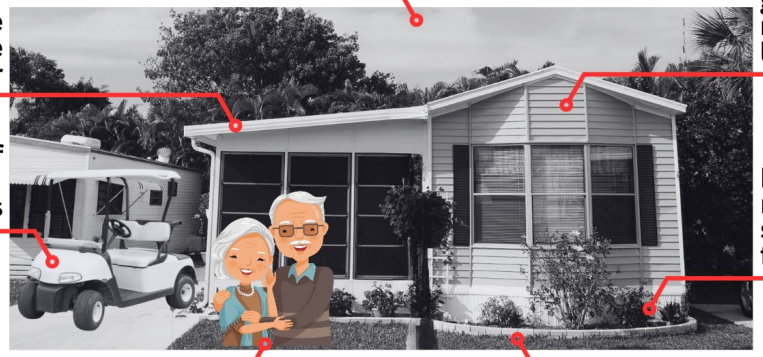
- **HELPING CONTROL COSTS AND INCREASE EFFICIENCY IN SERVICES**
- **REDUCING UNACCOUNTED FOR EXPENSES (TAKING OVER WATER TREATMENT PLANTS, ADDITIONAL FIRE/SHERIFF SUBSTATIONS, EMS RESPONSE TIMES, MORE EFFICIENT GARGABE PICKUP, ETC.)**
- BOCC AND STAFF HAVE RESPONSIBILITY FOR ALLOWING GROWTH IN A LOGICAL MANNER THAT BENEFITS ALL HIGHLANDS COUNTY NOT JUST SPECIFIC LANDOWNERS

OJ slide

INHERENT RISK FACTORS



INHERENT RISK FACTORS



smaller layouts make it difficult/unsafe for EMS equipment to be brought into home

constructed with thin combustible material that causes rapid fire growth, more resources needed to extinguish, in less time

more likely to be damaged in severe weather

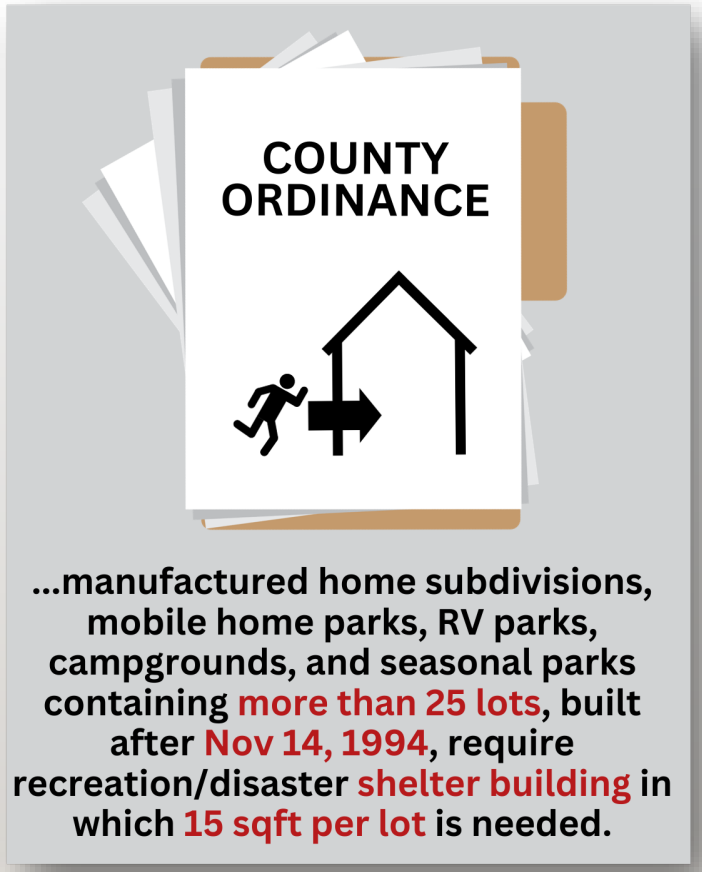
vehicles and golf carts often impede entry/egress points

higher risk for responders due to structure collapse or falling through floor

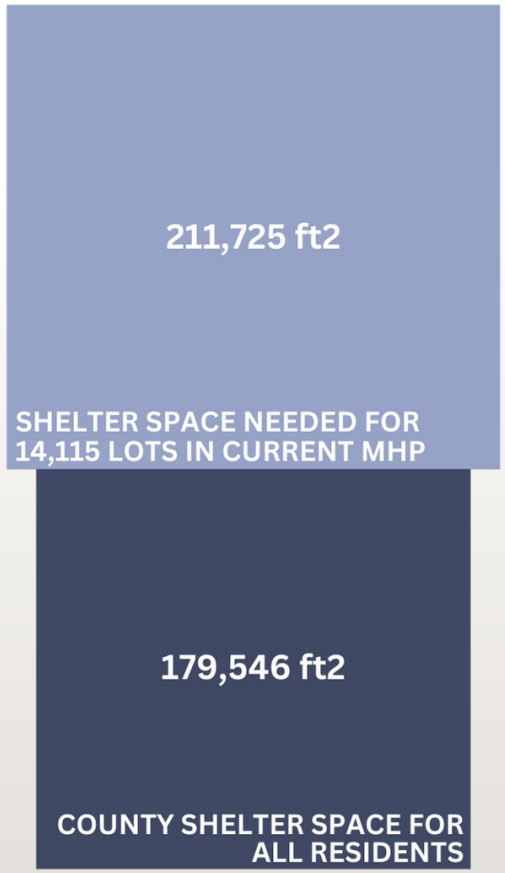
large population with increased needs during evacuation or rescue

HVAC runs under home, fire can spread quickly and unseen

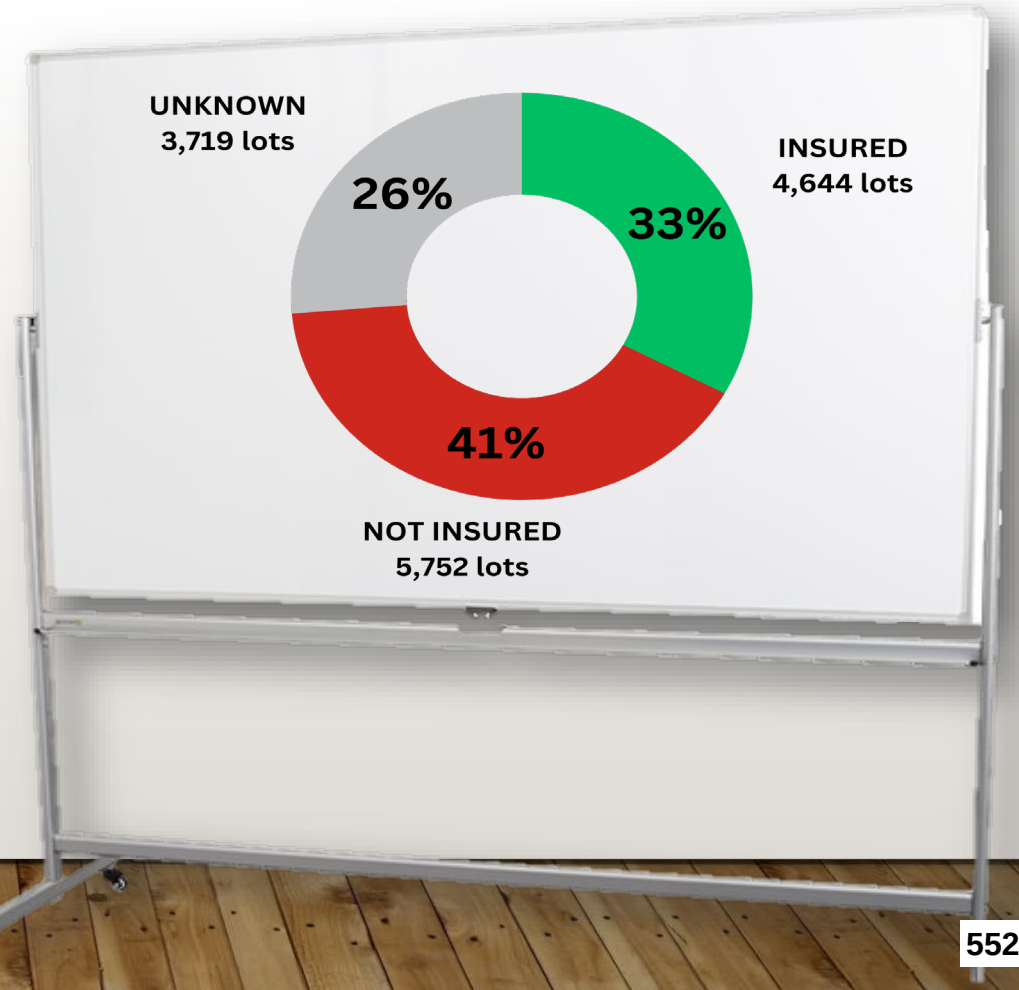
SHELTERS



...manufactured home subdivisions, mobile home parks, RV parks, campgrounds, and seasonal parks containing more than 25 lots, built after Nov 14, 1994, require recreation/disaster shelter building in which 15 sqft per lot is needed.



INSURANCE

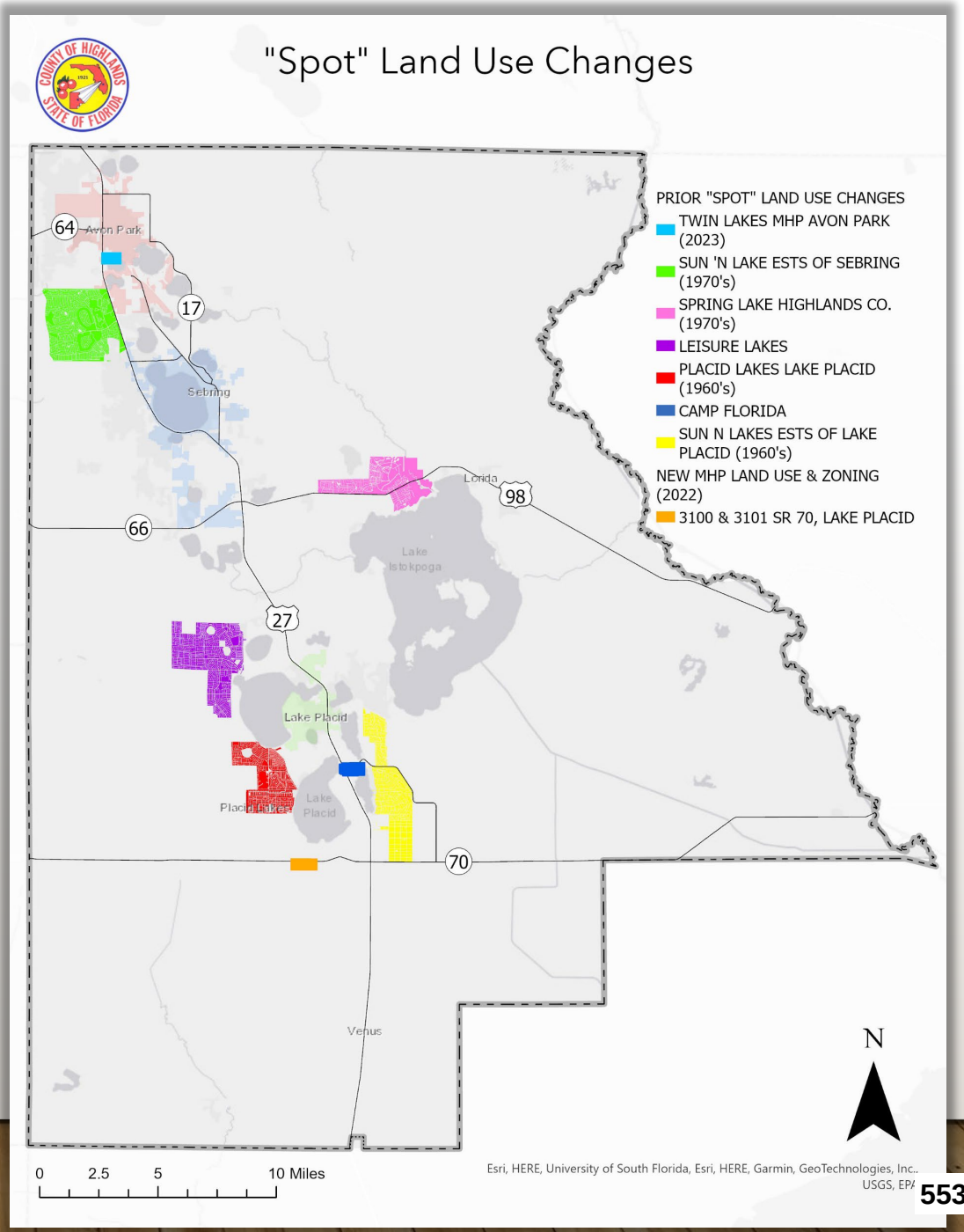


THE VALUE OF GOOD PLANNING (RISKS AND LIABILITIES OF BAD PLANNING)

What Happens With "SPOT" Changes In Land Use?

"Depends on Land Use Change. Some helped form the County, some are beneficial, some may be a liability."

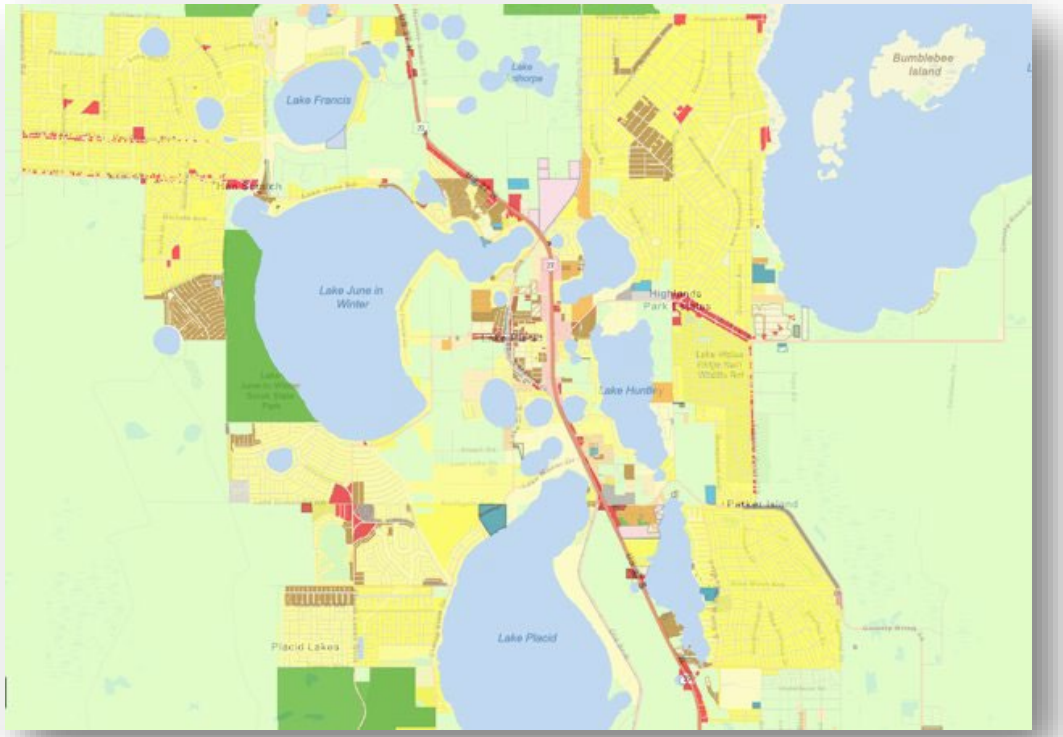
New "Spot" Land Use Changes – "Lake Placid MHP"
(93.2+ ac. = 500 unit Manufactured Homes)
1,000 new residents where would have been 38 residents
(Assumes 1 residence per 5 ac. prior)
12+ miles from "downtown Lake Placid" or 15 minutes



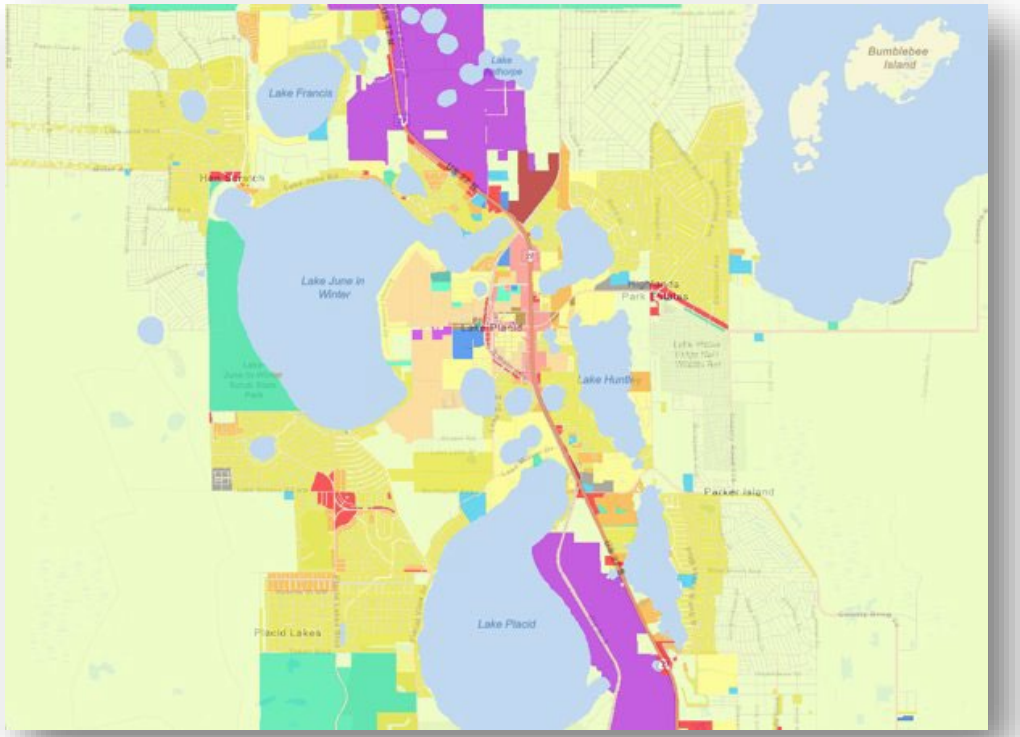
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IMPACTS TO INFRASTRUCTURE

- Water
- Sewer
- Garbage
- Electric
- Internet
- ???



Existing Zoning
(What it is now)



Future Land Use
(What it can be in the future)

SERVICES ARE MORE EXPENSIVE THE FURTHER AWAY THE CUSTOMER IS

Highlands County has had to take over several utilities the past 10-20 years, pay for repairs and give them away to local Utility providers such as the City.

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TRANSPORTATION/TRAFFIC

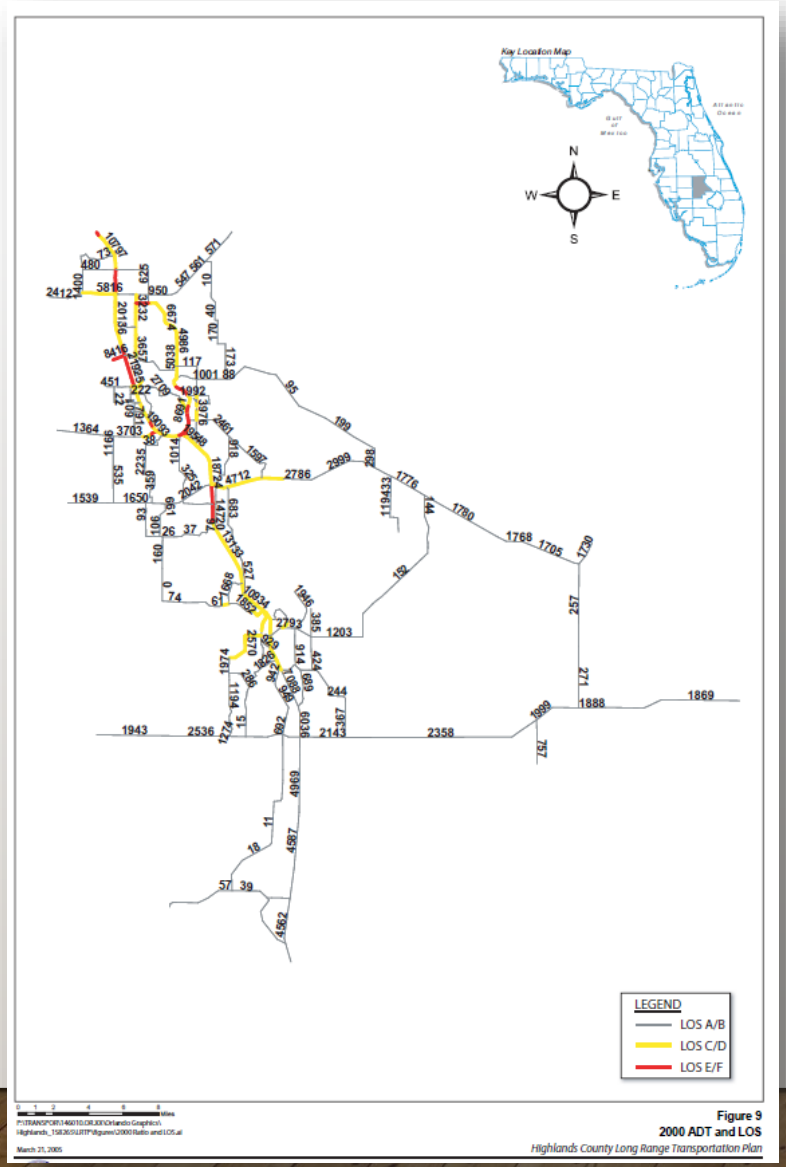


Figure 9
2000 ADT and LOS
Highlands County Long Range Transportation Plan

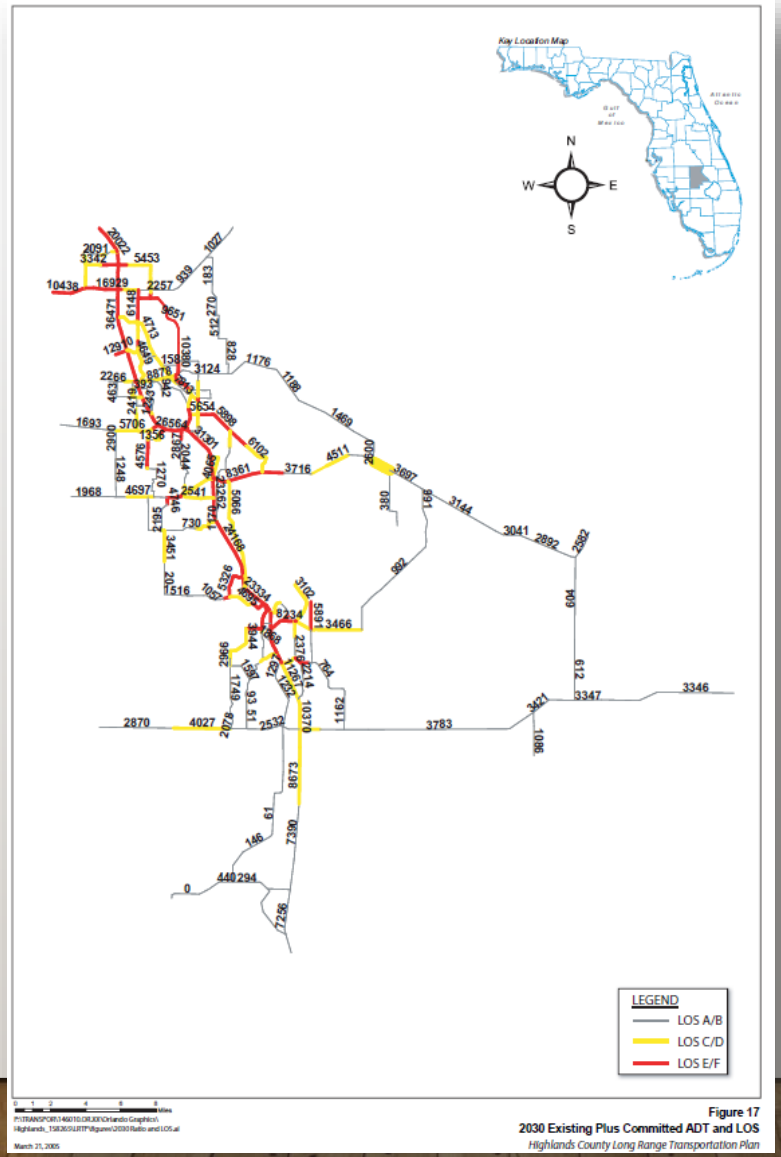


Figure 17
2030 Existing Plus Committed ADT and LOS
Highlands County Long Range Transportation Plan

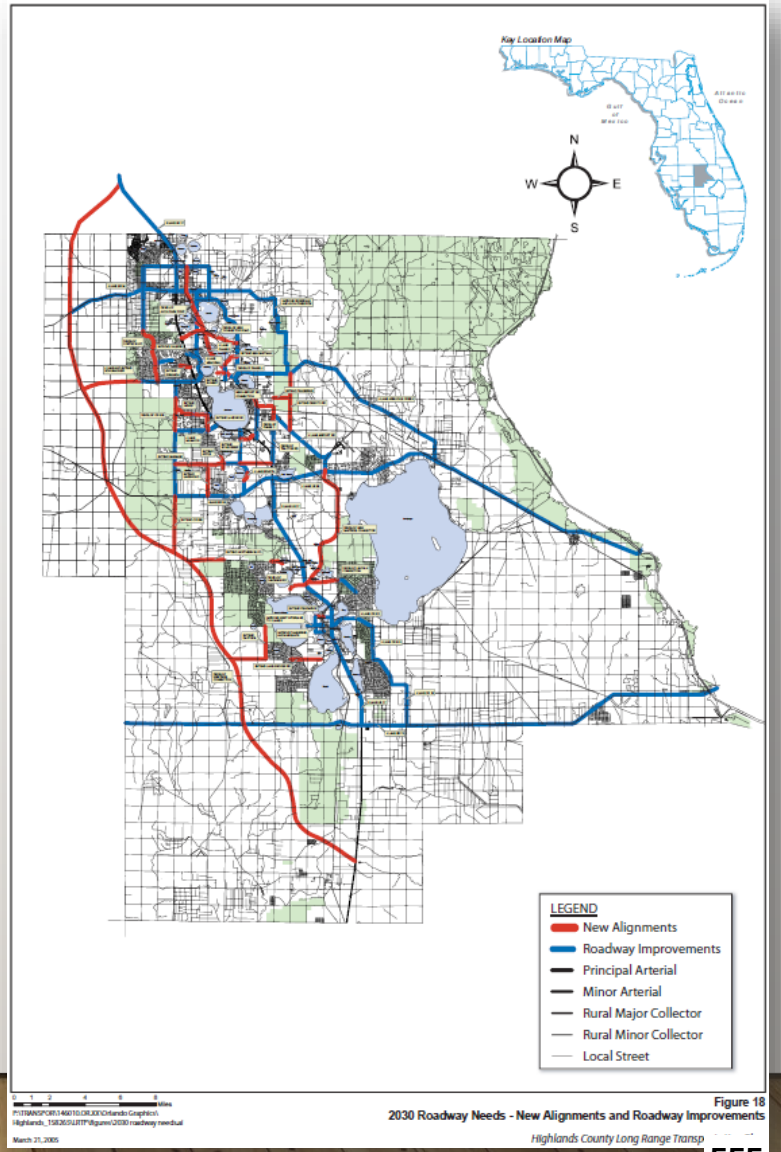


Figure 18
2030 Roadway Needs - New Alignments and Roadway Improvements
Highlands County Long Range Transp

OJ slide

ESTIMATED TRIP GENERATION FOR HOUSING IN HIGHLANDS COUNTY

Housing Type	Daily Traffic Trips (per unit)[1]	Number of Units in Highlands County[2]	Total Traffic Trips	Percentage of Total Units	Percentage of Total Traffic Trips
Single Family[3]	9.43	58,590	552,504	73.3%	78.5%
Single Family Attached[3]	7.20	4,794	34,517	6.0%	4.9%
Multi-Family	6.74	3,097	20,874	3.9%	3.0%
Mobile Home Park	7.12	13,491	96,056	16.9%	13.6%
Total			703,950	100%	100%

1 - Institute of Traffic Engineers (ITE) 11th Edition, Sept. 2021.
2 - Highlands County Zoning and Planning and/or GIS Departments
3 - Single Family Attached Land Use is Estimated based on percentage of Single Family and Single Family Attached from 2021 Census Update

FUTURE BOARD DIRECTION ON NEXT STEPS

1. Stick a pin in it

Place a temporary hold on any new future land use/zoning change applications for mobile homes, for staff to review the Land Development Regulations. Possible revisions could include:

- Ages of Mobile Homes
- Disaster Shelter/Clubhouse Regulations
- Allowable Density of Mobile Homes within the County
- Ensure compliance with the Comprehensive Plan in reference to Spot Zoning/Sprawl

2. Continue as is

3. Or other direction by the Board

QUESTIONS?

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: January 24, 2024

PRESENTER: **Sherry G. Sutphen, County Attorney**

SUBJECT/TITLE: **County Attorney Status Report.**

STATEMENT OF ISSUE

Attached is a copy of the pending items on the County Attorney File Log as of January 24, 2024.

RECOMMENDED ACTION

None. This is being provided for informational purposes.

FISCAL IMPACT

There is no fiscal impact.

Attachments: Legal_Long_Range_Log.docx

Legal Department
Long-range Log

Priority	Matter	Notes
N/A	Employee Manual revisions	
N/A	Purchasing Policy revisions	
1	Hospital sale issues	
2, 7	Annexation issues with all cities (enclaves and roads)	
3, 8	Impact Fees and other funding mechanisms related to growth and infrastructure	
N/A	Revisions to organization of Advisory Boards and Committees	
2, 7	Joint Planning Agreements with cities	
N/A	Procedure/Policies on vacation of a right of way, roadway, easement, or a portion thereof, owned by the County.	
N/A	Various Assessment Resolutions for FY 23-24	
N/A	Update of all County policies which are not codified in a manual	

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER: **Laurie Hurner, County Administrator**

SUBJECT/TITLE: **Commissioner's Priorities and the Project Status Report.**

RECOMMENDED ACTION

None. This information is being provided for informational purposes only.

FISCAL IMPACT

There is no fiscal impact.

Attachments:

HIGHLANDS COUNTY
COUNTY COMMISSION AGENDA ITEM

DATE OF ACTION REQUEST: February 6, 2024

PRESENTER:

SUBJECT/TITLE: Board payables from to December 19, 2023, to February 5, 2024

Attachments: