

# CITY COUNCIL OF PARLIER REGULAR MEETING

PUBLIC ACCESS TELEPHONE # (605) 313-5407 ACCESS # 263283

DATE: Thursday, November 19, 2020

**TIME:** 6:30 PM

**PLACE:** Council Chambers

1100 East Parlier Avenue

Parlier, CA 93648

#### CALL TO ORDER/WELCOME:

**Roll Call:** Mayor Alma M. Beltran, Mayor Pro-Temp Trinidad Pimentel, Councilwoman Diane Maldonado, Councilman Noe Rodriguez, City Clerk Dorothy Garza.

FLAG SALUTE: Mayor Alma M. Beltran

#### ADDITIONS/DELETIONS:

#### PRESENTATIONS/INFORMATIONAL:

**Leticia Trujillo,** Promotora — Cultiva La Salud **Eva Beltran,** Grants Administrative Coordinator — Update on new park and Christmas event.

#### **PUBLIC COMMENT:**

At this time any citizen may address the City Council on matters not appearing on the agenda that are within the jurisdiction of the City of Parlier. Speakers shall limit their comments to three (3) minutes unless extended by the Mayor. Please begin your comments by stating your name and City of residence.

The City Council is prohibited by law from taking any action on matters discussed that are not on the agenda. No adverse conclusion should be drawn if the City Council does not respond to any particular public comment. The Council may refer the matter to the City Manager or staff or request that it be placed on a future agenda.

#### **CONSENT CALENDAR:**

All Consent Calendar items are considered routine and will be enacted in one motion. There will be no separate discussion of items appearing on the Consent Calendar unless requested to be removed for separate discussion and acted on by separate vote.

- 1. Approve the Check Reports dated November 1, 2020 to November 11, 2020.
- 2. Approve the Minutes dated November 5, 2020.
- 3. Approve the use of Veterans Memorial Park by the CEN-CAL STARS softball on M-W-F from 6:30PM to 8:30PM
- 4. Approve the use of Veteran's Memorial Park/or Richard Flores by the Premier Girls Fastpitch Softball. M-F from 5:00 PM to 8:00 PM. (Upon availability)

#### **REGULAR BUSINESS:**

**5. SUBJECT:** First Time Homebuyers Program applicants. COVID 19 Business and Residential Loans.

**RECOMMENDATION:** Council to receive information and direct staff.

**6. SUBJECT:** Public Hearing, Second Reading and Adoption of Ordinance Amending Chapter 18.55 of the Parlier Municipal Code, the Cannabis Control Ordinance".

**PUBLIC HEARING:** 

- a. Mayor Beltran to open Public Hearing
- b. Public input/testimony for or against.
- c. Mayor Beltran to close Public Hearing

**RECOMMENDATION:** Staff Recommends the Council Conduct the Public Hearing, Waive the Second Reading and Adopt Ordinance No. 2020-5, Amending Chapter 18.55 of the Parlier Municipal Code, the Cannabis Control Ordinance".

7. SUBJECT: City Manager Contract.

**RECOMMENDATION:** Staff recommends Council approve the City Manager Contract.

8. SUBJECT: Operational Agreement between the City of Parlier with Centro La Familia, Current Church-Hope Coalition and Breaking the Chains for the 2020 CalVIP Grant.

**RECOMMENDATION:** That City Council authorize the City Manager to sign the Operational Agreements with Centro La Familia, Current Church-Hope Coalition and Breaking the Chains for the 2020 CalVIP Grant to provide the services for the Board of State and Community Corrections (BSCC) grant, (9/20-9/23) California Violence Intervention and Prevention (CalVIP); a project to reduce all types of violence through direct intervention, prevention, and community engagement.

#### **PUBLIC COMMENT ON CLOSED SESSION**

THIS PORTION OF THE MEETING IS RESERVED FOR PERSONS DESIRING TO ADDRESS THE COUNCIL ON AN ITEM WHICH IS TO BE CONSIDERED DURING CLOSED SESSION. SPEAKERS SHALL LIMIT THEIR COMMENTS TO THREE (3) MINUTES.

#### **CLOSED SESSION:**

**9.** Public Employment Pursuant to Government Code Section 54957 Finance Director

#### **BRIEF COMMENTS: COUNCIL COMMUNICATIONS/COMMENTS:**

**CITY ADMINISTRATOR** 

**CITY ATTORNEY** 

**CITY COUNCIL** 

#### **ADJOURNMENT**

#### **ADA NOTICE**

In compliance with the American with Disabilities Act, if you need special assistance to participate in this meeting, please contact the City Clerk at (559) 646-3545 ext. 227. Notification 48 hours prior to the meeting will enable the City to make arrangements to ensure accessibility to this meeting.

#### **DOCUMENTS**

Any writings or documents provided to a majority of the City Council regarding any item on this agenda will be made available for public inspection at the front counter at City Hall located at 1100 East Parlier Avenue, Parlier, CA during normal business hours. In addition, most documents are posted on the City's website at <a href="http://parlier.ca.us">http://parlier.ca.us</a>.



#### CITY OF PARLIER

# **Check Report**

By Check Number

Date Range: 11/01/2020 - 11/13/2020

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Bank Code: APBNK-AI	PBNK					
ADP00	ADP, INC.	11/04/2020	Regular	0.00	2,054,42	55128
15704	**Void**	11/04/2020	Regular	0.00	0.00	55129
ADT01	ADT SECURITY SERVICES	11/04/2020	Regular	0.00	394.01	
AT&08	AT&T	11/04/2020	Regular	0.00	-948.72	55131
AT&08	AT&T	11/04/2020	Regular	0.00	948.72	
AT&02	AT&T MOBILITY	11/04/2020	Regular	0.00	1,019.76	
BAR03	BAR PSYCHOLOGICAL GROUP	11/04/2020	Regular	0.00	400.00	
CEN19	CENTRAL SANITARY SUPPLY	11/04/2020	Regular	0.00	538.59	
CEN13	CENTRAL VALLEY SWEEPING	11/04/2020	Regular	0.00	6,741.50	55135
DON01	DON BERRY CONSTRUCTION	11/04/2020	Regular	0.00	9,958.24	
EDD02	EMPLOYMENT DEVELOPMENT DE	11/04/2020	Regular	0,00	8,156.50	
FCA01	FRESNO COUNTY AUDITOR-CONTROLLER	11/04/2020	Regular -	0.00	12,547.90	55138
MEN18	MENDOCINO AUTO SALES & RE	11/04/2020	Regular -	0.00	638.62	
P.G01	PACIFIC GAS & ELECTRIC	11/04/2020	Regular	0.00		55140
PPA02	PARLIER POLICE ASSO.	11/04/2020	Regular	0.00	3,150.00	
PAR1U	PARLIER UNIFIED	11/04/2020	Regular -	0.00	1,989.20	
PAY01	PAY PLUS BENEFITS, INC.	11/04/2020	Regular	0.00	268,22	
ROB04	ROBERT HALF INTERNATIONAL INC.	11/04/2020	Regular	0.00	870.72	
STA1U	STAR 1 MINI MART	11/04/2020	Regular	0.00	138,51	
THE05	THE OFFICE CITY	11/04/2020	Regular	0,00	499.40	
UN 01 ZEE00	unWIRED BROADBAND, INC.	11/04/2020	Regular	0.00		55147
A&M00	ZEE MEDICAL SERVICE CO.	11/04/2020	Regular	0,00	237.05	
A-C00	A&M CONSULTING ENGINEERS	11/06/2020	Regular	0.00	6,741.50	
ASI01	A-C ELECTRIC COMPANY	11/06/2020	Regular	0.00	1,160.32	
AT&08	ASI AT&T	11/06/2020	Regular	0.00	3,173.76	
BAR06		11/06/2020	Regular	0,00	385.59	
BRE14	BARCELLOS, DANNY	11/06/2020	Regular	0.00		55153
BRY00	BRENNTAG PACIFIC, INC. BRYANT L. JOLLEY	11/06/2020	Regular	0.00	780.21	
CEN02		11/06/2020	Regular	0.00	22,500.00	
METO1	CENTRAL VALLEY LOCK & SAFE INC.	11/06/2020	Regular	0.00	150.73	
NELO1	METRO UNIFORM & ACCESSORIES MICHAEL C. NELSON	11/06/2020	Regular	0.00		55157
MUN01	MUNI METRIX SYSTEMS CORP.	11/06/2020	Regular	0.00		55158
OFF01	OFFICE DEPOT	11/06/2020	Regular	0.00	119.97	
RLB01		11/06/2020 11/06/2020	Regular	0.00	205,81	
RENO2	REEDLEY LUMBER & BUILDING	11/06/2020	Regular	0.00	1,503,98	
FREO7	RENT A TOILET THE FRESNO BEE	11/06/2020	Regular	0.00	165,00	
THO00	THOMSON REUTERS - WEST	11/06/2020	Regular	0.00	389.76	
TOW02	TOWNSEND PUBLIC AFFAIRS, INC.	11/06/2020	Regular Regular	0.00	478,00	
VOR01	VORTAL, INC.	11/06/2020	Regular	0.00		55165
WIL06	WILLDAN ENGINEERING	11/06/2020	Regular	0.00		55166
ADT01	ADT SECURITY SERVICES	11/12/2020	Regular	0.00	1,540.00	
ASI01	ASI	11/12/2020	Regular	0.00	222,35	
AUTO1	AUTO ZONE	11/12/2020	Regular	0.00	1,230.00	
BAN01	BANKCARD CENTER	11/12/2020	Regular		984.98	
DANOI	**Void**	11/12/2020	Regular	0.00	5,989.04	
BUS01	BUSH ENGINEERING INC.	11/12/2020	Regular	0.00		55172
CEN10	CENTRAL INDUSTRIAL AUTOMATION LLC.	11/12/2020	Regular	0.00	•	55173 55174
CENO2	CENTRAL INDUSTRIAL ACTOMATION ELC.	11/12/2020	Regular	0.00		
REE01	EDDIE C. REED	11/12/2020	Regular	0.00	363.69	
GRA01	GRANTED SOLUTIONS	11/12/2020	<del></del>		150.00	
GRA01	GRANTED SOLUTIONS  GRANTED SOLUTIONS	11/12/2020	Regular Regular	0,00	5,814.00	
HAA01	HAAKER EQUIPMENT COMPANY	11/12/2020	Regular	0.00		55178
HOL02	HOLIDAY LIGHTS AND MAGIC, INC.	11/12/2020	Regular	0.00		55179 E5180
110002	HOURT HAITS AND MADIC, INC.	11/12/2020	regular	0.00	8,012.20	SOTOU

#### **Check Report**

Date Range: 11/01/2020 - 11/13/2020

						.0 14/13/2020
Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
T&J01	JOSE M. SILVA	11/12/2020	Regular	0.00	1,659.90	55181
JUL02	JULES & ASSOCIATES INC.	11/12/2020	Regular	0.00	51,179.85	55182
OFF01	OFFICE DEPOT	11/12/2020	Regular	0.00	643.01	55183
P.G01	PACIFIC GAS & ELECTRIC	11/12/2020	Regular	0.00	1,435.76	55184
RLB01	REEDLEY LUMBER & BUILDING	11/12/2020	Regular	0.00	59.69	55185
ROB04	ROBERT HALF INTERNATIONAL INC.	11/12/2020	Regular	0.00	1,074.80	55186
RSG01	RSG, INC.	11/12/2020	Regular	0.00	2,363,75	55187
SAN1R	SAN JOAQUIN VALLEY AIR	11/12/2020	Regular	0.00	433.00	55188
UNU00	UNUM LIFE INSURANCE CO.	11/12/2020	Regular	0.00	95.80	55189
I D00	VANESSA A. EINERSON	11/12/2020	Regular	0.00	40,49	55190
BELO3	ALMA M. BELTRAN	11/13/2020	Regular	0.00	770.00	55191
ASIO1	ASI	11/13/2020	Regular	0.00	4,518.88	55192
BCT01	BCT CONSULTING, INC.	11/13/2020	Regular	0.00	1,210.00	55193
COM05	COMCAST	11/13/2020	Regular	0.00	1.101.03	55194
DIA11	DIAMOND COMMUNICATIONS	11/13/2020	Regular	0.00	270.00	55195
ONTO0	ON TRAC	11/13/2020	Regular	0.00	12,68	
SOC00	SOCIAL VOCATIONAL SERVICES	11/13/2020	Regular	0,00	13,725.00	
	**Void**	11/13/2020	Regular	0.00	0.00	
TCM01	TCM INVESTMENTS LP	11/13/2020	Regular	0.00	615.52	55199
SO 01	THE GAS CO.	11/13/2020	Regular	0.00	303,39	
PERO1	CALPERS	11/03/2020	Bank Draft	0.00	15,870,37	DFT0000452
PERO1	CALPERS	11/06/2020	Bank Draft	0.00	4,705.97	DFT0000454
PERO1	CALPERS	11/06/2020	Bank Draft	0.00	370.76	DFT0000455
PERO1	CALPERS	11/06/2020	Bank Draft	0.00	460.65	DFT0000456
PERO1	CALPERS	11/13/2020	Bank Draft	0.00	16,593.77	DFT0000457
				5.55	,,	2.10000157

#### **Bank Code APBNK Summary**

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	138	70	0.00	213,845.79
Manual Checks	0	0	0.00	0.00
Voided Checks	0	4	0.00	-948.72
Bank Drafts	5	5	0.00	38,001.52
EFT's	o	0	0.00	0.00
****	143	79	0.00	250,898.59

# **All Bank Codes Check Summary**

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	138	70	0.00	213,845.79
Manual Checks	0	0	0.00	0.00
Voided Checks	0	4	0.00	-948.72
Bank Drafts	5	5	0.00	38,001.52
EFT's	0	0	0.00	0.00
	143	79	0.00	250,898.59

# **Fund Summary**

Fund	Name	Period	Amount
999	POOL FUND	11/2020	250,898.59
			250.898.59



#### CITY OF PARLIER

# Check Report By Check Number

Date Range: 11/01/2020 - 11/13/2020

Vendor Number Bank Code: APBNK-AP	Vendor Name BNK		Payment Date	Payment Type	Discount Amount	Payment Amount	Number
ADP00	ADP, INC.		11/04/2020	Regular	0.00	2,054.42	55128
Payable #	Payable Type	Post Date	Payable Description		Discount Amount Pay	,	50120
	Account Number	Accou	nt Name	Item Description	Distribution A		
<u>567313369</u>	Invoice	11/02/2020	T&A / PAYROLL SV	•	0.00	2,054.42	
	<u>100-5100-6520</u>	PROFE	SSIONAL SERVICES/	T&A / PAYROLL		171.20	
	<u>100-5200-6520</u>		SSIONAL SERVICES/	T&A / PAYROLL		68.48	
	<u>100-5400-6520</u>	PROFE	SSIONAL SERVICES/	T&A / PAYROLL		684.81	
	<u>100-5610-6520</u>	PROFE	SSIONAL SERVICES/	T&A / PAYROLL		68.48	
	<u>100-5617-6520</u>	PROFE	SSIONAL SERVICES/	T&A / PAYROLL		68.48	
	100-5620-6520	PROFE	SSIONAL SERVICES/	T&A / PAYROLL		68.48	
	102-5400-6520	PROFE	SSIONAL SERVICES/	T&A / PAYROLL		102.72	
	<u> 203-5600-6520</u>	PROFE	SSIONAL SERVICES/	T&A / PAYROLL		34.24	
	<u>206-5600-6520</u>	PROFE	SSIONAL SERVICES/	T&A / PAYROLL		34.24	
	<u>213-5600-6520</u>	PROFE	SSIONAL SERVICES/	T&A / PAYROLL		34.24	
	<u>269-6303-6520</u>	PROFE	SSIONAL SERVICES/	T&A / PAYROLL		376,65	
	<u>400-5300-6520</u>	PROFE	SSIONAL SERVICES/	T&A / PAYROLL		68.48	
	<u>400-5600-6520</u>	PROFE	SSIONAL SERVICES/	T&A / PAYROLL		68.48	
	<u>401-5300-6520</u>	PROFE	SSIONAL SERVICES/	T&A / PAYROLL		68.48	
	401-5600-6520	PROFE	SSIONAL SERVICES	T&A / PAYROLL		68.48	
	<u>402-5300-6520</u>	PROFE	SSIONAL SERVICES	T&A / PAYROLL		68.48	
	**Void**		11/04/2020	Regular	0.00	0.00	55129
ADT01	ADT SECURITY SERVICES		11/04/2020	Regular	0.00	394.01	55130
Payable #	Payable Type	Post Date	Payable Description	on	Discount Amount Pay	yable Amount	
	Account Number		nt Name	Item Description	Distribution A	lmount	
<u>401966975 11-20</u>	Invoice	11/04/2020	WWTP SVCS 11/20	)	0.00	194.73	
	<u>401-5600-6520</u>	PROFE	SSIONAL SERVICES	WWTP SVCS 11/20		194.73	
401966975 9-20-	Invoice	11/04/2020	WWTP SVC\$ 9/20		0,00	199.28	
	<u>401-5600-6520</u>	PROFE	SSIONAL SERVICES	WWTP SVCS 9/20		199.28	
AT&08	AT&T		11/04/2020	Regular	0.00	-948.72	55131
AT&08	AT&T		11/04/2020	Regular	0.00	948.72	55131
Payable #	Payable Type	Post Date	Payable Description	on	Discount Amount Pay	yable Amount	
	Account Number	Accour	nt Name	Item Description	Distribution A	Mount	
<u>000015469724</u>	Invoice	11/04/2020	FSO CONNECTION		0.00	948.72	
	<u>102-5400-6510</u>	TELEPH	IONE/DATA/PAGER	FSO CONNECTION		948.72	
AT&02	AT&T MOBILITY		11/04/2020	Regular	0.00	1,019.76	55132
Payable #	Payable Type	Post Date	Payable Description	on .	Discount Amount Par	yable Amount	
	Account Number	Accour	nt Name	Item Description	Distribution A	lmount	
<u>57709137</u>	Invoice	11/04/2020	MDT'S FOR OFFICE	RS	0.00	1,019.76	
	100-5400-6510	TELEPH	IONE/DATA/PAGER	MDT'S FOR OFFICERS	1	,019.76	
BAR03	BAR PSYCHOLOGICAL GRO	UP	11/04/2020	Regular	0.00	400.00	55133
Payable #	Payable Type	Post Date	Payable Description	on .	Discount Amount Par	yable Amount	
	Account Number		nt Name	Item Description	Distribution A	\mount	
<u>10/26/2020</u>	Invoice	11/04/2020	PSYC POLICE OFFIC	CER-FELIX	0.00	400.00	
	100-5400-6530	RECRU	ITMENT & ADVERT	PSYC POLICE OFFICER F	FELIX	400.00	
CEN19	CENTRAL SANITARY SUPPL	Y	11/04/2020	Regular	0.00	538.59	55134

Chec	k Report						Date Range	· 11/01/203	20 - 11/13
Vend	dor Number Payable #	Vendor Name Payable Type	Post Date	Payment Date Payable Description	• ••	Discount Amount	ount Payme	nt Amount	•
		Account Number	Accoun	-	Item Description		ion Amount	ount.	
	1116080	Invoice	11/04/2020	BLEACH, URINAL SO		0.00		8.19	
	4447000	100-5400-6002		SUPPLIES	BLEACH, URINAL SCREE	NS	228,19		
-	1117083	Invoice	11/04/2020	ALCOHOL SURFACE		0.00		1.20	
		100-5400-6002		SUPPLIES	ALCOHOL SURFACE WIF	PES	61.20		
•	1117145	Invoice	11/04/2020	URINAL SCREEN	LIDIALA CODECA	0.00		6.91	
	444000	100-5400-6002		SUPPLIES	URINAL SCREEN		6.91		
	1118011	Invoice 100-5400-6002	11/04/2020	ALCOHOL SURFACE		0.00		6.47	
				SUPPLIES	ALCOHOL SURFACE WIF		6.47		
	<u>1118012</u>	Invoice 100-5400-6002	11/04/2020	BLEACH SUPPLIES	DIEACH	0.00		11.46	
	1440400				BLEACH		41.46		
	1118409	Invoice	11/04/2020	PARK SUPPLIES & SUPPLIES	DADY CURRUIS	0.00		14.36	
		100-5610-6002	PAKIS	x SUPPLIES	PARK SUPPLIES		194.36		
CEN:	13	CENTRAL VALLEY SWEEPIN	G	11/04/2020	Regular		0.00	6,741.50	55135
	Payable #	Payable Type	Post Date	Payable Description	=	Discount Amount			
		Account Number	Accoun	t Name	Item Description	Distribu	tion Amount		
	<u>16433</u>	Invoice	11/03/2020	SWEEPING SVCS 10	• • •	0.00	•	1.50	
		200-5600-6520	PROFES	SIONAL SERVICES/	SWEEPING SVCS 10/20		6,741.50		
DON	01	DON BERRY CONSTRUCTIO	N	11/04/2020	Regular		0.00	9,958.24	55126
	Payable #	Payable Type	Post Date	Payable Description	<del>=</del>	Discount Amount			33130
		Account Number	Accoun	t Name	Item Description		ion Amount		
	2	Invoice	10/30/2020	STREET IMPROV ZE	DIKER RET	0.00	9,95	8.24	
		<u>227-5600-7019</u>	RSTP-52	252(027) ZEDIKER	STREET IMPROV ZEDIKE	R RET	9,958.24		
EDD	02	EMPLOYMENT DEVELOPM	ENT DE	11/04/2020	Regular		0.00	8,156.50	55137
	Payable #	Payable Type	Post Date	Payable Description	on T	Discount Amount	Payable Am	,	<del></del>
		Account Number	Accoun	t Name	Item Description	Distribu	tion Amount		
	L0246316512	Invoice	11/02/2020	UI BENEFITS 3rd Q		0,00	8,15	66.50	
		100-5100-5016		LOYMENT INSURA	UI BENEFITS 3RD QTR		855.00		
		<u>100-5100-5016</u> 100-5400-5016		LOYMENT INSURA	FEDERAL CARES CR UI BENEFITS 3RD QTR		-426.01		
		100-5400-5016		LOYMENT INSURA	FEDERAL CARES CR		4,368.00 -2,187.40		
		100-5616-5016		LOYMENT INS.	UI BENEFITS 3RD QTR		1,090.00		
		100-5616-5016		LOYMENT INS.	FEDERAL CARES CR		-548.90		
		269-6303-5016		LOYMENT INSURA	UI BENEFITS 3RD QTR		10,072.00		
		<u> 269-6303-5016</u>	UNEMP	LOYMENT INSURA	FEDERAL CARES CR		-5,046.58		
		<u>400-5300-5016</u>		LOYMENT INSURA	UI BENEFITS 3RD QTR		-36.00		
		<u>400-5300-5016</u>	UNEMF	LOYMENT INSURA	FEDERAL CARES CR		16.39		
FCA	01	FRESNO COUNTY AUDITOR	L-CONTROLLER	11/04/2020	Regular		0.00	12,547.90	EE120
	Payable #	Payable Type	Post Date	Payable Description	-	Discount Amount		•	22128
	• • •	Account Number	Accoun	•	Item Description		tion Amount		
	355-021-265 /20	Invoice	11/03/2020	RDA TAXES 355-02	1-26S	0.00	7	77.24	
	333-021-503150	***************************************			RDA TAXES 355-021-26	s	77.24		
	333.07T.503 \ 50	602-8100-6520	PROFES	SIONAL SERVICES/	UDV 14VE2 222-051-50				
	66-20/21		PROFES 11/04/2020	SIONAL SERVICES/ WWTP TAXES 20/2		0,00		57.02	
		602-8100-6520	11/04/2020	_				57.02	
		602-8100-6520 Invoice	11/04/2020	WWTP TAXES 20/2	21 WWTP TAXES 20/21		4,35 4,357.02		
	66-2 <u>0/21</u>	602-8100-6520 Invoice 401-5600-6580	11/04/2020 PROPER	WWTP TAXES 20/2 RTY TAX WWTP TAXES 20/2	21 WWTP TAXES 20/21	0.00	4,35 4,357.02	57.02 56.82	
	66-2 <u>0/21</u>	602-8100-6520 Invoice 401-5600-6580 Invoice	11/04/2020 PROPER 11/04/2020	WWTP TAXES 20/2 RTY TAX WWTP TAXES 20/2	21 WWTP TAXES 20/21 21 WWTP TAXES 20/21	0.00	4,35 4,357.02 4,05 4,056.82		

11/04/2020

Regular

MENDOCINO AUTO SALES & RE

MEN18

638.62 55139

Check Report						Date Range: 11/	01/202	0 - 11/13/2020
Vendor Number Payable # 44090	Vendor Name Payable Type Account Number Invoice	Post Date Accoun	Payment Date Payable Descriptio t Name SMOG CHECK	Payment Type in Item Description	Discount Amount	ount Payment A	nount	
	100-5400-6532		E MAINTENANCE	SMOG CHECK	0.00	36.75		
44091	Invoice 100-5400-6532	11/04/2020 VEHICL	SMOG CHECK E MAINTENANCE	SMOG CHECK	0.00	36.75 36.75		
<u>44144</u>	Invoice 100-5400-6532	11/04/2020 VEHICL	BRAKE & ROTOR SE E MAINTENANCE	ERVICE BRAKE & ROTOR SERVI	0.00 CE	565.12 565.12		
P.G01 Payable #	PACIFIC GAS & ELECTRIC Payable Type	Post Date	11/04/2020 Payabie Descriptio	Regular on	Discount Amount	0.00 Payable Amount	49.90	55140
<u>51134-5-10-20</u>	Account Number Invoice 200-5600-6512	Accoun 11/02/2020 ELECTR	MADSEN AVE SVCS	Item Description 5 10/20 MADSEN AVE SVCS 10/	0.00	ion Amaunt 49.90 49.90		
PPA02 Payable #	PARLIER POLICE ASSO. Payable Type	Post Date	11/04/2020	Regular		0.00 3,:		55141
rayable #	Account Number	Accoun	Payable Description t Name	Item Description	Discount Amount Distribut	Payable Amount ion Amount		
<u>10-20</u>	Invoice 100-22196 100-22196 100-22196	PPOA D	PPOA DUES 10-20 DUES WITHHELD DUES WITHHELD DUES WITHHELD	PD. DATE 10-01 PD. DATE 10-15 PD. DATE 10-29	0.00	3,150.00 1,050.00 1,050.00 1,050.00		
PAR1U	PARLIER UNIFIED		11/04/2020	Regular		0.00 1.9	ດວດ ລຸດ	55142
Payable #	Payable Type	Post Date	Payable Descriptio			Payable Amount		33142
	Account Number		t Name	Item Description	Distribut	ion Amount		
<u>210004</u>	Invoice 100-5400-6011	11/04/2020 FUEL	FUEL- PD VEHICLES	FUEL- PD VEHICLES	0.00	1,989.20 1,989.20		
PAY01	PAY PLUS BENEFITS, INC.		11/04/2020	Regular		0.00	268.22	55143
Payable #	Payable Type	Post Date	Payable Description			Payable Amount		
<u>24333</u>	Account Number Invoice	Account 11/02/2020	t Name CALPERS REPORTIN	Item Description	Distribut 0.00	ion Amount 268.22		
Second International Control	100-5200-6520		SIONAL SERVICES/	CALPERS REPORTING 1		268.22 26.82		
	100-5400-6520		SIONAL SERVICES/	CALPERS REPORTING 1		26.82		
	100-5620-6520	PROFES	SIONAL SERVICES/	CALPERS REPORTING 1	0-20	26.83		
	<u> 102-5400-6520</u>	PROFES	SIONAL SERVICES/	CALPERS REPORTING 1	0-20	26.83		
	<u>269-6303-6520</u>	PROFES	SIONAL SERVICES/	CALPERS REPORTING 1	0-20	53.64		
	<u>400-5300-6520</u>	PROFES	SIONAL SERVICES/	CALPERS REPORTING 1	0-20	26.82		
	400-5600-6520		SIONAL SERVICES/	CALPERS REPORTING 1		26.82		
	<u>401-5300-6520</u> <u>401-5600-6520</u>		SIONAL SERVICES/ SIONAL SERVICES	CALPERS REPORTING 1 CALPERS REPORTING 1		26.82 26.82		
ROB04	ROBERT HALF INTERNATION	ONAL INC.	11/04/2020	Regular		0.00	870.72	55144
Payable #	Payable Type	Post Date	Payable Description	on		Payable Amount		
	Account Number		t Name	Item Description		tion Amount		
<u>56590554</u>	Invoice	11/03/2020	LUZ FLORES - FINA		0.00	870.72		
	<u>400-5300-6520</u> 401-5300-6520		SIONAL SERVICES/	LUZ FLORES - FINANCE		348.28		
	<u>401-5300-6520</u> <u>402-5300-6520</u>		SIONAL SERVICES/ SIONAL SERVICES	LUZ FLORES - FINANCE LUZ FLORES - FINANCE		348.28 174.16		
STA1U	STAR 1 MINI MART		11/04/2020	Regular		0.00	138.51	55145
Payable #	Payable Type	Post Date	Payable Description	=	Discount Amount	Payable Amount		·· <del>-</del>
	Account Number	Accoun	t Name	Item Description		tion Amount		
<u>10-2020</u>	Invoice	11/04/2020	FUEL 10/2020		0.00	138.51		
	<u>401-5600-6011</u>	FUEL		FUEL 10/2020		138.51		
THE05	THE OFFICE CITY		11/04/2020	Regular		0.00	499.40	55146

/endor Number						Date Range: 1	1,01,202	0 - 11/1
	Vendor Name		Payment Date	Payment Type	Discount Am	ount Payment	Amount	Numbe
Payable #	Payable Type Account Number	Post Date	Payable Descriptiont Name	n Item Description	Discount Amount	Payable Amou		
IN-1664270	Invoice	11/04/2020	OFFICE CHAIR	item bescription		ion Amount		
	<u>100-5400-6000</u>		SUPPLIES	OFFICE CHAIR	0.00	499.40 499.40	ŧu	
N 01	unWIRED BROADBAND, IN	<b>C</b> .	11/04/2020	Regular		0.00	7/100	55147
Payable #	Payable Type	Post Date	Payable Description	_	Discount Amount			33147
	Account Number		nt Name	Item Description		ion Amount	116	
INV00934971	Involce	11/04/2020	WWTP DATA 11/2		0.00	74.9	00	
	401-5600-6510		HONE/DATA/PAGER	WWTP DATA 11/20	0.00	74.99	99	
EE00	ZEE MEDICAL SERVICE CO.		11/04/2020	Regular		0.00	237.05	551 <i>4</i> R
Payable #	Payable Type	Post Date	Payable Description	_	Discount Amount			33140
	Account Number	· · · · · · · · · · · · · · · · · · ·	nt Name	Item Description		tion Amount	111	
<u>66625666</u>	Invoice	11/04/2020	JAIL SUPPLIES	item bescription	0.00	237,0	16	
	100-5400-6002		SUPPLIES	JAIL SUPPLIES	0.00	237.05	J5	
&M00	A&M CONSULTING ENGIN	FFRS	11/06/2020	Regular		0.00	6,741,50	EE140
Payable #	Payable Type	Post Date	Payable Description	_	Discount Amount			22743
· ····································	Account Number		nt Name	Item Description		rayable Amou tion Amount		
INV7112020	Invoice	11/05/2020	PROF. SERVICES: LI	•	0.00	6,741.5	50	
calculation des annual and the state of the	<u>262-5700-6520</u>		SSIONAL SERVICES	PROF. SERVICES: LRSP	0.00	6,741.50	<i>.</i> 0	
-C00	A-C ELECTRIC COMPANY		11/06/2020	Regular		0.00	1,160.32	55150
Payable #	Payable Type	Post Date	Payable Description		Discount Amount		-	20130
•	Account Number		nt Name	Item Description		tion Amount		
51155	Invoice	11/06/2020	SIGNAL LIGHT REPA	•	0.00	588.3	36	
Management of ANY OUTSTANDS	200-5600-6520		SSIONAL SERVICES/		5.50	588.36		
514 <u>56</u>	Invoice	11/06/2020	•		0.00			
31430			SIGNAL LIGHT REPA		0.00	571.9	96	
	200-5600-6520	PROFE	SSIONAL SERVICES/	SIGNAL LIGHT REPAIR		571.96		
SI01	ASI		11/06/2020	Regular		0.00	3,173.76	55 <b>1</b> 51
Payable #	Payable Type	Post Date	Payable Description	n	Discount Amount	Payable Amou	nt	
	Account Number		nt Name	Item Description	Distribu	tion Amount		
3-NOV-20	•		•	•	Distribu 0.00	tion Amount 3,173.	76	
3-NOV-20	Account Number	Account 11/04/2020	nt Name	•	0.00		76	
3-NOV-20	Account Number Invoice	Account 11/04/2020 INSUR	nt Name MEDICAL CARD FU	NDING	0.00 NG	3,173.	76	
3-NOV-20	Account Number Invoice 100-5200-5011	Account 11/04/2020 INSUR INSUR	nt Name MEDICAL CARD FU ANCE-MED,DEN,VIS	NDING MEDICAL CARD FUNDII	0.00 NG NG	3,173. 142.35	76	
3-NOV-20	Account Number Invoice 100-5200-5011 100-5400-5011	Account 11/04/2020 INSUR INSUR INSUR	nt Name MEDICAL CARD FU ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS	NDING MEDICAL CARD FUNDII MEDICAL CARD FUNDII	0.00 NG NG NG	3,173. 142.35 323.20	76	
3-NOV-20	Account Number Invoice 100-5200-5011 100-5400-5011 100-5610-5011	Accour 11/04/2020 INSUR. INSUR. INSUR. INSUR.	nt Name MEDICAL CARD FU ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS	NDING MEDICAL CARD FUNDII MEDICAL CARD FUNDII MEDICAL CARD FUNDII	0.00 NG NG NG NG	3,173. 142.35 323.20 268.75 95.71	76	
<u>3-NOV-20</u>	Account Number Invoice 100-5200-5011 100-5400-5011 100-5610-5011 160-5400-5011	Accour 11/04/2020 INSUR. INSUR. INSUR. INSUR. INSUR.	nt Name MEDICAL CARD FU ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS	NDING MEDICAL CARD FUNDII MEDICAL CARD FUNDII MEDICAL CARD FUNDII MEDICAL CARD FUNDII	0.00 NG NG NG NG NG	3,173. 142.35 323.20 268.75 95.71 268.76	76	
3-NOV-20	Account Number Invoice 100-5200-5011 100-5400-5011 100-5610-5011 160-5400-5011 203-5600-5011	Accour 11/04/2020 INSUR. INSUR. INSUR. INSUR. INSUR.	nt Name  MEDICAL CARD FU  ANCE-MED, DEN, VIS	NDING  MEDICAL CARD FUNDII	0.00 NG NG NG NG NG	3,173. 142.35 323.20 268.75 95.71 268.76 268.75	76	
3-NOV-20	Account Number Invoice 100-5200-5011 100-5400-5011 100-5610-5011 160-5400-5011 203-5600-5011	Accour 11/04/2020 INSUR. INSUR. INSUR. INSUR. INSUR. INSUR.	nt Name  MEDICAL CARD FU ANCE-MED, DEN, VIS	NDING  MEDICAL CARD FUNDII	0.00 NG NG NG NG NG NG	3,173. 142.35 323.20 268.75 95.71 268.76 268.75 731.04	76	
<u>3-NOV-20</u>	Account Number Invoice 100-5200-5011 100-5400-5011 100-5610-5011 160-5400-5011 203-5600-5011 206-5600-5011 269-6303-5011	Accour 11/04/2020 INSUR. INSUR. INSUR. INSUR. INSUR. INSUR. INSUR.	nt Name  MEDICAL CARD FU ANCE-MED, DEN, VIS	NDING  MEDICAL CARD FUNDII	0.00 NG NG NG NG NG NG NG	3,173. 142.35 323.20 268.75 95.71 268.76 268.75 731.04 197.67	76	
<u>3-NOV-20</u>	Account Number Invoice 100-5200-5011 100-5400-5011 100-5610-5011 160-5400-5011 203-5600-5011 206-5600-5011 400-5300-5011	Accour 11/04/2020 INSUR. INSUR. INSUR. INSUR. INSUR. INSUR. INSUR. INSUR.	nt Name  MEDICAL CARD FU ANCE-MED,DEN,VIS ANCE-MED,DEN,V	NDING  MEDICAL CARD FUNDII	0.00 NG NG NG NG NG NG NG	3,173. 142.35 323.20 268.75 95.71 268.76 268.75 731.04 197.67 268.75	76	
<u>3-NOV-20</u>	Account Number Invoice 100-5200-5011 100-5400-5011 100-5610-5011 160-5400-5011 203-5600-5011 206-5600-5011 269-6303-5011 400-5300-5011 400-500-5011	Account 11/04/2020 INSUR.	nt Name  MEDICAL CARD FU ANCE-MED,DEN,VIS	NDING MEDICAL CARD FUNDII	0.00 NG	3,173. 142.35 323.20 268.75 95.71 268.76 268.75 731.04 197.67 268.75 142.35	76	
<u>3-NOV-20</u>	Account Number Invoice 100-5200-5011 100-5400-5011 100-5610-5011 160-5400-5011 203-5600-5011 206-5600-5011 269-6303-5011 400-5300-5011	Account 11/04/2020 INSUR.	nt Name  MEDICAL CARD FU ANCE-MED,DEN,VIS ANCE-MED,DEN,V	NDING  MEDICAL CARD FUNDII	0.00 NG	3,173. 142.35 323.20 268.75 95.71 268.76 268.75 731.04 197.67 268.75	76	
3-NOV-20	Account Number Invoice 100-5200-5011 100-5400-5011 100-5610-5011 160-5400-5011 203-5600-5011 206-5600-5011 269-6303-5011 400-5300-5011 400-500-5011 401-5300-5011	Account 11/04/2020 INSUR.	nt Name  MEDICAL CARD FU ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED, DEN, V ANCE-MED, DEN, V ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS	NDING MEDICAL CARD FUNDII	0.00 NG	3,173. 142.35 323.20 268.75 95.71 268.76 268.75 731.04 197.67 268.75 142.35		55152
T&08	Account Number Invoice 100-5200-5011 100-5400-5011 100-5610-5011 160-5400-5011 203-5600-5011 209-6303-5011 400-5300-5011 400-5600-5011 401-5200-5011 401-5600-5011	Account 11/04/2020 INSUR.	nt Name  MEDICAL CARD FU ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED, DEN, VIS ANCE-MED, DEN, VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS ANCE-MED,DEN,VIS	NDING MEDICAL CARD FUNDII	0.00 NG	3,173. 142.35 323.20 268.75 95.71 268.76 268.75 731.04 197.67 268.75 142.35 197.68 268.75	385.59	55152
	Account Number Invoice 100-5200-5011 100-5400-5011 100-5610-5011 160-5400-5011 203-5600-5011 206-5600-5011 400-5300-5011 400-5600-5011 401-5200-5011 401-5600-5011 AT&T Payable Type	Account 11/04/2020 INSUR.	nt Name  MEDICAL CARD FU ANCE-MED, DEN, VIS	NDING MEDICAL CARD FUNDII REGUIAT	0.00 NG	3,173. 142.35 323.20 268.75 95.71 268.76 268.75 731.04 197.67 268.75 142.35 197.68 268.75	385.59	55152
.T&08 Payable #	Account Number Invoice 100-5200-5011 100-5400-5011 100-5610-5011 160-5400-5011 203-5600-5011 206-5600-5011 400-5300-5011 400-5600-5011 401-5200-5011 401-5600-5011 AT&T Payable Type Account Number	Account 11/04/2020 INSUR.	nt Name  MEDICAL CARD FU  ANCE-MED, DEN, VIS	NDING MEDICAL CARD FUNDII	0.00 NG	3,173. 142.35 323.20 268.75 95.71 268.76 268.75 731.04 197.67 268.75 142.35 197.68 268.75	385.59 nt	55152
.T&08	Account Number Invoice 100-5200-5011 100-5400-5011 100-5610-5011 160-5400-5011 203-5600-5011 206-5600-5011 400-5300-5011 400-5600-5011 401-5200-5011 401-5600-5011 AT&T Payable Type	Account 11/04/2020  INSUR. INS	nt Name  MEDICAL CARD FU ANCE-MED, DEN, VIS	NDING MEDICAL CARD FUNDII REGUIAT	0.00 NG	3,173. 142.35 323.20 268.75 95.71 268.76 268.75 731.04 197.67 268.75 142.35 197.68 268.75	385.59 nt	55152
T&08 Payable # 000015469724-C	Account Number Invoice 100-5200-5011 100-5400-5011 100-5610-5011 160-5400-5011 203-5600-5011 206-5600-5011 269-6303-5011 400-5300-5011 401-5200-5011 401-5300-5011 401-5600-5011 AT&T Payable Type Account Number Invoice 102-5400-6510	Account 11/04/2020  INSUR. INS	nt Name  MEDICAL CARD FU ANCE-MED, DEN, VIS ANCE-ME	NDING  MEDICAL CARD FUNDII  Regular  DI  Item Description	0.00 NG	3,173. 142.35 323.20 268.75 95.71 268.76 268.75 731.04 197.67 268.75 142.35 197.68 268.75  0.00 Payable Amouttion Amount 385. 385.59	385.59 nt 59	
T&08 Payable #  000015469724-C	Account Number Invoice 100-5200-5011 100-5400-5011 100-5610-5011 160-5400-5011 203-5600-5011 206-5600-5011 209-6303-5011 400-5300-5011 400-5600-5011 401-5200-5011 401-5600-5011 AT&T Payable Type Account Number Invoice 102-5400-6510  BARCELLOS, DANNY	Account 11/04/2020 INSUR. INSU	nt Name  MEDICAL CARD FU ANCE-MED, DEN, VIS ANCE-ME	NDING  MEDICAL CARD FUNDII  Regular  On  FSO CONNECTION	0.00 NG Discount Amount Distribu 0.00	3,173. 142.35 323.20 268.75 95.71 268.76 268.75 731.04 197.67 268.75 142.35 197.68 268.75  0.00 Payable Amouttion Amount 385. 385.59	385.59 nt 59 16.59	55152 55153
T&08 Payable # 000015469724-C	Account Number Invoice 100-5200-5011 100-5400-5011 100-5610-5011 160-5400-5011 203-5600-5011 206-5600-5011 269-6303-5011 400-5300-5011 400-5600-5011 401-5200-5011 401-5600-5011 AT&T Payable Type Account Number Invoice 102-5400-6510  BARCELLOS, DANNY Payable Type	Account 11/04/2020  INSUR. INS	nt Name  MEDICAL CARD FU ANCE-MED, DEN, VIS ANCE-ME	MDING MEDICAL CARD FUNDII Regular  On  FSO CONNECTION  Regular	0.00 NG O Discount Amount Distribu 0.00	3,173. 142.35 323.20 268.75 95.71 268.76 268.75 731.04 197.67 268.75 142.35 197.68 268.75  0.00 Payable Amount 385. 385.59  0.00 Payable Amount	385.59 nt 59 16.59	
T&08 Payable #  000015469724-C	Account Number Invoice 100-5200-5011 100-5400-5011 100-5610-5011 160-5400-5011 203-5600-5011 206-5600-5011 209-6303-5011 400-5300-5011 400-5600-5011 401-5200-5011 401-5600-5011 AT&T Payable Type Account Number Invoice 102-5400-6510  BARCELLOS, DANNY	Account 11/04/2020  INSUR. INS	nt Name  MEDICAL CARD FU ANCE-MED, DEN, VIS ANCE-ME	NDING  MEDICAL CARD FUNDII  Regular  On  FSO CONNECTION	0.00 NG O Discount Amount Distribu 0.00	3,173. 142.35 323.20 268.75 95.71 268.76 268.75 731.04 197.67 268.75 142.35 197.68 268.75  0.00 Payable Amoution Amount 385. 385.59  0.00 Payable Amoution Amount	385.59 nt 59 16.59 nt	

Check Report					Da	ite Range: 11/01/202	20 - 11/13
Vendor Number	Vendor Name		Payment Date	Payment Type		Payment Amount	Number
BRE14	BRENNTAG PACIFIC, INC.	B	11/06/2020	Regular	0,00	780.21	55154
Payable #	Payable Type	Post Date	Payable Description		Discount Amount Pay		
BPI95317	Account Number	11/06/2020	it Name SWIMMING POOL	Item Description	Distribution A		
LA S. J. J. J. J.	100-5610-6002		& SUPPLIES	SWIMMING POOL	0.00	780,21 780,21	
	All the second s	.,,,,,		57711711171377502		760.21	
BRY00	BRYANT L. JOLLEY		11/06/2020	Regular	0.00	22,500.00	55155
Payable #	Payable Type	Post Date	Payable Description	on .	Discount Amount Pay	able Amount	
	Account Number		it Name	Item Description	Distribution A	mount	
<u>11/2/20</u>	Invoice	11/04/2020	CARES, CALVIP & S		0.00	22,500.00	
	<u>100-5100-6520</u>		SSIONAL SERVICES/	· .	•	875.00	
	100-5200-6520		SSIONAL SERVICES/	CARES, CALVIP & STREE	•	875,00	
	<u>100-5400-6520</u>		SSIONAL SERVICES/	CARES, CALVIP & STREE	•	875.00	
	<u>100-5700-6520</u>		SSIONAL SERVICES/	CARES, CALVIP & STREE	·	875.00	
	<u>102-5400-6520</u>		SSIONAL SERVICES/	CARES, CALVIP & STREE		.875.00	
	200-5600-6520		SSIONAL SERVICES/	CARES, CALVIP & STREE	•	.875.00	
	204-5600-6520		SSIONAL SERVICES/	CARES, CALVIP & STREE	•	.875.00	
	269-6303-6520		SSIONAL SERVICES/	CARES, CALVIP & STREE	•	875.00	
	400-5300-6520		SSIONAL SERVICES/	CARES, CALVID & STREE	•	.875.00	
	400-5600-6520 401-5200-6520		SSIONAL SERVICES/	CARES, CALVID & STREE	•	,875.00	
	401-5300-6520 401-5600-6520		SSIONAL SERVICES/ SSIONAL SERVICES	CARES, CALVIP & STREE		,875,00	
	<u>401-5600-6520</u>	PRUFE	POLIVAL SERVICES	CARES, CALVIP & STREE	<u> </u>	,875.00	
CEN02	CENTRAL VALLEY LOCK & S	AFE INC.	11/06/2020	Regular	0.00	150,73	55156
Payable #	Payable Type	Post Date	Payable Description	-	Discount Amount Pay	able Amount	
	Account Number	Accour	nt Name	Item Description	Distribution A		
<u>57240</u>	Invoice	11/06/2020	PW PARTS	•	0.00	137.62	
	100-5600-6002	PARTS	SUPPLIES	PW PARTS		137.62	
57241	Invoice	11/06/2020	UNIT #523 KEYS		0.00	13.11	
11. 1. 10	100-5600-6002	, ,	SUPPLIES	UNIT #523 KEYS	0.00	13.11	
MET01	METRO UNIFORM & ACCES	SSORIES	11/06/2020	Regular	0.00	14.90	55157
Payable #	Payable Type	Post Date	Payable Description	on	Discount Amount Par	yable Amount	
	Account Number	Accour	nt Name	Item Description	Distribution A	Mount	
<u>218656</u>	Involce	11/05/2020	PATCH REMOVAL		0.00	14.90	
	<u>100-5400-5013</u>	UNIFO	RM	PATCH REMOVAL		14.90	
NELO1	MICHAEL C. NELSON		11/06/2020	Regular	0.00	12.00	55158
Payable #	Payable Type	Post Date	Payable Description		Discount Amount Par		22120
r a justic #	Account Number		it Name	Item Description	Distribution /	·	
244312	Invoice	11/06/2020	LANDSCAPE PARTS	•	0.00	12.98	
And I have the desired	213-5600-6002		SUPPLIES	LANDSCAPE PARTS	0.00	12.98	
						22.00	
MUN01	MUNI METRIX SYSTEMS CO	ORP.	11/06/2020	Regular	0.00	119.97	55159
Payable #	Payable Type	Post Date	Payable Description	on	Discount Amount Par	yable Amount	
	Account Number	Ассои	nt Name	Item Description	Distribution A	Amount	
<u>2011-2628</u>	Invoice	11/05/2020	IMAGESILO STORA	NGE	0.00	119.97	
	<u>100-5100-6520</u>	PROFE	SSIONAL SERVICES/	STORAGE AUG-SEPT		30.00	
	100-5200-6520	PROFE	SSIONAL SERVICES/	STORAGE AUG-SEPT		29.99	
	<u>100-5700-6520</u>	PROFE	SSIONAL SERVICES/	STORAGE AUG-SEPT		29.99	
	<u>400-5300-6520</u>	PROFE	SSIONAL SERVICES/	STORAGE AUG-SEPT		29.99	
OFFO1	OFFICE DEPOT		11/06/2020	Pogular	0.00	205.04	era co
OFF01 Payable #	OFFICE DEPOT	Post Date	11/06/2020 Payable Description	Regular	0.00 Discount Amount Pa		55160
rayasie #	Payable Type Account Number		rayable Descripti nt Name		Discount Amount Pa	•	
129697720001	Invoice	11/06/2020	OFFICE SUPPLIES	Item Description	0.00	80.84	
75303115007	100-5700-6000		SUPPLIES	OFFICE SUPPLIES	0.00	80.84 80.84	
				OFFICE SOFFIES			
1 <u>29698553001</u>	Invoice	11/06/2020	OFFICE SUPPLIES	geriee	0,00	24.51	
	<u>100-5700-6000</u>	OFFICE	SUPPLIES	OFFICE SUPPLIES		24.51	
<u>130567872001</u>	Invoice	11/06/2020	OFFICE SUPPLIES		0.00	59.93	

Check Report						Date Range: 11/0	01/2020	- 11/13/2020
Vendor Number	Vendor Name 100-5700-6000	OFFICE S	Payment Date SUPPLIES	Payment Type OFFICE SUPPLIES	Discount Amou	Int Payment Am 59.93	nount	Number
<u>130959769001</u>	Invoice 100-5700-6000	11/06/2020 OFFICE S	OFFICE SUPPLIES SUPPLIES	OFFICE SUPPLIES	0.00	40.53 40.53		
RLB01 <b>Payable #</b>	REEDLEY LUMBER & BUILD Payable Type Account Number Invoice	ING Post Date Account 11/06/2020	11/06/2020 Payable Descriptio I Name LANDSCAPE PARTS	Regular n Item Description	Discount Amount	•	03.98	55161
<u>242610</u>	213-5600-6002 Invoice	11/06/2020	WATER PARTS	LANDSCAPE PARTS	0.00	57.02 99.98		
242769	400-5600-6002 Invoice	11/06/2020	CH SUPPLIES	WATER PARTS	0.00	99.98		
<u>243075</u>	100-5620-6531 Involce 200-5600-6002	11/06/2020	& MAINTENANC FIREHYDRANT SUP & SUPPLIES	CH SUPPLIES PLIES FIREHYDRANT SUPPLIES	0.00	122.72 128.21 128.21		
243401	Invoice 400-5600-6002	11/06/2020	WATER LEAK PART: & SUPPLIES		0.00	128.21 16.41 16.41		
<u>243520</u>	Invoice 100-5618-6531	11/06/2020	CC PARTS	CC PARTS	0.00	34.10 34.10		
<u>243522</u>	Invoice 400-5600-6002	11/06/2020 PARTS 8	WATER SUPPLIES & SUPPLIES	WATER SUPPLIES	0.00	72.29 72.29		
<u>243673</u>	Invoice 200-5600-6002	11/06/2020 PARTS 8	STREET PARTS & SUPPLIES	STREET PARTS	0.00	37.34 37.34		
<u>243764</u>	Invoice 100-5616-6002	11/06/2020 PARTS S	SWIMMING POOL	REPAIRS SWIMMING POOL REPA	0.00 AIRS	98.66 98.66		
<u>243784</u>	Invoice 400-5600-6002	11/06/2020 PARTS 8	WATER PARTS & SUPPLIES	WATER PARTS	0.00	49.13 49.13		
<u>244149</u>	Invoice 100-5616-6002	11/06/2020 PARTS S	SWIMMING POOL	REPAIRS SWIMMING POOL REPA	0.00 AIRS	19.46 19.46		
<u>244151</u>	Invoice 200-5600-6002	11/06/2020 PARTS 8	STREET SUPPLIES & SUPPLIES	STREET SUPPLIES	0.00	602.92 602.92		
<u>244231</u>	Invoice 100-5620-6531	11/06/2020 REPAIRS	CH SUPPLIES & MAINTENANC	CH SUPPLIES	0.00	36.37 36.37		
<u>244547</u>	Invoice 100-5620-6531	11/06/2020 REPAIRS	CH CHAMBERS PAR & MAINTENANC	RTS CH CHAMBERS PARTS	0.00	49.77 49.77		
<u>244825</u>	Invoice 100-5620-6002	11/06/2020 PARTS S	CH FLAG REPAIRS SUPPLIES	CH FLAG REPAIRS	0.00	79,60 79.60		
REN02 Payable #	RENT A TOILET Payable Type Account Number Invoice 100-5600-6520	Post Date Account 11/06/2020 PROFES	PW RENTAL SVCS 9	Item Description	Discount Amount		165.00	55162
FRE07 Payable # 332504-9-27-20	THE FRESNO BEE Payable Type Account Number Invoice 100-5200-6500	Post Date Accoun 11/06/2020 ORDINA	11/06/2020 Payable Description t Name NOTICE FOR BUDG NNCE & PUBLISHIN	Item Description	Discount Amount		389.76	55163
THO00 Payable # 843250600	THOMSON REUTERS - WES Payable Type Account Number Invoice 100-5400-6529	Post Date Accoun 11/05/2020	11/06/2020 Payable Description t Name INVESTIGATING SOSTRIBUTIRS SVCS	Item Description	Discount Amount Distributi 0.00			55164

Check Report						Date Range:	11/01/202	0 - 11/13/2020
Vendor Number	Vendor Name		Payment Date	Payment Type	Discount Ame	ount Paymer	nt Amount	Number
TOW02	TOWNSEND PUBLIC AFFAIR	RS, INC.	11/06/2020	Regular		0.00	2,000.00	55165
Payable #	Payable Type	Post Date	Payable Descriptio		Discount Amount	Payable Amo	unt	
40405	Account Number		t Name	Item Description		ion Amount		
<u>16425</u>	Invoice	11/05/2020	LOBBYING GRANTS		0.00	2,000	0.00	
	100-5200-6520	PROFES	SIONAL SERVICES/	LOBBYING GRANT SVCS	10-20	2,000.00		
VOR01	VORTAL, INC.		11/06/2020	Regular		0.00	200.00	55166
Payable #	Payable Type	Post Date	Payable Descriptio	*	Discount Amount			55100
	Account Number	Accoun	t Name	Item Description		ion Amount		
<u> 1499</u>	Invoice	11/06/2020	WEB HOSTING		0.00	200	0.00	
	<u>100-5200-6520</u>		SIONAL SERVICES/	WEB HOSTING		50.00		
	100-5620-6520		SIONAL SERVICES/	WEB HOSTING		50.00		
	100-5700-6520		SIONAL SERVICES/	WEB HOSTING		50.00		
	400-5300-6520	PROFES	SIONAL SERVICES/	WEB HOSTING		50.00		
WIL06	WILLDAN ENGINEERING		11/06/2020	Regular		0.00	1,540.00	55167
Payable #	Payable Type	Post Date	Payable Descriptio		Discount Amount		•	- *
	Account Number	Accour	it Name	Item Description		ion Amount		
<u>0033<b>332</b>0</u>	Invoice	11/05/2020	BLDG & SAFETY SV	•	0.00	1,540	0.00	
	100-5700-6520	PROFES	SSIONAL SERVICES/	BLDG & SAFETY SVCS 9,	/20	1,540.00		
ADT01	ADT SECURITY SERVICES		11/12/2020	Regular		0.00	222.35	55168
Payable #	Payable Type	Post Date	Payable Description	n	Discount Amount	•	ount	
	Account Number		t Name	Item Description	Distribut	ion Amount		
<u>401559711 11-20</u>	Involce	11/10/2020	PW SVCS 11/20		0.00		2.35	
	<u>400-5600-6520</u>	PROFES	SSIONAL SERVICES/	PW SVCS 11/20		222.35		
ASI01	ASI		11/12/2020	Regular		0.00	1,230.00	55169
Payable #	Payable Type	Post Date	Payable Description	n	Discount Amount	Payable Amo	ount	
	Account Number		it Name	Item Description	Distribut	tion Amount		
<u>A1005197</u>	Invoice	11/10/2020	HRA ADMIN FEES 1		0.00	1,23	0.00	
	100-5100-6520		SSIONAL SERVICES/	HRA ADMIN FEES 11-20		29.29		
	<u>1.00-5200-6520</u> 1 <u>00-5</u> 400-6520		SSIONAL SERVICES/ SSIONAL SERVICES/	HRA ADMIN FEES 11-20 HRA ADMIN FEES 11-20		58.57 380.71		
	100-5617-6520		SSIONAL SERVICES/	HRA ADMIN FEES 11-20		29.28		
	100-5620-6520		SSIONAL SERVICES/	HRA ADMIN FEES 11-20		29.27		
	102-5400-6520		SSIONAL SERVICES/	HRA ADMIN FEES 11-20		58.57		
	269-6303-6520	PROFES	SIONAL SERVICES/	HRA ADMIN FEES 11-20	)	322,14		
	<u>400-5300-6520</u>	PROFES	SSIONAL SERVICES/	HRA ADMIN FEES 11-20	)	73.21		
	<u>400-5600-6520</u>	PROFE:	SSIONAL SERVICES/	HRA ADMIN FEES 11-20	כ	87.87		
	<u>401-5300-6520</u>		•	HRA ADMIN FEES 11-20		73.22		
	401-5600-6520	PROFE	SSIONAL SERVICES	HRA ADMIN FEES 11-20	)	87.87		
AUT01	AUTO ZONE		11/12/2020	Regular		0.00	984.98	55170
Payable #	Payable Type	Post Date	Payable Description	-	Discount Amount			· <u>-</u>
	Account Number	Accour	nt Name	Item Description	Distribu	tion Amount		
<u>3758306451</u>	Invoice	11/12/2020	UNIT #528 REPAIR	S	0.00	1	3.56	
	<u>100-5600-6002</u>	PARTS	SUPPLIES	UNIT #528 REPAIRS		13.56		
<u>3758310342</u>	Involce	11/12/2020	PW SHOP SUPPLIE	s	0.00	3	5.89	
	100-5600-6002	PARTS	SUPPLIES	PW SHOP SUPPLIES		35.89		
<u>3758312327</u>	Invoice	11/12/2020	UNIT #525 REPAIR	S	0.00	2	5.05	
	401-5600-6532	VEHICL	E MAINTENANCE	UNIT #525 REPAIRS		25.05		
3758312801	Invoice	11/12/2020	UNIT#104 REPAIR	s	0.00	1	4.17	
	100-5600-6002		SUPPLIES	UNIT #104 REPAIRS	-1-0	14.17	— •	
3 <b>758313331</b>	Invoice	11/12/2020	PW SHOP PARTS		0.00		1.25	
nd de sel de	100-5600-6002		SUPPLIES	PW SHOP PARTS	0.00	21.25		
3750312405					0.00		. DO E.	
<u>3758316195</u>	Invoice 100-5600-6002	11/12/2020 PARTS	PW SHOP PARTS SUPPLIES	PW SHOP PARTS	0.00	57.39	57.39	
on many part of the state of the								
<u>3758317051</u>	Invoice	11/12/2020	UNIT #523 REPAIR	٥	0.00	10	6.70	

Check Report						Date Range: 11/01/2	020 - 11/13/202
Vendor Number	Vendor Name 400-5600-6532	VEHIC	Payment Date LE MAINTENANCE	Payment Type UNIT #523 REPAIRS	Discount Amo	ount Payment Amour 106.70	t Number
<u>3758317915</u>	Invoice 100-5600-6002	11/12/2020 PARTS	UNIT #514 PARTS SUPPLIES	UNIT #514 PARTS	0.00	14.56 14.56	
<u>3758317924</u>	Invoice 100-5600-6002	11/12/2020 PARTS	UNIT # 514 PARTS SUPPLIES	UNIT # 514 PARTS	0.00	45.76 45.76	
<u>3758318418</u>	Invoice 400-5600-6532	11/12/2020 VEHIC	UNIT #514 REPAIRS LE MAINTENANCE	S UNIT #514 REPAIRS	0.00	271.62 271.62	
<u>3758319130</u>	Invoice 401-5600-6532	11/12/2020 VEHIC	UNIT #521 REPAIRS LE MAINTENANCE	S UNIT #521 REPAIRS	0.00	14.62 14.62	
<u>3758319163</u>	Involce 401-5600-6532	11/12/2020 VEHIC	UNIT #521 REPAIRS LE MAINTENANCE	S UNIT #521 REPAIRS	0.00	35.37 35.37	
<u>3758319483</u>	Invoice 400-5600-6532	11/12/2020 VEHIC	UNIT #514 REPAIRS LE MAINTENANCE	S UNIT #514 REPAIRS	0.00	101.28 101.28	
<u>3758319574</u>	Invoice 100-5400-6532	11/06/2020 VEHIC	BATTERY FOR VEHI LE MAINTENANCE	ICLE BATTERY FOR VEHICLE	0.00	220.56 220.56	
<u>3758322114</u>	Invoice 401-5600-6002	11/12/2020 PARTS	WWTP SPRAYER PA	ARTS WWTP SPRAYER PARTS	0.00	7.20 7.20	
BAN01 Payable #	BANKCARD CENTER Payable Type	Post Date	11/12/2020 Payable Description	Regular		0.00 5,989.0 Payable Amount	04 55171
rayable #	Account Number		nt Name	Item Description		ion Amount	
0062-3854 OCT	Invoice	11/12/2020	PW CC EXPENSES (	•	0.00	1,880.62	
0002-3005-001	100-5600-6002		SUPPLIES	PW SUPPLIES	0.00	21.63	
	100-5600-6002		SUPPLIES	PW PARTS		22,28	
	100-5610-6002		& SUPPLIES	PARK SUPPLIES		181.80	
			& SUPPLIES				
	100-5610-6002		& SUPPLIES	PARK SUPPLIES PARK SUPPLIES		101.19	
	<u>100-5610-6002</u> 200-5600-6002		6 & SUPPLIES	STREET PARTS		21,84 43.55	
	200-5600-6002		& SUPPLIES	STREET PARTS		217.80	
	200-5600-6002		& SUPPLIES	STREET PARTS		9,79	
	A		SSIONAL SERVICES/	WATER REPAIRS			
	400-5600-6520		RS & MAINTENANC	ZLS REPAIRS		423.87	
	<u>401-5600-6531</u> 401-5600-7002		REPAIRS	WWTP REPAIRS		53.06 783.81	
	**DT-2000-1005			WWIF NEFAINS		102:01	
<u>0135-7676-OCT</u>	Invoice	11/12/2020	CC EXPENSES OCT		0.00	4,108.42	
	<u>100-5200-6000</u>		E SUPPLIES	ADMIN SUPPLIES		75.76	
	<u>100-5200-6537</u>		AL EVENT EXPENSE	SENIOR BANNER PROG.		1,075.17	
	100-5700-6000		E SUPPLIES	COMM DEV SUPPLIES		277.42	
	<u>100-5700-6000</u>		E SUPPLIES	COMM DEV SUPPLIES		43,57	
	269-6303-6001		ATIONAL SUPPLIES	PAOE SUPPLIES		217.80	
	269-6303-6001		ATIONAL SUPPLIES	PAGE SUPPLIES		224.95	
	<u>269-6303-6001</u>		ATIONAL SUPPLIES	PAOE SUPPLIES		359.25	
	<u>269-6303-6001</u>		ATIONAL SUPPLIES	PAOE SUPPLIES		1,314.64	
	<u>269-6303-6001</u>		ATIONAL SUPPLIES	PAGE SUPPLIES		251.46	
	<u>269-6303-6001</u>		ATIONAL SUPPLIES	PAGE SUPPLIES	ıc	208,74	
	<u>400-5300-6503</u>	IKAVI	EL, MEETINGS & TR	WATER METER MEETIN	lu	59.66	
	**Void**		11/12/2020	Regular			00 55172
BUS01	BUSH ENGINEERING INC.		11/12/2020	Regular		· · · · · · · · · · · · · · · · · · ·	79 55173
Payable #	Payable Type	Post Date	Payable Description			Payable Amount	
_	Account Number		int Name	Item Description		tion Amount	
3	Invoice	11/06/2020	MERCED/TUOLUM		0.00	15,638.79	
	<u>225-5600-7019</u>	CML	MERCED/TUOUMNE	MERCED/TUOLUMNE A	LLEY	15,638.79	
CEN10	CENTRAL INDUSTRIAL AUT	OMATION LLC.	11/12/2020	Regular		0.00 500.	00 55174

Check Report						Date Range:	11/01/202	0 - 11/1
Vendor Number	Vendor Name		Doument Date	Downsont Tuno	Discount Amo	_		
Payable #	Payable Type	Post Date	Payment Date Payable Description	Payment Type	Discount Amount			Numbe
i a jasic ii	Account Number		nt Name	Item Description		on Amount	uitt	
201104DM	Invoice	11/10/2020	SEWER REPAIRS	item pescription	0.00		0.00	
333	<u>401-5600-6520</u>		SSIONAL SERVICES	SEWER REPAIRS	0,00	500.00	,,,,,	
EN02	CENTRAL VALLEY LOCK & S		11/12/2020	Regular		).00 Danielska f	363.69	55175
Payable #	Payable Type	Post Date	Payable Descriptio		Discount Amount	•	unt	
57397	Account Number	11/12/2020	nt Name HP LOCK PARTS	Item Description		on Amount		
<u>51331</u>	Invoice 100-5610-6002		& SUPPLIES	HP LOCK PARTS	0.00	363,69	3.69	
	A i Areniment (Combanille et Verse) (Opporte L'economistre politicalité à 4,000m							
EEO1	EDDIE C. REED		11/12/2020	Regular		00,0	150.00	55176
Payable #	Payable Type	Post Date	Payable Description	on	Discount Amount	Payable Amo	unt	
	Account Number	Accou	nt Name	Item Description	Distributi	on Amount		
<u>4480</u>	Invoice	11/10/2020	POOL VACCUM 10,	/20	0.00	150	0.00	
	<u>100-5616-6520</u>	PROFE	SSIONAL SERVICES	POOL VACCUM 10/20		150.00		
iRA01	GRANTED SOLUTIONS		11/12/2020	Regular	ſ	0.00	5,814.00	55177
Payable #	Payable Type	Post Date	Payable Description	-	Discount Amount		•	,
•	Account Number	Accou	nt Name	Item Description		on Amount		
1784	Invoice	11/12/2020	ADMIN SVCS 9/01-	·	0.00	5,814	4.00	
30,4,400,4,	100-5200-6520		SSIONAL SERVICES/	ADMIN SVCS 9/01-9/30		1,453,50	1100	
	100-5700-6520		SSIONAL SERVICES/	ADMIN SVCS 9/01-9/30		1,453.50		
	400-5300-6520		SSIONAL SERVICES/	ADMIN SVCS 9/01-9/30		1,453.50		
	<u>401-5200-6520</u>		SSIONAL SERVICES	ADMIN SVCS 9/01-9/30		1,453.50		
CD 4.04	CRANTED COLUTIONS		44/42/2020	Daniela i			642.52	
RA01	GRANTED SOLUTIONS	Doot Dot	11/12/2020	Regular		0.00	612.50	551/8
Payable #	Payable Type	Post Date	Payable Description		Discount Amount	-	ount	
4 TOF	Account Number		nt Name	Item Description		on Amount		
<u>1785</u>	Invoice	11/12/2020	COMM DEV SVCS !	•	0.00		2.50	
	<u>100-5700-6520</u>	PROFE	SSIONAL SERVICES/	COMM DEV SVCS 9/01	- 9/30	612.50		
IAA01	HAAKER EQUIPMENT COM	MPANY	11/12/2020	Regular		0,00	600,34	55179
Payable #	Payable Type	Post Date	Payable Description	on	Discount Amount	Payable Amo	ount	
	Account Number	Accou	nt Name	Item Description	Distributi	ion Amount		
C66640	Invoice	11/10/2020	SEWER EQUIPMEN	NT	0.00	60	0.34	
	<u>401-5600-6004</u>	TOOLS	& MINOR EQUIPM	SEWER EQUIPMENT		600.34		
IOL02	HOLIDAY LIGHTS AND MA	GIC, INC.	11/12/2020	Regular		0.00	8,012.20	55180
Payable #	Payable Type	Post Date	Payable Description	-	Discount Amount			22200
	Account Number		nt Name	Item Description		ion Amount		
1119-194	Invoice	11/12/2020	X-MAS WREATHS/		0.00	8,01	2.20	
	<u>100-5200-6537</u>		AL EVENT EXPENSE	X-MAS WREATHS/LED		8,012.20	- <del></del>	
°9, 101	IOSE NA SILVA		11/12/2020	Regular		0,00	1 650 00	ET404
F&J01	JOSE M. SILVA	Dark Date	11/12/2020	Regular			1,659.90	22191
Payable #	Payable Type	Post Date	Payable Description		Discount Amount	-	Junt	
	Account Number	11/06/2020	nt Name FUEL 10/20	Item Description		ion Amount	0.00	
14/5/20	Invoice 100-5620-6011			EHEL 10/20	0.00	1,65	3.30	
<u>11/6/20</u>		FUEL -	NEC.	FUEL 10/20		136.01		
<u>11/6/20</u>	www.			FUEL 10/20 FUEL 10/20		979.51 544.38		
<u>11/6/20</u>	400-5600-6011 401-5600-6011	FUEL FUEL		FUEL 10/20				
**************************************	400-5600-6011 401-5600-6011	FUEL		·				
UL02	400-5600-6011 401-5600-6011 JULES & ASSOCIATES INC.	FUEL	11/12/2020	Regular		0.00	51,179.85	55182
www.minimered	400-5600-6011 401-5600-6011 JULES & ASSOCIATES INC. Payable Type	FUEL Post Date	Payable Description	Regular on	Discount Amount	Payable Am		55182
UL02 Payable #	400-5600-6011 401-5600-6011 JULES & ASSOCIATES INC. Payable Type Account Number	FUEL Post Date Accou	Payable Descriptions  nt Name	Regular on Item Description	Discount Amount Distribut	Payable Amoint	ount	55182
IUL02	400-5600-6011 401-5600-6011 JULES & ASSOCIATES INC. Payable Type Account Number Invoice	FUEL  Post Date  Accou	Payable Description Name 2015 VACTOR LEA	Regular on Item Description SE RENTAL	Discount Amount Distribut 0.00	Payable Amoion Amount 51,17	ount	55182
UL02 Payable #	400-5600-6011 401-5600-6011 JULES & ASSOCIATES INC. Payable Type Account Number	FUEL  Post Date  Accou	Payable Descriptions  nt Name	Regular on Item Description	Discount Amount Distribut 0.00	Payable Amoint	ount	55182

11/12/2020

Regular

OFFICE DEPOT

OFF01

643.01 55183

Check Report					C	ate Range; 11/01/202	0 - 11/13
Vendor Number Payable #	Vendor Name Payable Type	Post Date	Payment Date Payable Description	Payment Type	Discount Amount	t Payment Amount	_
rayable #	Account Number		nt Name	Item Description	Discount Amount Pa	•	
131125202001	Invoice	11/10/2020	PA OFFICE SUPPLII	•	0.00	231,92	
	269-6303-6000		E SUPPLIES	PA OFFICE SUPPLIES		231.92	
131132729001	Invoice	11/10/2020	PA OFFICE SUPPLI	FS	0.00	247.74	
	269-6303-6 <b>0</b> 00	* '	E SUPPLIES	PA OFFICE SUPPLIES	0.00	247.74	
131132767001	Invoice	11/10/2020	PA OFFICE SUPPLI	ES	0.00	163.35	
	269-6303-6000		E SUPPLIES	PA OFFICE SUPPLIES		163.35	
P.G01	PACIFIC GAS & ELECTRIC		11/12/2020	Regular	0.00	1,435.76	55184
Payable #	Payable Type	Post Date	Payable Description		Discount Amount Pa	•	
00000 7 40/20	Account Number	11/10/2020	nt Name	Item Description	Distribution		
<u>08083-7 10/20</u>	Invoice 200-5600-6512	ELECTI	MILTON SVCS 10/	MILTON SVCS 10/20	0.00	23.46 23.46	
40204 4 40 20	W. (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)			MILION 5105 10/20	0.00		
<u>19391-1 10-20</u>	Invoice 100-5600-6512	11/06/2020 ELECTI	HP SVCS 10/20 RICITY	HP SVCS 10/20	0,00	1,412.30 1,412.30	
RLB01	REEDLEY LUMBER & BUILI	DING	11/12/2020	Regular	0.0	59.69	55185
Payable #	Payable Type	Post Date	Payable Description		Discount Amount Pa	•	
n aridan	Account Number		nt Name	Item Description	Distribution		
<u> 245446</u>	Involce	11/10/2020	BSCC CALVIP SUPI	PLIES BSCC CALVIP SUPPLIES	0.00	59.69	
	<u>279-5700-6002</u>	PARIS	S/SUPPLIES	BSCC CALVIP SUPPLIES		59.69	
ROB04	ROBERT HALF INTERNATION	ONAL INC.	11/12/2020	Regular	0.0	1,074.80	55186
Payable #	Payable Type	Post Date	Payable Descripti	on	Discount Amount Pa	ayable Amount	
	Account Number	Accou	nt Name	Item Description	Distribution	Amount	
<u>56629971</u>	Invoice	11/10/2020	LUZ FLORES- FINA	NCE	0.00	1,074.80	
	<u>400-5300-6520</u>	PROFE	ESSIONAL SERVICES/	LUZ FLORES- FINANCE		429.92	
	<u>401-5300-6520</u>	PROFE	ESSIONAL SERVICES/	LUZ FLORES- FINANCE		429.92	
	<u>402-5300-6520</u>	PROFE	ESSIONAL SERVICES	LUZ FLORES- FINANCE		214.96	
RSG01	RSG, INC.		11/12/2020	Regular	0.0	/·· <del>-</del>	55187
Payable #	Payable Type	Post Date	Payable Descripti		Discount Amount P		
	Account Number		int Name	Item Description	Distribution		
<u>1006706</u>	Invoice	11/10/2020	SUCCESOR AG SV		0,00	593.75	
	<u>602-8100-6542</u>		RACT SERVICES	SUCCESOR AG SVCS 10	)-20	593.75	
1006727	Invoice	11/10/2020	19/20 DISCLOSUR	E REPORT	0.00	1,770.00	
	<u>602-8100-6542</u>	CONT	RACT SERVICES	19/20 DISCLOSURE RE	PORT	1,770.00	
SAN1R	SAN JOAQUIN VALLEY AIR	<b>.</b>	11/12/2020	Regular	0.0	0 433.00	55188
Payable #	Payable Type	Post Date	Payable Descripti	on	Discount Amount P	ayable Amount	
-	Account Number	Accou	ınt Name	Item Description	Distribution	Amount	
C313074	Invoice	11/12/2020	PERMIT 20/21		0.00	290,00	
	AND ECON CERR	pecili	I ATODY EEES	DEDMIT 20/21		200.00	

PERMIT 20/21

**PERMIT 20/21** 

Regular

**REGULATORY FEES** 

REGULATORY FEES

**PERMIT 20/21** 

11/12/2020

11/12/2020

C313075

UNU00

400-5600-6583

401-5600-6583

UNUM LIFE INSURANCE CO.

Invoice

290,00

143.00

143.00

95.80 55189

0,00

Check Repo	ort	
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Date Range: 11/01/2020 - 11/13/2020

							Date Hanger 2	-, 0-, -0+	0 - 11/13/202
Vendor Number	Vendor Name		<del>-</del>	Payment Type			unt Payment		Number
Payable #	Payable Type	Post Date	Payable Descriptio	n	Discount A	mount	Payable Amou	nt	
	Account Number	Accou	nt Name	Item Description		Distributio	on Amount		
<u>06009032-001-12</u>	Invoice	11/10/2020	SHORT TERM DIS. 1	12-20		0.00	95.8	30	
	100-5200-5014	LIFE, L'	TD & STD	SHORT TERM DIS. 12-20	)		3.83		
	<u>100-5400-5014</u>	LIFE, L'	TD & STD	SHORT TERM DIS. 12-20	)		38.32		
	100-5617-5014	LIFE, L'	TD & STD	SHORT TERM DIS. 12-20	)		1.92		
	<u>100-5620-5014</u>	LIFE, L'	TD & STD	SHORT TERM DIS. 12-20	)		1.91		
	102-5400-5014	LIFE, L	TD & STD	SHORT TERM DIS. 12-20	)		5.75		
	269-6303-5014	LIFE, L'	TD & STD	SHORT TERM DIS. 12-20	)		21.08		
	400-5300-5014	LIFE, L'	TD & STD	SHORT TERM DIS. 12-20	)		4.79		
	<u>400-5600-5014</u>	LIFE, L	TD & STD	SHORT TERM DIS. 12-20	)		6.70		
	<u>401-5300-5014</u>	LIFE, L	TD & STD	SHORT TERM DIS. 12-20	)		4.79		
	<u>401-5600-5014</u>	LIFE, L	TD & STD	SHORT TERM DIS. 12-20	)		6,71		
I D00	VANESSA A. EINERSON		11/12/2020	Regular		C	0.00	40.49	55190
Payable #	Payable Type	Post Date	Payable Description	n	Discount A	mount	Payable Amou	nt	
	Account Number	Accou	nt Name	Item Description	t	) Distribution	on Amount		
<u> 16562</u>	Involce	11/06/2020	CD BUSINESS CARE	)S		0.00	40.4	49	
	100-5700-6000	OFFIC	E SUPPLIES	CD BUSINESS CARDS			40.49		
BELO3	ALMA M. BELTRAN		11/13/2020	Regular		C	0.00	770.00	55191
Payable #	Payable Type	Post Date	Payable Description	=	Discount 4		Payable Amou		22271
	Account Number		nt Name	Item Description			on Amount		
10/27/2020	Invoice	11/13/2020	MAYORS MTG PER	•	•	0.00	110.	nn	
A. 33 Am J A. 33 Am S.	100-5100-6503		L, MEETINGS & TR	MAYORS MTG PER DIEN	M- 1DAV	0.00	110.00	00	
			·		VI- IDAI				
11/5-11/6/2020	Invoice	11/13/2020	MAYORS MTG PER			0.00	220.	00	
	<u>100-5100-6503</u>	TRAVE	EL, MEETINGS & TR	MAYORS MTG PER DIEN	VI- 2DAYS		220,00		
11/9-11/13/2020	Invoice	11/13/2020	MAYORS MTG PER	DIEM- 4DAYS		0.00	440.	00	
	<u>100-5100-6503</u>	TRAVE	L, MEETINGS & TR	MAYORS MTG PER DIEN	VI- 4DAYS		440.00		
ASIO1	ASI		11/13/2020	Regular		(	0.00	4,518.88	55192
Payable #	Payable Type	Post Date	Payable Description	<del>-</del>	Discount A	lmount	Payable Amou		
•	Account Number	Accou	nt Name	Item Description			on Amount		
11-NOV-20	Invoice	11/12/2020	MEDICAL CARD FU			0.00	4,518.	88	
	100-5200-5011		ANCE-MED, DEN, VIS	ADMIN			138.57		
	100-5400-5011		ANCE-MED, DEN, VIS	PD			79.60		
	100-5610-5011		ANCE-MED, DEN, VIS	PW			753.05		
	203-5600-5011		ANCE-MED, DEN, VIS	PW			753.05		
	206-5600-5011		ANCE-MED, DEN, VIS	PW			753.05		
	269-6303-5011		ANCE-MED, DEN, VIS	POA			144,43		
	400-5300-5011		RANCE- MED, DEN. V	FINANCE			126,21		
	400-5600-5011		RANCE- MED, DEN, V	PW			753.06		
	401-5200-5011		RANCE-MED, DEN, VIS	ADMIN			138.58		
			* *				126.22		
	401-5300-5011		RANCE-MED, DEN, VIS	FINANCE					
	401-5600-5011	HUSUF	RANCE-MED, DEN, VIS	PW			753.06		
BCT01	BCT CONSULTING, INC.		11/13/2020	Regular			0.00	1,210.00	55193

Date Range: 11/01/2020 - 11/13/2020

Na 1 81 1						-	•	
Vendor Number	Vendor Name		Payment Date	Payment Type		ount Payment		Number
Payable #	Payable Type	Post Date	Payable Description		Discount Amount	-	t	
	Account Number		nt Name	Item Description		ion Amount		
<u>230-11012020-12</u>		11/12/2020	ALL FAC PHONE SV	•	0.00	1,210.0	0	
	<u>100-5200-6510</u>		IONE/DATA/PAGER	ALL FAC PHONE SVCS 1	•	101.25		
	<u>100-5400-6510</u>		IONE/DATA/PAGER	ALL FAC PHONE SVCS 1	1/20	576.25		
	<u>100-5615-6510</u>		HONE/DATA/PAGER	ALL FAC PHONE SVCS 1	1/20	26.25		
	<u>100-5700-6510</u>		HONE/DATA/PAGER	ALL FAC PHONE SVCS 1	1/20	51.25		
	<u> 269-6303-6510</u>	TELEPI	ione/data/pager	ALL FAC PHONE SVCS 1	1/20	151.25		
	<u>277-5700-6545</u>		RACTORS	ALL FAC PHONE SVCS 1	1/20	76.25		
	<u>400-5300-6510</u>	TELEPI	ione/data & pag	ALL FAC PHONE SVCS 1	•	88.13		
	<u>400-5600-6510</u>	TELEP	HONE/DATA/PAGER	ALL FAC PHONE SVCS 1	1/20	25.63		
	<u>401-5300-6510</u>	TELEPI	Hone/ Data/Page	ALL FAC PHONE SVCS 1	1/20	88.12		
	<u>401-5600-6510</u>	TELEPI	HONE/DATA/PAGER	ALL FAC PHONE SVCS 1	1/20	25.62		
COM05	COMCAST		11/13/2020	Regular		0.00	,101.03	55194
Payable #	Payable Type	Post Date	Payable Description	on	Discount Amount	Payable Amoui	nt	
	Account Number		nt Name	Item Description		tion Amount		
<u>0230-11-20</u>	Invoice	11/10/2020	CC2 SVCS 11/20		0.00	100.0	5	
	<u>100-5620-6510</u>	TELEPI	HONE/DATA/PAGER	CC2 SVCS 11/20		100.05		
0248-11-20	Invoice	11/10/2020	CC SVCS 11/20		0.00	100.0	5	
	100-5618-6510	TELEPI	HONE/ DATA	CC SVCS 11/20		1.00,05		
0255-11-20	Invalac	11/10/2020	CC1 SVCS 11/20		0.00	100,0	\F	
07-3-3-11-7-0	Invoice		HONE/DATA/PAGER	CC1 SVCS 11/20	0.00		13	
	<u>100-5620-6510</u>			CC1 3VC3 11/20		100.05		
<u>0263-11-20</u>	invoice	11/10/2020	TC SVCS 11/20		0.00	100.0	15	
	<u>100-5620-6510</u>	TELEPI	HONE/DATA/PAGER	TC SVCS 11/20		100.05		
1293-11-20	Invoice	11/10/2020	PA SVCS 11/20		0.00	179.5	9	
	269-6303-6510	TELEPI	HONE/DATA/PAGER	PA SVCS 11/20		179.59		
1665-11-20	Involce	11/10/2020	PD SVCS 11/20		0.00	179.8	13	
*****	100-5400-6510		HONE/DATA/PAGER	PD SVCS 11/20	0100	179.83		
				10010011,20				
<u>1792-11-20</u>	Invoice	11/10/2020	CH SVCS 11/20	au au aa 44 fa a	0.00		11	
	<u>100-5620-6510</u>	TELEPI	HONE/DATA/PAGER	CH SVCS 11/20		341.41		
DIA11	DIAMOND COMMUNICATI	ONS	11/13/2020	Regular		0.00	270.00	55195
Payable #	Payable Type	Post Date	Payable Description	on	Discount Amount	Payable Amou	nt	
•	Account Number	Accou	nt Name	Item Description	Distribu	tion Amount		
231818	Involce	11/12/2020	PA FIRE ALARM SV	CS 12/20	0.00	90.6	00	
Warrage A	269-6303-6520	PROFE	SSIONAL SERVICES/	PA FIRE ALARM SVCS 1	.2/20	90.00		
<u>231819</u>	Invoice	11/12/2020	CC FIRE ALARM SV	/CS 12/20	0.00	90.0	10	
Amadadh Malabarda	100-5618-6520			CC FIRE ALARM SVCS 1		90.00	70	
	M. O. Stranger Assessment State Selected States Considerated and Control Selected Selected States Selected Sele							
<u>231820</u>	Invoice	11/12/2020	SC FIRE ALARM SV	•	0.00		00	
	<u>100-5615-6520</u>	PROFE	SSIONAL SERVICES/	SC FIRE ALARM SVCS 1	.2/20	90.00		
ONT00	ON TRAC		11/13/2020	Regular		0.00	12 69	55196
Payable #	Payable Type	Post Date	Payable Description	_	Discount Amount			55250
rayable #	Account Number		nt Name	Item Description		tion Amount		
<b>0</b> 0077722	Invoice	11/12/2020	ABC GRANT POSTA	•	0.00		58	
9092733	531-5400-6012		GE, SHIPPING & FR	ABC GRANT POSTAGE	0.00	12.68		
	202-34W-00112	FUSIA	iou, shiffing of th	ADC GIVANT FOSTAGE		12.00		
SOC00	SOCIAL VOCATIONAL SERV	/ICES	11/13/2020	Regular		0.00 1	3,725.00	55197

Check Report						Date Range: 11/01/202	0 - 11/13/202
Vendor Number	Vendor Name		Payment Date	Payment Type	Discount Amo	unt Payment Amount	
Payable #	Payable Type	Post Date	Payable Description	on	Discount Amount	•	
	Account Number	Acco	ount Name	Item Description		on Amount	
36H2013-IN	Invoice	11/12/2020	LANDSCAPE SVCS	•	0.00	4,575.00	
	100-5400-6520		FESSIONAL SERVICES/	LANDSCAPE SVCS 8/20		457,50	
	100-5600-6520	PRO	FESSIONAL SERVICES/	LANDSCAPE SVCS 8/20		457.50	
	100-5610-6520	PRO	FESSIONAL SERVICES/	LANDSCAPE SVCS 8/20		457.50	
	100-5615-6520		FESSIONAL SERVICES/	LANDSCAPE SVCS 8/20		457,50	
	100-5620-6520		FESSIONAL SERVICES/	LANDSCAPE SVCS 8/20		457.50	
	203-5600-6520		FESSIONAL SERVICES/	LANDSCAPE SVCS 8/20		457.50	
	204-5600-6520		FESSIONAL SERVICES/	LANDSCAPE SVCS 8/20		457.50	
	213-5600-6520		FESSIONAL SERVICES/	LANDSCAPE SVCS 8/20		915.00	
	269-6303-6520		FESSIONAL SERVICES/	LANDSCAPE SVCS 8/20		457.50	
2612042 (M					0.00		
36J2013-IN	Invoice	11/12/2020	LANDSCAPE SVCS		0.00	4,575.00	
	100-5400-6520		FESSIONAL SERVICES/	LANDSCAPE SVCS 10/20		457.50	
	<u>100-5600-6520</u>		FESSIONAL SERVICES/	LANDSCAPE SVCS 10/20		457.50	
	<u>100-5610-6520</u>		FESSIONAL SERVICES/	LANDSCAPE SVCS 10/20		457.50	
	100-5615-6520		FESSIONAL SERVICES/	LANDSCAPE SVCS 10/20		457.50	
	<u>100-5620-6520</u>		FESSIONAL SERVICES/	LANDSCAPE SVCS 10/20		457.50	
	<u>203-5600-6520</u>		FESSIONAL SERVICES/	LANDSCAPE SVCS 10/20		457.50	
	<u>204-5600-6520</u>		FESSIONAL SERVICES/	LANDSCAPE SVCS 10/20		457.50	
	<u>213-5600-6520</u>		FESSIONAL SERVICES/	LANDSCAPE SVCS 10/20		915.00	
	<u> 269-6303-6520</u>	PRO	FESSIONAL SERVICES/	LANDSCAPE SVCS 10/20	)	457,50	
36S2013-IN	Invoice	11/12/2020	LANDSCAPE SVCS	9/20	0.00	4,575.00	
	100-5400-6520	PRO	FESSIONAL SERVICES/	LANDSCAPE SVCS 9/20		457,50	
	100-5600-6520	PRO	FESSIONAL SERVICES/	LANDSCAPE SVCS 9/20		457.50	
	100-5610-6520		FESSIONAL SERVICES/	LANDSCAPE SVCS 9/20		457.50	
	100-5615-6520		FESSIONAL SERVICES/	LANDSCAPE SVCS 9/20		457.50	
	100-5620-6520		FESSIONAL SERVICES/	LANDSCAPE SVCS 9/20		457.50	
	203-5600-6520		FESSIONAL SERVICES/	LANDSCAPE SVCS 9/20		457.50	
	204-5600-6520		FESSIONAL SERVICES/	LANDSCAPE SVCS 9/20		457.50	
	213-5600-6520		FESSIONAL SERVICES/	LANDSCAPE SVCS 9/20		915,00	
	269-6303-6520		FESSIONAL SERVICES/	LANDSCAPE SVCS 9/20		457.50	
			•	·			
	**Void**		11/13/2020	Regular	C	0.00	55198
TCM01	TCM INVESTMENTS LP		11/13/2020	Regular			55199
Payable #	Payable Type	Post Date	Payable Description	-	Discount Amount	Payable Amount	
·	Account Number	Acc	ount Name	Item Description		on Amount	
155142	Invoice	11/12/2020	FLDNG MCHN SVC	•	0.00	615.52	
***************************************	400-5300-6541		SE CONTRACTS	FLDNG MCHN SVCS 11/		246.20	
	401-5300-6541		SE CONTRACTORS	FLDNG MCHN SVCS 11/		246.20	
	402-5300-6542	CON	ITRACT SERVICES	FLDNG MCHN SVCS 11/		123.12	
	AND PROPERTY OF THE PROPERTY O			·			
SO 01	THE GAS CO.		11/13/2020	Regular	(	0.00 303.39	55200
Payable #	Payable Type	Post Date	Payable Description	-	Discount Amount		0000
	Account Number		ount Name	Item Description		on Amount	
60374-10-20	Invoice	11/12/2020	PA SVCS 10/20		0.00	46.55	
	269-6303-6513	GAS		PA SVCS 10/20	0,00	46.55	
	Western Street, and the street			17.0700 10,10			
<u>64009-10-20</u>	Invoice	11/12/2020	PD SVCS 10/20		0.00	41.97	
	<u>100-5400-6513</u>	GAS		PD SVCS 10/20		41.97	
<u>69006-10-20</u>	Invoice	11/12/2020	CH CC SVCS 10/20	)	0.00	145.08	
	100-5617-6513	GAS		CH CC \$VCS 10/20		145.08	
70525-10-20	Invoice	11/12/2020	SC SVCS 10/20		0.00	17.00	
A MARKET BAN COM	100-5615-6513	GAS	•	SC SVCS 10/20	0.00	17.00	
				40 0 0 40 ±0/ ±0			
<u>73229-10-20</u>	Invoice	11/12/2020	TC SVCS 10/20		0.00	22.72	
	<u>100-5620-6513</u>	GAS	i	TC SVCS 10/20		22,72	
<u>73791-10-20</u>	Invoice	11/12/2020	CC2 SVCS 10/20		0.00	10,75	
	<u>100-5620-6513</u>	GAS	}	CC2 SVCS 10/20		10.75	
	-		_				

73985-10-20

Invoice

11/12/2020

CC1 SVCS 10/20

0.00

Check I	Report
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Vendor Number Discount Amount Payment Amount Number **Vendor Name Payment Date Payment Type** GAS 100-5620-6513 CC1 SVCS 10/20 19.32 PERO1 CALPERS 11/03/2020 Bank Draft 0.00 1.5,870.37 DFT0000452 Payable # Payable Type **Post Date** Discount Amount Payable Description Payable Amount **Account Number Account Name** Item Description **Distribution Amount** 10/10-10/23 10/30/2020 PERS CONTRIBUTIONS Invoice 0.00 15.870.37 100-22104 PERS PAYABLE PERS CONTRIBUTIONS 7,117.70 100-5200-5010 PERS-PENSION PERS CONTRIBUTIONS 150.93 100-5400-5010 PERS-PENSION PERS CONTRIBUTIONS 3.210.83 PERS-PENSION 100-5610-5010 PERS CONTRIBUTIONS 41.71 100-5610-5010 PERS-PENSION PERS CONTRIBUTIONS 101,41 100-5617-5010 PERS-PENSION PERS CONTRIBUTIONS 100.55 PERS-PENSION 100-5620-5010 PERS CONTRIBUTIONS 100.54 102-5400-5010 PERS-PENSION PERS CONTRIBUTIONS 755.92 160-5400-5010 PERS-PENSION PERS CONTRIBUTIONS 548.71 PERS-PENSION 203-5600-5010 PERS CONTRIBUTIONS 126.68 206-5600-5010 PERS-PENSION PERS CONTRIBUTIONS 126.68 213-5600-5010 PERS-PENSION PERS CONTRIBUTIONS 96.34 269-6303-5010 PERS-PENSION PERS CONTRIBUTIONS 1,124.45 PERS PENSION PERS CONTRIBUTIONS 400-5200-5010 150.93 400-5300-5010 PERS PENSION PERS CONTRIBUTIONS 412,46 400-5600-5010 PERS PENSION PERS CONTRIBUTIONS 540.11 PERS PENSION PERS CONTRIBUTIONS 401-5200-5010 87.66 401-5300-5010 PERS PENSION PERS CONTRIBUTIONS 412.46 401-5600-5010 PERS PENSION PERS CONTRIBUTIONS 458.07 PERS PENSION 402-5300-5010 PERS CONTRIBUTIONS 206.23 PERO1 **CALPERS** 11/06/2020 Bank Draft 0.00 4,705.97 DFT0000454 Payable # Payable Type **Post Date Payable Description** Discount Amount Payable Amount **Account Number Account Name Distribution Amount** Item Description 16224183 Invoice 11/04/2020 **UA SAFETY LIABILITY 11-20** 0.00 4,705,97 100-5400-5010 PERS-PENSION **UA SAFETY LIABILITY 11-20** 3,764.78 160-5400-5010 PERS-PENSION **UA SAFETY LIABILITY 11-20** 941.19 11/06/2020 PERO1 **CALPERS** Bank Draft 0.00 370.76 DFT0000455 **Post Date** Payable # Payable Type Payable Description Discount Amount Payable Amount **Account Number Account Name Item Description Distribution Amount** 16224191 Invoice 11/04/2020 **UA SAFETY PEPRA 11-20** 0.00 370.76 100-5400-5010 PERS-PENSION **UA SAFETY PEPRA 11-20** 370.76 PER01 **CALPERS** 11/06/2020 Bank Draft 0.00 460.65 DFT0000456 Payable # Payable Type Post Date **Payable Description** Discount Amount Payable Amount **Account Number Account Name Item Description Distribution Amount** 16224198 Invoice 11/04/2020 **UA MISC. 11-20** 0.00 460.65 PERS-PENSION 269-6303-5010 **UA MISC. 11-20** 153.55 400-5300-5010 PERS PENSION **UA MISC. 11-20** 153.55 400-5600-5010 PERS PENSION **UA MISC. 11-20** 153.55 PERO1 **CALPERS** 11/13/2020 **Bank Draft** 0.00 16,593.77 DFT0000457

Date Range: 11/01/2020 - 11/13/2020

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**Vendor Number** Payable #

Vendor Name Payment Date Payment Type Date Range: 11/01/2020 - 11/13/2020

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Discount Amo	unt	Payment Amount	Number
Discount Amount	Paya	able Amount	
Distributi	on Ai	mount	

10/24/-11/06

Veridor (Varine		i dyment bate	r ayment rype	Discount Anno	wiit rayinciit Mil
Payable Type	Post Date	Payable Descriptio	n	Discount Amount	Payable Amount
Account Number	Accoun	t Name	Item Description	Distributi	on Amount
Invoice	11/12/2020	PERS CONSTRIBUTI	ONS	0,00	16,593.77
100-22104	PERS PA	AYABLE	EMPLOYEES'		7,455.88
100-5200-5010	PERS-P	ENSION	PERS CONSTRIBUTIONS		149.12
100-5400-5010	PERS-P	ENSION	PERS CONSTRIBUTIONS		3,503.78
<u>100-5610-5010</u>	PERS-P	ENSION	PERS CONSTRIBUTIONS		40.15
<u>100-5610-5010</u>	PERS-P	ENSION	PERS CONSTRIBUTIONS		101.37
<u>100-5617-5010</u>	PERS-P	ENSION	PERS CONSTRIBUTIONS		100.59
<u>100-5620-5010</u>	PERS-P	ENSION	PERS CONSTRIBUTIONS		100.59
<u>102-5400-5010</u>	PERS-P	ENSION	PERS CONSTRIBUTIONS		755.92
<u>160-5400-5010</u>	PERS-P	ENSION	PERS CONSTRIBUTIONS		548.71
203-5600-5010	PERS-P	ENSION	PERS CONSTRIBUTIONS		127.60
<u>206-5600-5010</u>	PERS-P	ENSION	PERS CONSTRIBUTIONS		127.60
<u>213-5600-5010</u>	PERS-P	ENSION	PERS CONSTRIBUTIONS		97.30
<u>269-6303-5010</u>	PERS-P	ENSION	PERS CONSTRIBUTIONS		1,212,25
<u>400-5200-5010</u>	PERS PI	ENSION	PERS CONSTRIBUTIONS		149.12
400-5300-5010	PERS PI	ENSION	PERS CONSTRIBUTIONS	ı	412.92
400-5600-5010	PERS PI	ENSION	PERS CONSTRIBUTIONS	ı	542.93
401-5200-5010	PERS P	ENSION	PERS CONSTRIBUTIONS	i	87.66
401-5300-5010	PERS P	ENSION	PERS CONSTRIBUTIONS	i	412.92
<u>401-5600-5010</u>	PERS P	ENSION	PERS CONSTRIBUTIONS	i	460.91
402-5300-5010	PERS P	ENSION	PERS CONSTRIBUTIONS	i	206.45

#### Bank Code APBNK Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	138	70	0.00	213,845.79
Manual Checks	0	0	0.00	0.00
Voided Checks	0	4	0.00	-948.72
Bank Drafts	5	5	0.00	38,001.52
EFT's	0	0	0.00	0.00
	143	79	0.00	250,898.59

Check Report

Date Range: 11/01/2020 - 11/13/2020

## **All Bank Codes Check Summary**

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	138	70	0.00	213,845.79
Manual Checks	0	0	0.00	0.00
Volded Checks	0	4	0.00	-948.72
Bank Drafts	5	5	0.00	38,001.52
EFT's	0	0	0.00	0.00
	143	79	0.00	250,898.59

## **Fund Summary**

Fund	Name	Period	Amount
999	POOL FUND	11/2020	250,898.59
			250.898.59



# MINUTES CITY COUNCIL OF PARLIER REGULAR MEETING Thursday November 5, 2020

#### PUBLIC ACCESS TELEPHONE # (605) 313-5407 ACCESS # 263283

#### CALL TO ORDER/WELCOME:

The Regular Council Meeting of the City of Parlier was held in the Council chambers located on 1100 E. Parlier Avenue, Parlier, California 93648. Mayor Alma Beltran called the meeting to order at 6:30 P.M.

#### **ROLL CALL:**

Council Present: Mayor Alma M. Beltran, Mayor Pro-Tem Trinidad Pimentel, Councilwoman Diane Maldonado and City Clerk Dorothy Garza. Absent: Councilman Noe Rodriguez. Staff Present: Police Chief Jose Garza, City Attorney Neal Constanzo, City Administrator Sonia Hall, and Assistant City Administrator/Deputy City Clerk Bertha Augustine

FLAG SALUTE: Mayor Alma M.Beltran

ADDITIONS/DELETIONS: None.

#### PRESENTATIONS/INFORMATIONAL:

Jose Garza, Chief of Police – Community Outreach

Chief Garza informed everyone that the Trunk or Treat event turned out very well. He thanked Rotary Club, Car Club, Lions Club, Auto Parts Store and The Leos Club for helping out with Donations of candy. He personally thanked Councilmember Maldonado and Mayor Pro Tem Pimentel for volunteering to help out.

#### Sonia Hall, City Administrator – Rate Study

On September 16 2014, Governor Jerry Brown signed into law a three-bill legislative package known as the Sustainable Groundwater Management Act (SGMA). Under SGMA, Groundwater Sustainability Agencies are charged with the management and use of groundwater in that can be maintained without causing undesirable result meaning we must replace the water used through groundwater recharge. In order to demonstrate how sustainability will be achieved,

SGMA requires GSAs to develop and adopt a Groundwater Sustainability Plans (GSPs). The GSP is the guiding document to implement solutions over a 20-year period to achieve sustainability. The City needs to reach sustainability by the year of 2040. The City needs to conduct a study. The Council gave their consensus to move forward.

Eva Beltran, Granted Solutions – City Drive Thru Toy Giveaway

Announced next Thursday there will be a meeting to brainstorm for the coming events.

If interested Call Eva at 646-3545 ext 242. Mayor and staff invite parents to register kids 0 – 12 to register for toy giveaway. City will be mailing information in the water bill. Signups by 12/10/20. Verifications of residency will be needed, bring to water bill department.

#### **PUBLIC COMMENT:**

At this time any citizen may address the City Council on matters not appearing on the agenda that are within the jurisdiction of the City of Parlier. Speakers shall limit their comments to three (3) minutes unless extended by the Mayor. Please begin your comments by stating your name and City of residence.

The City Council is prohibited by law from taking any action on matters discussed that are not on the agenda. No adverse conclusion should be drawn if the City Council does not respond to any particular public comment. The Council may refer the matter to the City Manager or staff or request that it be placed on a future agenda.

#### **PUBLIC COMMENTS BY:**

**Kathy Solorio** wants it to be known that she is happy the Grand Jury found no wrong doing and now the City can move forward.

**Humberto Gomez Jr.**, Representative of the Democratic Party, commented that the Grand Jury found that the City Council did not do their duties.

#### **CONSENT CALENDAR:**

All Consent Calendar items are considered routine and will be enacted in one motion. There will be no separate discussion of items appearing on the Consent Calendar unless requested to be removed for separate discussion and acted on by separate vote.

#### City Council:

- Approved the Check Reports dated October 10, 2020 to October 30, 2020.
- 2. Approved the Minutes dated October 15 and October 22, 2020.
- 3. Adopted Resolution No. 62-2020 Approving Application for Statewide Park Development and community Revitalization Program Grant Funds.
- **4.** Adopted **Resolution No.63-202 0** Authorizing the submittal of a funding application to the Fresno Council of Governments for the Active Transportation Program Grant.
- 5. Adopted Resolution No. 64-220 Final Acceptance of the Active Transportation Program (ATP) Pedestrian and Bike Path Improvements along the North side of Manning Avenue between the Stor-Max facility to Madsen avenue for Active Transportation Program (ATP) State Project No. ATPL-5252(024).
- **6.** Adopted **Resolution No. 65-2020** Final Acceptance for the Street Improvements in Zediker Avenue between Fresno Street and Merced Street for Federal Project No. STPL-5252(027).

 Adopted Resolution No. 66-2020 Final Acceptance for the Alley Improvements between Merced and Tuolumne Street from "K" Street to Zediker Avenue for Federal Project No. CML-5252(025).

M/S/C: Motion to approve Consent Calendar items as presented, by Mayor Pro-temp Pimentel, 3-1 absent and carried.

#### **REGULAR BUSINESS:**

\*Note: Item 8 has been tabled until next meeting 11/19/20 for clarification.

**8. SUBJECT:** Central Valley Communities that Cure Violence Operational Agreement between the City of Parlier all CBO partners for the 2020 CalVIP Grant.

**RECOMMENDATION:** That City Council authorize the City Manager to sign the Operational Agreement with Cornerstone Community Care to provide the services for the Board of State and Community Corrections (BSCC) grant, (9/20 – 9/23) California Violence Intervention and Prevention (CalVIP); a project to reduce all types of violence through direct intervention, prevention, and community engagement.

M/S/C: Motion to table item 8 for the next meeting November 19, 2020 by Maldonado, 2<sup>nd</sup> by Pimentel, 3-1 absent and carried.

#### PUBLIC COMMENT ON CLOSED SESSION None.

THIS PORTION OF THE MEETING IS RESERVED FOR PERSONS DESIRING TO ADDRESS THE COUNCIL ON AN ITEM WHICH IS TO BE CONSIDERED DURING CLOSED SESSION. SPEAKERS SHALL LIMIT THEIR COMMENTS TO THREE (3) MINUTES.

#### CLOSED SESSION: (7:46 P.M. to 9:38 P.M.)

- **9.** Public Employment Pursuant to Government Code Section 54957 All Positions and Departments.
- Potential Litigation Pursuant to Government Code Section 54957
   One (1) Case
- **11.** Pending Litigation Pursuant to Government Code Section 54957 Fresno Co. Fire Protection District v. City of Parlier.

#### **CLOSED SESSION ANNOUNCEMENT:**

Council approved the following by 3 votes and 1 absent:
Add Grant Administrator Coordinator position.
Appoint City Administrator, Sonia Hall, as City Manager
Appoint Assistant City Administrator, Bertha Augustine, as Assistant City Manager

#### BRIEF COMMENTS: COUNCIL COMMUNICATIONS/COMMENTS:

CITY A	DN	ΛIN	IISTR.	ATOR	<ul> <li>None.</li> </ul>
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CITY ATTORNEY- None.

CITY COUNCIL- None.

#### **ADJOURNMENT**

Mayor Beltran adjourned the meeting at 9:38 P.M.

Dorothy Garza – City Clerk

Resolutions adopted: 62,63,64,65 & 66 -2020

Ordinances adopted: None. Next Ordinance 06-2020

#### ADA NOTICE

In compliance with the American with Disabilities Act, if you need special assistance to participate in this meeting, please contact the City Clerk at (559) 646-3545 ext. 227. Notification 48 hours prior to the meeting will enable the City to make arrangements to ensure accessibility to this meeting.

#### **DOCUMENTS**

Any writings or documents provided to a majority of the City Council regarding any item on this agenda will be made available for public inspection at the front counter at City Hall located at 1100 East Parlier Avenue, Parlier, CA during normal business hours. In addition, most documents are posted on the City's website at <a href="http://parlier.ca.us">http://parlier.ca.us</a>.



AGENDA ITEM:

MEETING DATE: 11/19/2020

DEPARTMENT: FINANCE DEPT.

DEPARTMENT:

# REPORT TO CITY COUNCIL

#### SUBJECT:

Consideration and approval for CEN-CAL STARS softball to utilize Veterans Memorial Park for their annual season.

#### RECOMMENDATION:

Staff recommends council to authorize waiving all fees and key issuance for light and the restrooms use of Veterans Memorial Park.

The park will be utilized on the following schedule: Softball- Monday, Wednesday, & Friday games will vary 6:30pm – 8:30pm

#### **BACKGROUND:**

CEN-CAL STARS is a nonprofit organization team, members guarantee equal playing time regardless of ability. The season is approaching where children and adults enjoy either tee-ball, baseball, or softball.

Prepared By:	Approved By
repared by.	Approved by

ANGIE VALENCIA

### Recreation & Community Services Department

1100 E. Parlier Avenue, Parlier Ca 93648

559-646-3545 X: 235



Applicant:	CEN-CAL STARS
Date Requested:	11/1/2020
Type of Event:	SOFTBALL PRACTICE/ GAMES
Address:	871 STANISLAUS ST PARLIER CA 93648
Phone Number:	559-643-6736

#### Park Requested:

- o Richard Flores
- o Earl Ruth Park
- Veteran's Memorial Park
- o Heritage Park

CONSUMPTION OR POSSESSION OF ALCOHOLIC BEVERAGES IS PROHIBITED PER CITY ORDINANCE #84-06, SECTION 12.08.040

	FEE	HOURS	TOTAL
Deposit Fee	\$35.00	bygreifers justick de Lanced, in her legislage the fields and on one on pypoges.  Al 1664 [1]—the should a mean analysis and physical and the same pyton by	\$35.00
(100.23101)			
Hourly Fee (100,45200)	\$35.00		
Electricity Fee (100.45200)	\$25.00		

Insurance: Provide copy of your homeowner/flability insurance for \$1,000,000.00 insuring the City Of Parlier for your event or anyother insurance agency releasing all liability to the City Of Parlier.

Policy#	
List any type of entertainment that will be	SOFTBALL GAMES
provided:	

#### Payments:

DATE	AMOUNT	RECEIVED BY:
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NOTE: VEHICLES ON GRASS AREA/SIDEWALK WILL BE TOWED.

APPLICANT: LAURA QUIROZ	DATE: 11/12/2020
FINANCE:	DATE:





AGENDA ITEM:

4

MEETING DATE:

11/19/2020

DEPARTMENT:

FINANCE DEPT.

# REPORT TO CITY COUNCIL

#### SUBJECT:

Consideration and approval for PREMIER GIRLS FASTPITCH softball to utilize Richard Flores or Veteran's Memorial Park which ever one is available for their annual season.

#### RECOMMENDATION:

Staff recommends council authorize waiving all fees and key issuance for lights and the restrooms use of Richard Flores or Veteran's Memorial Park.

The park will be utilized on the following schedule: Softball practice- Monday through Friday from 5:00pm-8:00pm. Games will vary.

#### BACKGROUND:

Premier Girls Fastpitch is a nonprofit organization team, members guarantee equal playing time regardless of ability. The season is approaching where children and adults enjoy either tee-ball, baseball, or softball. Premier Girls softball league's main purpose is to provide a recreational, fun, and competitive softball games during the season while keeping them active and learning at a safe distance. Premier Girls would appreciate the City's consideration in partnering with them.

Prepared By:

Approved By:

ANGIE VALENCIA

#### Recreation & Community Services Department

1100 E. Parlier Avenue, Parlier Ca 93648

559-646-3545 X: 235



Applicant:	Randy & Roser Flores
Date Requested:	119 2020
Type of Event:	Softball Practice
Address:	1080 FIG Ave Partrer, CA 93648
Phone Number:	(555) 356-4547

#### Park Requested:

- → Richard Flores M F 5:00 8:00
- o Earl Ruth Park
- & Veteran's Memorial Park ony ou alobe: 5:00pm 8:00pm.
- o Heritage Park

CONSUMPTION OR POSSESSION OF ALCOHOLIC BEVERAGES IS PROHIBITED PER CITY ORDINANCE #84-06, SECTION 12.08.040

	FEE	HOURS	TOTAL
Deposit Fee (100.23101)	\$35.00	THE PART THE REAL PROPERTY OF THE PART OF	\$35.00
Hourly Fee	\$35.00		
(100.45200) Electricity Fee	\$25.00		
(100.45200)	V		

Insurance: Provide copy of your homeowner/liability insurance for \$1,000,000.00 insuring the City Of Parlier for your event or anyother insurance agency releasing all liability to the City Of Parlier.

Policy#	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
List any type of entertainment that will be	A TO SHARE THE PARTY OF THE PAR
provided:	
	***************************************

#### Payments:

DATE	AMOUNT	RECEIVED BY:
		THE RESIDENCE OF THE PROPERTY
		AND THE PROPERTY OF THE PROPER
	CANCELLE CONTROL OF THE CONTROL OF T	- Marienter Water 19, Anni Saper and Marienter School Scho
NOTE: VEHICLES ON GRASS	AREA/SIDEWALK WILL BE TO	WED.

APPLICANTI DATE: MOVEMBER Q 2020
FINANCE: Cingelia Valencia DATE: 1110/20

#### $ACORD_{\scriptscriptstyle \mathrm{IM}}$

#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08-31-2020

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(les) must 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). CONTACT NAME: PRODUCER **Gary Newborn** PHONE (AIC, No. Exi): E-WAIL ADDRESS: PRODUCER K&K Insurance Group, Inc. FAX {A/C, No): 800-821-6802 908-788-9371 1712 Magnavox Way gary@newborninsurance.com P.O. Box 2338 Fort Wayne, IN 46801 CUSTOMER ID #: INSURER(S) AFFORDING COVERAGE NAIC# INSURER A: Scottsdale indemnity Insurance Premier Girls Fastpitch, Inc. Enrolled Member Teams or Umpires INSURER B Nationwide Life Insurance Co. INSURER C: Cen Cal DirtDogs Baltlerra 14U, Western 14U (eric baltlerra) INSURER D 834 Garland Ave Clovis, CA 93612 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.

NOR!

TYPE OF INSURANCE

ADDI. BUBR.

WWD POLICY NUMBER

POLICY EFF POLICY EXP
(MWDD.YYYY) (MWDD.YYYY)

LIMITS LTR GENERAL LIABILITY EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (En occumence) COMMERCIAL GENERAL LIABILITY \$300,000 CLAIMS-MADE X OCCUR MED EXP (Any one person) \$5,000 09/01/2021 09/01/2020 12:01 AM KRI 0000008526100 PERSONAL & ADV INJURY \$2,000,000 12:01 AM GENERAL AGGREGATE \$5,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCT'S-COMP/OP AGG \$2,000,000 POLICY PROJECT PARTICIPANT LEGAL LIABILITY \$2,000,000 COMBINED SINGLE LIMIT (Ea Accident) AUTOMOBILE LIABILITY ANY AUTO BODILY INJURY (Per person) ALL OWNED AUTOS BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS UMBRELLA LIAB OCCUR EACH OCCURRENCE EXCESS LIAB CLAIMS-MADE AGGREGATE DEDUCTIBLE RETENTION WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETORSHIP/PARTNER/ EXECUTIVE OFFICER/MEMBER EXCLUDED? WC STATU-TORY LIMITS OTHER Y/N E.L. EACH ACCIDENT N/A EXCLUDEON (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - FA EMPLOYEE E.L. DISEASE -- POLICY LIMIT PARTICIPANT ACCIDENT EXCESS MEDICAL LIMIT DEDUCTIBLE: 09/01/2021 12:01 AM \$100,000 BAX 0000031451100 \$2500 DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Allech ACORD 161, Additional Remarks Schedule, if more space is required) COVERAGE IS EFFECTIVE AS OF DATE OF CERTIFICATE. SEXUAL ABUSE/MOLESTATION: \$1,000,000 PER OCCURRENCE/\$2,000,000 AGGREGATE **CERTIFICATE HOLDER** CANCELLATION

**Evidence of Coverage** 

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

AGENDA	ITEM:	

MEETING DATE: <u>November</u> 19, 2020

DEPARTMENT: Administration

#### REPORT TO THE CITY COUNCIL

#### **SUBJECT:**

Public Hearing, Second Reading and Adoption of Ordinance Amending Chapter 18.55, the Cannabis Control Ordinance, of the Parlier Municipal Code.

#### **RECOMMENDATION:**

Conduct Public Hearing, Waive Second Reading and Adopt Ordinance Amending Chapter 18.55, the Cannabis Control Ordinance, of the City of Parlier Municipal Code.

#### **DISCUSSION:**

Council is considering allowing, consistent with the Cannabis Control Ordinance, an expansion of the limited authorization for operation of a commercial cannabis manufacturing and delivery service. That service is being conducted by Greenbrier pursuant to an agreement with the City. Greenbrier has expressed interest in establishing a single dispensary and the Council is considering changing the Ordinance to allow for that to occur.

The proposed ordinance, as recited it in the Ordinance itself modifies limited provisions of the Cannabis Control Ordinance, Title 18.55 to allow for the single cannabis dispensary if allowed by regulatory permit and site plan review of the premises where the dispensary will be operated. The changes to the Ordinance are in bold and appear at Section 18.55.050(B) at the last sentence of Section 18.55.060 and to items 4 and 10 of subdivision B of Section 18.55.070.

#### **RECOMMENDATION:**

Conduct Public Hearing, Waive Second Reading and Adopt Ordinance Amending Chapter 18.55, the Cannabis Control Ordinance, of the City of Parlier Municipal Code.

Prepared by:	
Neal E. Costanzo, City Attorney	

#### CITY MANAGER EMPLOYMENT AGREEMENT

This Employment Agreement ("Agreement") is entered into as of November 5, 2020, between the City of Parlier ("City") and Sonia Hall ("Employee"). In consideration of the mutual promises and agreements set forth below, City and Employee agree as follows:

- 1. <u>Employment</u>. City agrees to employ Employee to render services as City Manager of City on the terms and conditions set forth in this Agreement and Employee accepts such employment on the terms and conditions set forth in this Agreement.
- 2. <u>Term</u>. The term of Employee's employment shall be three (3) years, commencing on November 5, 2020 and ending on the earliest of:
  - A. November 5, 2023, or
  - B. The date of termination of Employee's employment in accordance with paragraph 4 below.
- 3. <u>Position and Duties</u>. Employee shall serve as City Manager. Employee shall have those powers and duties set forth in City's Municipal Code. The City Council of the City ("City Council") shall have the power to determine such other specific duties and responsibilities which Employee must perform, and the means and manner by which Employee must perform those duties and responsibilities. Employee agrees to devote all of her business time, skill, attention, and best efforts to the discharge of the duties and responsibilities assigned to him by the City Council during the term of his employment.
- 4. At-Will Employment Status, Exemption From Personnel System, and Termination. Employee's employment is at-will. Thus, Employee's employment is at the mutual consent of Employee and City and either Employee or City may terminate the Employee at-will. City may terminate Employee at any time, with or without good cause, for any reason whatsoever that does not violate a public policy of the State of California. Termination shall be by at least three (3) affirmative votes of the City Council. Employee may terminate his employment at any time, with or without good cause, for any reason whatsoever, subject to the notice requirement set forth in paragraph 8 below and the Severance Payment of paragraph 9. Employee is exempt from City's Personnel System and holds no property right in her employment.

Employee agrees that no representative of City has made or can make any promises, statements, or representations which state or imply that Employee is hired or retained under any terms other than at-will and with exemption from City's Personnel System, as set forth above. Employee agrees that no agreement can impliedly arise that Employee is employed under any terms other than at-will and with exemption from City's Personnel System, as set forth above.

Employee's status as at-will and exempt from City's Personnel System may only be changed, revoked, amended, or superseded by a written document, signed by Employee and the Mayor following approval by the City Council.

- 5. <u>Compensation and Benefits</u>. Employee shall receive the following compensation:
- A. <u>Salary/Hourly Rate</u>. Employee will receive an annual salary of Range 82; Step4 \$129,920.89.
- B. <u>Benefits</u>. In addition to the salary provided in paragraph 5.A. hereinabove, Employee shall receive the following:
  - 1. Employee shall accrue vacation leave at the rate of fifteen (15) days each year. The amounts of vacation accrued prior to the effective date of this agreement are vested rights to payment or use of such leave in accordance with existing policies of the City applicable to the Employees generally.
  - 2. Employee shall accrue sick leave at the rate of twelve (12) days each year. Employee shall accrue five days each year as administrative leave. The amounts accrued prior to execution of this agreement are vested rights to use such accrued leaves in accordance with existing policies of City applicable to employees generally.
  - 3. Fully paid health, vision and dental benefits for herself and her legal dependents.
  - 4. Use of a City owned vehicle for business use reasonable and consistent with the Employee's duties. Employee may also use her personal vehicle but shall not receive any milage or expense for the use of her personal vehicle.
  - 5. Reimbursement for out of pocket expenditures made by the City Manager on behalf of the City.
- 6. <u>Performance Review</u>. City agrees to review Employee's compensation and/or other benefits of Employee in such amounts and to such extent as the City Council may determine that it is desirable to do so on the basis of six-month performance evaluations.

There will be an annual review and evaluation conducted in accordance with specific criteria developed jointly by the City Council and Employee. Such criteria may be revised by additions and/or deletions as the City Council may from time to time

determine in consultation with Employee. The City Council's determination of criteria after such consultation is in City Council's sole determination and is final.

- 7. Renewal of Agreement. City is under no obligation to renew this Agreement upon completion of the Agreement's term, and City may decide to do so solely at the discretion of the City Council. The City will notify the City Manager of its intent to either offer renewal or not to renew this Agreement, in writing, sixty (60) days in advance of the term of this Agreement. The City may offer an extension of this Agreement at any time prior to the expiration of this Agreement.
- 8. <u>Notice of Termination</u>. City need not provide Employee with any prior notice of its decision to terminate this Agreement other than as provided in paragraph 7 hereof. Due to the important nature of the City Manager's duties to City, if Employee terminates this Agreement, Employee must provide the City Council with thirty (30) days written notice prior to the date she ceases to perform her duties and responsibilities under this Agreement.
- 9. <u>Severance Payment</u>. This Severance Payment provision in no way changes or modifies Employee's status as at-will.

If City terminates this Agreement on or prior to November 4, 2023, for any reason unless termination is for Employee's misconduct as defined herein, City shall pay Employee a severance payment of the equivalent of six (6) months of Employee's then current salary, with applicable payroll taxes withheld together with all accrued and unused vacation time. Non-renewal under paragraph 7 hereof does not constitute a severance under this paragraph 9. Whether or not the City is required to pay a severance payment to Employee on termination of Employee, Employee shall be paid for all accrued and unused vacation to date of termination then payable under the terms of this Agreement.

City may terminate this Agreement at any time due to Employee's misconduct. Misconduct means Employee's dishonesty, fraud, self-dealing, or willful misconduct as that term is defined for purposes of unemployment insurance, committed in the performance of Employee's duties and responsibilities under this Agreement; or Employee's violation of any law which can be punished as a felony committed at any time. The determination of whether Employee was terminated due to misconduct is in City's sole discretion. If City terminates this agreement for Employee's misconduct, City shall have no obligation to pay the severance payment described in this paragraph.

10. <u>Reimbursement</u>. City shall reimburse Employee according to standard City practices, and any City Council prior-approved activities in addition thereto, for all actual and necessary expenses she incurs in the performance of her official duties as City Manager, including those incurred when traveling on business pertaining to City.

- 11. <u>Non-Assignment</u>. Employee's duties and obligations under this Agreement are personal and not assignable.
- 12. <u>Arbitration</u>. Any and all controversies or claims arising out of or relating to Employee's employment with City or the termination of Employee's employment with City shall be settled by binding arbitration in accordance with the Rules of the American Arbitration Association and judgment on the award rendered by the Arbitrator may be entered in any court having jurisdiction thereof.
- 13. <u>Entire Agreement</u>. This Agreement contains the entire agreement and understanding between the parties and contains all of the terms and conditions of the parties' agreement. This Agreement is the complete and final expression of the parties' agreement and supersedes all prior or contemporaneous oral or written negotiations, discussions, representations, or agreements, if any. Employee acknowledges that he has not relied on any promises, statements, representations, or warranties except as set forth expressly in this document.

This Agreement, and any and all terms and conditions contained herein, may only be changed, revoked, amended, or superseded by a written document signed by both Employee and the Mayor following approval of the City Council.

- 14. <u>Governing Law</u>. This Agreement will be governed by and construed in accordance with the laws of the State of California.
- 15. <u>No Waiver</u>. No party's failure to enforce any provision or provisions of this Agreement will be construed in any way as a waiver of any such provision or provisions, or prevent that party thereafter from enforcing each and every provision of this Agreement.
- 16. <u>Partial Invalidity</u>. The invalidity or unenforceability of any provision or portion of this Agreement will not affect the validity or enforceability of the other provisions or portions of this Agreement.
- 17. <u>Interpretation</u>. No interpretation or construction of any provision or provisions of this Agreement will be influenced by the identity of the party drafting the Agreement.
- 18. <u>Headings</u>. Paragraph headings used in this Agreement are for convenience only and shall not be considered part of the terms of the Agreement.

[REMAINDER OF PAGE INTENTIONALLY LEFT BLANK]

## 5 IN WITNESS WHEREOF, the parties have executed this Agreement.

### CITY OF PARLIER

	By:
	Mayor, Alma Beltran
ATTEST:	
Dorothy Garza, City Clerk	
APPROVED AS TO FORM:	
Neal E. Costanzo, City Attorney	
	EMPLOYEE:
	Sonia Hall



AGENDA ITEM:

MEETING DATE: 11/16/2020

DEPARTMENT:

Administration Dept.

### REPORT TO CITY COUNCIL

SUBJECT: Communities that Cure Violence Operational Agreement between the City of Parlier all CBO partners for the 2020 CalVIP grant

#### **RECOMMENDATION:**

That City Council authorize the City Administrator to sign the Operational Agreement with CBO Partners to provide the services for the Board of State and Community Corrections (BSCC) grant, California Violence Intervention and Prevention (CalVIP); a project to reduce all types of violence through direct intervention, prevention, and community engagement;

#### BACKGROUND

The City of Parlier was awarded a CalVIP grant for \$600,000 over a 36-month period beginning Sept 1, 2020 and ending August 31, 2023. The CalVIP grant is designed to fund coordinated, collaborative strategies that are proven to be most effective at reducing violence and that focus on better outcomes in the criminal justice system and for those involved in it.

The grant funds are being used in a collaborative partnership between Parlier Police Department; Current Church Hope Coalition (CCHC) who provides mentoring (3 mentors) at Parlier High School and Jr. High; Breaking the Chains, who address Human Trafficking; Centro La Familia, who address DV, and help victims apply for the U-Visa; Police Department Clergy Council through CCHC to manage video policing; and Comprehensive Behavioral Services for Intervention services, for the aggressor/batterer, operated by Susan Bechara and managed through CCHC.

#### CITY PROPOSAL:

The City of Parlier will implement the Communities That Cure Violence (CTCV) project, which takes a data-driven comprehensive public health approach to collaboratively and holistically

reduce rising violence and criminal activity. The project addresses all violence with a focus on domestic violence, rape, human trafficking, gang violence, and prevention in the schools. The CTCV is being modeled after the former project Communities That Care, in which the community plays a role beyond the traditional role played by police and courts. CalVIP funding will give Parlier the opportunity to implement evidence-based primary prevention strategies to change communities, families and youth. These strategies include focusing on safe dating, life skills curriculum, positive behavioral interventions and support, a sexual assault response team, DV support for immigrants, Intervention counseling for the aggressor, and CC-Hope Coalition, who will provide 24-hour domestic violence and rape support/care in addition to Peace Keepers for gang related violence.

Approved By:

Sonia Hall

City Administrator

### **Communities that Cure Violence**

#### **OPERATIONAL AGREEMENT**

This Operational Agreement stands as evidence that the City of Parlier and Centro La Familia intend to work together toward the mutual goal of providing maximum available assistance in the fight against violence. Both agencies believe that implementation of the Communities that Cure Violence Initiative, as described herein, will further this goal. Each agency agrees to participate in the program by coordinating/providing the following services:

The City of Parlier's project will closely coordinate the following services with **Centro La Familia** through:

- Victim Assistance Programs for non-citizens Domestic Violence, human trafficking, and other serious crimes.
- Implement Nueva Esperanza (New Hope) model.
- Operation of program using the best practices "Promotora" ("Cultural Broker") model that encourages and builds trust with victims of domestic violence.
- Services include trauma-informed crisis-intervention, assistance with temporary restraining orders, linkage to counseling services, and criminal justice support and advocacy.
- Sexual Assault Services Culturally Specific Program (SASP) that also operates with the best practices "Promotora" model that encourages and builds trust with Latina victims.
- Use promotoras to provide culturally appropriate services for an immigrant community.
- Provide training to the officers on the **EPIC program**.
- Support with the victims of violence U-Visa.
- Volunteers and support with community events that are sponsored by the
   Central Valley Communities that Cure Violence Initiative.
- Attend regularly scheduled meetings that will occur monthly between the
   Central Valley Communities that Cure Violence Initiative Coalition to

discuss strategies, timetables and implementation of mandated services.

- Effective Grant performance period dates are September 1, 2020 August 31, 2023.
- Amount designated to the agency is detailed in the budget on Attachment A.
- Provide support and documentation needed for the evaluation and quarterly performance reports.

We the undersigned, as authorized r	epresentatives of Parli	er and Centro La Familia do
hereby approve this document.		
Centro La Familia	 Date	
Sonia Hall, City Administrator City of Parlier	Date	

### **ATTACHMENT A**

Centro La Familia	Grant	Match
Counselors		
Counselors for services	\$40,520	
Training for Officers	\$10,000	
Travel Costs and Supplies	\$6240	
Volunteers for In-Kind		\$30,460
	Total Amount	Match
	\$56,760	\$30,460

### Communities that Cure Violence

#### **OPERATIONAL AGREEMENT**

This Operational Agreement stands as evidence that the City of Parlier and Current Church- Hope Coalition (CCHC) intend to work together toward the mutual goal of providing maximum available assistance in the fight against violence. Both agencies believe that implementation of the **Communities that Cure Violence** Initiative, as described herein, will further this goal. Each agency agrees to participate in the program by coordinating/providing the following services:

The City of Parlier's project will closely coordinate the following services with CCHC through:

- Outreach workers/Crisis Responders to provide violence intervention.
- Mentoring for Parlier Junior High and Parlier High School.
- Community engagement and awareness through block parties and other methods coordinated by the CCHC Project Director.
- Support the city with the Community Video Policing training the volunteers that will be monitoring the cameras.
- Provide Parlier Unified School District the initial costs to implement the PBIS program in addition to training and support.
- Domestic Violence (DV) Advocates assisting and supporting the victims of violence to include emergency lodging.
- Training for the DV Advocates and the police officers who respond to such cases.
- Intervention services through Comprehensive Behavioral Services operated by Susan Bechara. Referrals from the school, probation, and/or their case manager. (Services for the aggressor)
- Volunteers and support with community events that are sponsored by the
   Central Valley Communities that Cure Violence Initiative.
- Attend regularly scheduled meetings that will occur monthly between the
   Central Valley Communities that Cure Violence Initiative Coalition to
   discuss strategies, timetables and implementation of mandated services.

- Effective Grant performance period dates are September 1, 2020 August 31, 2023.
- Amount designated to the agency is detailed in the budget on Attachment A.
- Provide support and documentation needed for the evaluation and quarterly performance reports.

We the undersigned, as authorized representatives of Parlier and Hope Coalition do			
hereby approve this document.			
Michael DeJuarez	Date		
Hope Coalition through Current Church			
Sonia Hall, City Administrator	 Date		
City of Parlier	5410		

### **ATTACHMENT A**

Hope Coalition - Current Church	Grant	Match
PBIS		
Parlier Unified addition of Dating Curriculum to Human Trafficking Curriculum		
Teachers (in-kind) for delivering curriculum		\$30,000
Costs of PBIS/Dating/Human Trafficking curriculum	\$7500	
Teachers and staff implementing PBIS		\$10,000
Comprehensive Behavioral Services -Violence Intervention	·	
\$30 per session/\$50 per enrollment (30 enrollments)	\$1500	
20 sessions X \$30 per session X 30 participants	\$18,000	
Street Outreach/Advocates		
2 - Street Outreach Workers	\$12,000	\$68,500
Mentoring at Schools		
2 Mentors	\$52,520	\$18,130
Director and Training on EBP	\$35,110	
Event and Outreach Volunteers in-kind	:	\$93,413
	Total Amount	Match
	126,630	\$219,540

This Operational Agreement stands as evidence that the City of Parlier and **Breaking** the Chains intend to work together toward the mutual goal of providing maximum available assistance in the fight against violence. Both agencies believe that implementation of the **Communities that Cure Violence** Initiative, as described herein, will further this goal. Each agency agrees to participate in the program by coordinating/providing the following services:

The City of Parlier's project will closely coordinate the following services with **Breaking** the Chains through:

- Case Management services for victims of Human Trafficking
- Outreach and education on Human Trafficking, especially for at-risk youth.
- Trauma Informed Certified Counselor who will be located in Parlier at 580
   Tulare.
- Addiction Treatment Services and Life Skill Services for victims of Human Trafficking. (Through BTC Case Management)
- Job training, educational support, and legal advocacy provided for victims of Human Trafficking. (Through BTC Case Management)
- Provide a Safe House for victims of Human Trafficking.
- Train Officers on Trauma Informed Care and to recognize the signs of Human Trafficking.
- Attend regularly scheduled meetings that will occur monthly between the Central Valley Communities that Cure Violence Initiative Coalition to discuss strategies, timetables and implementation of mandated services.
- Effective Grant performance period dates are September 1, 2020 August 31, 2023.
- Amount designated to the agency is detailed in the budget on Attachment A.
- Provide support and documentation needed for the evaluation and quarterly performance reports.
- The Operational Agreement includes the ability to utilize the building at 580

Tulare as a place to conduct counseling, training, and services for victims of Human Trafficking. BTC will provide a safe space for Victims of Domestic Violence and rape and office for Centro La Familia to conduct victim counseling.

We the undersigned, as authorized do hereby approve this document	_	tatives of	Parlier a	nd Breaki	ng the Ch	ains
Debra Rush Breaking the Chains	Date					
Sonia Hall, City Administrator City of Parlier		Date				

### **ATTACHMENT A**

Breaking the Chains	Grant	Match	
Breaking the Chains Counselor			
2 – 3 times a week in Parlier at 580 Tulare site	\$89,584		
Travel Costs and Educational Material	\$6240		
Volunteer in-kind		\$50,000	
		Match'	
	\$95,824	\$60,000	

### PROPOSAL SUMMARIES CalVIP Applicants Recommended for Funding

### Small Cities (in alphabetical order)

### City of Grass Valley

The City of Grass Valley Police Department (GVPD), in partnership with Foothill House of Hospitality, will implement a violence reduction initiative that will target the unsheltered mentally ill and addicted. The project will build community/police trust through street outreach and intensive case management. GVPD will form a Homeless Street Outreach Team (HOT) consisting of a dedicated police officer and a homeless services case manager. The case manager will work with the police officer full time and respond to calls related to homelessness. The project will reduce violence utilizing de-escalation strategies, trust building through case management, emergency shelter, permanent housing and referrals to mental health and substance abuse treatment.

#### City of Greenfield

The City of Greenfield in partnership with Sun Street Centers, a CBO, King City, local educational agencies, and Probation will work jointly to implement a comprehensive approach to addressing community safety through targeted youth engagement. The Road to Success PLUS Program will focus its efforts in addressing behavioral change of youth at risk of or involved with local law enforcement or the juvenile justice system. The project will utilize a set of trauma-informed and culturally responsive evidence-based interventions, which will reduce the recidivism rates of the participants.

### City of Gustine

The City of Gustine will support, expand and replicate evidence-based violence reduction efforts to reduce violence, drug use, aggravated assaults, school absence and suspension. A Youth Services Bureau will be created within the Gustine Police Department to represent the youth serving systems. The approach will be founded on three evidence-based strategies: (1) integrating school-based mental health services with supports, including reducing the use of suspensions; (2) formal diversion and restorative justice programs that foster constructive peer relationships, and (3) opportunities to experience positive recreational activities and leadership with law enforcement through community policing.

### City of King City

The City of King in partnership with Sun Street Centers, a CBO, The City of Greenfield, local educational agencies, and Probation will work jointly to implement a comprehensive approach to addressing community safety through targeted youth engagement. The Road to Success PLUS Program will address behavioral change of youth at risk of or involved with local law enforcement or the juvenile justice system. The project will utilize a set of trauma-informed and culturally responsive evidence-based interventions, which will reduce the recidivism rates of the participants.

### City of Marysville

The City of Marysville, with Strong and Courageous Foundation and Yuba County Office of Education, will implement a gang reduction program to combat youth violence. The program will include the OJJDP Comprehensive Gang Model and the Gang Resistance Education and Training (G.R.E.A.T.). The project aims to reduce gang associations and involvement of youth in Marysville by providing academic, behavioral, and pro-social supports.

### City of Parlier

The City of Parlier, through the Parlier Communities that Care Collaborative and The Hope Coalition, will implement evidence-based primary prevention strategies and work on policy and environmental change. Parlier Communities That Cure Violence (CTCV) takes a data driven comprehensive public health approach to collaboratively and holistically reduce the rising violence and criminal activity. The project addresses all violence with a focus on domestic violence and rape. CTCV will implement the Start Strong Building Healthy Teens model to prevent teen dating violence and the Peace Over Violence model for providing support for the victims. The HOPE Coalition will implement the Cure Violence Mode.

### Cities (in alphabetical order)

### City of Bakersfield

The City of Bakersfield will reduce violence citywide while also minimizing incarceration and promoting opportunity for young people at highest risk of violence. The project will strengthen community-police relations, particularly with residents who are at disproportionately high risk of involvement in violence. The city will implement the following four-step process to build a procedurally just violence reduction strategy. First, build a partnership-focused project support and management team. Second, work with key community stakeholders to build a comprehensive and detailed "shared understanding" of the problem, the opportunity and the solution. Third, build the analytic, operational and management capacities needed for successful implementation and pilot implementation. Fourth, build a two-year implementation plan, implement the plan and employ an assessment of the effectiveness and value of the effort (in partnership with a highly regarded researcher) to shape a sustainable and resource-wise public safety initiative.

#### City of Fresno

The Fresno Police Violence Reduction and Community Services Unit will form a partnership with established community-based organizations to provide proven and expanding multi-faceted violence reduction strategies. The focus of the project will be adolescents, young adults, their families, and those who currently or previously had justice system engagement who live in targeted low-income neighborhoods and who are at high-risk for gang recruitment and activities, violence and drug abuse. Through collaboration, the program will provide evidence-based interventions that include violence analysis, outreach, tattoo removal, hospital-based intervention, training for law enforcement and other stakeholders, mentorship, educational and computer lab classes, excursions, structured sports programs, case management, community building and group or individual counseling with licensed mental health clinicians.