



**SAMPSON COUNTY
BOARD OF COMMISSIONERS
MEETING AGENDA
December 3, 2018**

9:00 am	Swearing In Ceremonies (Second Floor Courtroom, Sampson County	1 - 2
Tab 1	Courthouse)	
6:00 pm	Reconvene Regular Meeting (County Auditorium)	
	Invocation and Pledge of Allegiance	
	Approve Agenda as Published	
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	b. Tax – Adoption of Market Schedule of Values and Present-Use Schedule of Values for 2019 Revaluation	43 - 44
	c. Social Services – Adoption of Modified Memorandum of Understanding between County and DHHS	45 - 62
	d. Appointments	63 - 66
	• Health Advisory Board	
	• SRMC Board of Trustees	
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	a. Approve the minutes of the November 5, 2018 meeting	68 - 78
	b. Approve the Department of Aging’s submission of an application for United Way funding in the amount of \$20,000 for construction of wheelchair ramps	79 - 99
	c. Approve the Health Department’s submission of an application for United Way funding in the amount of \$5,000 for the Breast and Cervical Cancer Control Program (BCCCP)	100 - 123
	d. Adopt a resolution authorizing the lease of agriculture tracts adjacent to the Detention Center for the period December 1, 2018 – December 31, 2019 to Mac Sutton for farming purposes	124 - 127
	e. Approve the Sampson Area Transportation Department’s Drug and Alcohol Policy Addendum	128 - 131

Tab 5	Consent Agenda, continued	
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	b. Health Advisory Board Minutes, October 15, 2018	189 - 193
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	<ul style="list-style-type: none"> • McPhail, Thomas • Melvin, Thomas and Mary • Warren, Gerald 	
	Public Comment Period (see policies and procedures in agenda)	202 - 203
	Adjournment	

OUR PUBLIC CHARGE

The Board of Commissioners pledges to the citizens of Sampson County its respect. The Board asks its citizens to likewise conduct themselves in a respectful, courteous manner, both with Board members and fellow citizens. At any time should any member of the Board or any citizen fail to observe this public charge, the Chair (or presiding officer) will ask the offending person to leave the meeting until that individual regains personal control. Should decorum fail to be restored, the Chair (or presiding officer) will recess the meeting until such time that a genuine commitment to this public charge is observed. All electronic devices such as cell phones, pagers, and computers should please be turned off or set to silent/vibrate.

NORTH CAROLINA'S SAMPSON COUNTY

SAMPSON COUNTY BOARD OF COMMISSIONERS SWEARING IN CEREMONY PROCEEDINGS

*Second Floor Courtroom, Sampson County Courthouse
Monday, December 3, 2018
9:00 a.m.*

BALIFF OPENS COURT

CALL TO ORDER OF THE BOARD OF COMMISSIONERS

Clark H. Wooten, Chairman, Sampson County Board of Commissioners

PLEDGE OF ALLEGIANCE

Led by Vice Chairperson Lee

INVOCATION

Led by Rev. Mike Shook

RECOGNITION OF FORMER COMMISSIONERS

Chairman Clark H. Wooten

Chairman Strickland will introduce the former commissioners present. These gentlemen will be identified by a ribboned badge and will be seated in a reserved area near the front. The Chairman will then turn the floor over to the presiding judge.

THE SWEARING IN CEREMONY

The Honorable Albert D. Kirby, Jr., Senior Resident Superior Court Judge, presiding

Each person to be sworn in will have a copy of his or her oath to read from. They will come forward as called by Judge Kirby to be sworn. Each person sworn must sign their oath following the ceremony so that Judge Kirby can then subscribe the oath. The oaths will be administered in the following order:

Swearing In of Board of Commissioners Members

In alphabetical order: Thaddeus L. Godwin, Sue Lee & Clark H. Wooten

Judge Kirby will call each commissioner-elect to come forward, one at a time, with family members as desired. The newly sworn commissioners will take their seats with the remainder of the Board while the others are sworn in.

Swearing In of Clerk of Court & Deputy Clerks of Court

Chris Fann, followed by Deputy and Assistant Clerks of Court

Judge Kirby will call Mr. Fann forward, with family members as desired, and administer his oath. Judge Kirby will then call forward all the assistant and deputy clerks of court and administer their oaths as a group.

Swearing In of Sheriff, Deputies, Detention Center Officers
and Civilian Employees of the Sheriff's Office

*James H. Thornton, followed by Sheriff's Deputies, Detention Center Officers and Civilian Employees
Judge Kirby will call Mr. Thornton forward, with family members as desired, and administer his oath.
The Judge will call forward all the deputy sheriffs and administer their oaths as a group, followed by same
with Detention Center Officers and lastly Civilian Employees (administrative assistants).*

Swearing In of Soil & Water Supervisors

*In alphabetical order: James Lamb, Henry E. Moore, L. Craig Thornton
Judge Kirby will call each gentleman to come forward, one at a time, with family members as desired.
(We have been advised that Mr. Moore will be unable to attend.)*

*This concludes the swearing in ceremony, and Judge Kirby will turn the ceremony back over to the Board
of Commissioners.*

RECESS TO RECONVENE

*The Board will recess to reconvene at 6:00 p.m. in the County Auditorium to conduct their regular
monthly meeting.*

BALIFF CLOSSES COURT

PHOTOGRAPHS

*If families wish to have pictures made, they may do so now.
Also, the former commissioners will gather for a group photograph for the newspaper.*



***Note to those being sworn in: We will have Bibles available for the swearing in
ceremony. You may, of course, bring a family Bible to use if you so choose. Also, your
spouse or family members may join you also for your swearing in. It is imperative that
you sign your oath before leaving the ceremony! Copies will be available for your
review before the ceremony.***

**SAMPSON COUNTY
BOARD OF COMMISSIONERS**

ITEM ABSTRACT

ITEM NO. 2

Meeting Date: December 3, 2018	<input type="checkbox"/>	Information Only	<input type="checkbox"/>	Public Comment
	<input type="checkbox"/>	Report/Presentation	<input type="checkbox"/>	Closed Session
	<input checked="" type="checkbox"/>	Action Item	<input type="checkbox"/>	Planning/Zoning
	<input type="checkbox"/>	Consent Agenda	<input type="checkbox"/>	Water District Issue

SUBJECT: Organization of the Board

DEPARTMENT: Governing Body

PUBLIC HEARING: No

CONTACT PERSON(S): Edwin W. Causey, County Manager (for election of Chairman)
Chairman (for election of Vice Chairman)
Joel Starling, County Attorney

PURPOSE: To conduct annual election of officers

ATTACHMENTS: None

BACKGROUND:

North Carolina General Statutes require that the Board elect its officers during its first meeting in December each year. Customarily, the County Manager presides over the election of the Chairman. Then, the newly-elected Chairman presides over the election of Vice Chairman.

The person conducting the election should ask for nominations from the Board (nominations do not require a second). After all nominations have been made, the Board should vote (typically in the order received) on the candidates, with each member casting one vote. The Board should agree in advance on what procedure to follow if no candidate receives a majority of the votes cast on the first round of voting. County Attorney Joel Starling will advise the Board on options for this procedure.

RECOMMENDED ACTION OR MOTION:

Elect officers as prescribed by General Statutes

**SAMPSON COUNTY
BOARD OF COMMISSIONERS**

ITEM ABSTRACT

ITEM NO. 3 (a)

Meeting Date: December 3, 2018 Information Only Public Comment
 Report/Presentation Closed Session
 Action Item Planning/Zoning
 Consent Agenda Water District Issue

SUBJECT: Recognition of Retirees

DEPARTMENT: Governing Body

PUBLIC HEARING: No

CONTACT PERSON: Vice Chairperson Sue Lee

PURPOSE: To recognize County employees for their dedicated service

ATTACHMENTS: None

BACKGROUND: Retirees for November:
Peggy Pollock, Health Department: 2013 - 2018
Sharon Smith, Health Department: 2016 - 2018

RECOMMENDED
ACTION OR MOTION: Present each retiree with a County plaque in recognition of her years of service
to the County

**SAMPSON COUNTY
BOARD OF COMMISSIONERS**

ITEM ABSTRACT

ITEM NO. 4 (a)

Meeting Date: December 3, 2018	<input type="checkbox"/>	Information Only	<input type="checkbox"/>	Public Comment
	<input type="checkbox"/>	Report/Presentation	<input type="checkbox"/>	Closed Session
	<input checked="" type="checkbox"/>	Action Item	<input type="checkbox"/>	Planning/Zoning
	<input type="checkbox"/>	Consent Agenda	<input type="checkbox"/>	Water District Issue

SUBJECT: Health Department – Approval of 2018-22 Strategic Plan

DEPARTMENT: Health

PUBLIC HEARING: No

CONTACT PERSON(S): Kelly Parrish, PHN Supervisor
Sydney Smith, Public Health Educator

PURPOSE: To consider approval of the Health Department’s Strategic Plan for the period 2018-2022

ATTACHMENTS: Draft Strategic Plan

BACKGROUND:

Nursing Supervisor Kelly Parrish and Public Health Educator Sydney Smith will present an overview of the Health Department’s Strategic Plan, which sets forth the priority focus areas for the department for the period 2018-2022. The focus areas were selected based upon the Department’s 2017 Community Health Assessment, the 2018 State of the County Health report, health status indicators for our populations, with the experience and expertise of key departmental staff and the Health Advisory Board.

RECOMMENDED ACTION OR MOTION:

Approve the 2018-2022 Strategic Plan as recommended by the Health Advisory Board

SAMPSON COUNTY HEALTH DEPARTMENT

Wanda Robinson
Health Director

360 County Complex Road, Suite 200
Clinton NC 28328



To: Mr. Edwin Causey, County Manager
Susan Holder, Asst. County Manager

From: Wanda Robinson, Health Director

Subject: County Commissioner's Agenda Items

Date: November 20, 2018

Attached are items for your review and approval from the Health Advisory Committee that was approved on November 19, 2018.

- I. **Item for presentation: Health Department 2018-2022 Strategic Plan: Kelly Parrish/Sydney Smith presenters. This is being submitted for your review and approval. This plan reflects the areas of focus of the Sampson County Health Department for the next four year period of 2018-2022. Your recommendations and approval is requested.**
- II. Sampson County Advisory Health Committee Reappointments: Please see attachment.
- III. Consent Agenda Items:
 - a. United Way application- Approval to apply for the United Way Grant in the amount of \$5,000.00. Funds will be used to support the Breast and Cervical Cancer Control Program (BCCP) for the purpose of providing mammograms for indigent clients.
 - b. TB Control Funds-Funds are to be used to restore the local health department's funding to its 2016 level for this activity. Funding approval request is \$3,321.
 - c. Child Health Funding-Funding is being restored due to a reduction during the 2017-18 Fiscal Year. Funding approval is requested in the amount of \$1963.
 - d. Mosquito Abatement Funds- Additional funding is available for counties that were under the Florence Disaster Declaration. Funding will be used to implement a basic Mosquito Control Program. Program will conduct surveillance and provide guidance and technical support for post emergency hurricanes or tropic storms. Funding approval is requested in the amount of \$48,521.
- IV. Board Information:
 - a. Health Advisory Committee Operating Procedures
 - b. Meeting minutes for October 15, 2018

**Sampson County Health Department
Strategic Action Plan
Baseline Data**

Goal 1:	To improve the health status and prevent premature death for the residents of Sampson County.
Objective # 1	Reduce the premature death rate by 10% for Sampson County
2014-2018	Sampson County Diabetes death rate: 36.1 per 100,000 from 2008-2012 Source: North Carolina States Center for Health Statistics
2018-2022	Sampson County Diabetes death rate: 51.5 per 100,000 from 2012-2016 Source: North Carolina States Center for Health Statistics

Goal 1:	To improve the health status and prevent premature death for the residents of Sampson County.
Objective # 2	Reduce the Infant mortality death rate by 1% for Sampson County
2014-2018	Sampson County Infant Mortality Rate: 5.9 per 1,000 in 2013 Source: North Carolina State Center for Health Statistics
2018-2022	Sampson County Infant Mortality Rate: 7.2 per 1,000 in 2016 Source: North Carolina State Center for Health Statistics

Goal 1:	To improve the health status and prevent premature death for the residents of Sampson County.
Objective # 3	Decrease the adolescent pregnancy rate among females ages 10-17 by 5%. Decrease the percentage of repeat pregnancies to teens aged 17 and under by 10%. Reduce the percentage of positive results amongst individuals aged 15-24 years tested for Chlamydia, Gonorrhea and Syphilis.
2014-2018	Sampson County Pregnancy rate for 15-19 year old group was 69.6 per 1,000 in 2013 with 23.5% of the total being repeat pregnancies.
2018-2022	Sampson County Pregnancy rate for 15-19 year old group was 52.4 per 1,000 in 2016 with 19.3% of the total being repeat pregnancies. For 2017, North Carolina ranks 5th in the country for Gonorrhea cases, 6th in the country for Chlamydia cases and 8th in the country for Syphilis cases. Sampson County has a rate of 44.6 for Gonorrhea, 154.5 for Gonorrhea and 37.8 for Syphilis. North Carolina Congenital Syphilis cases have increased from 0 cases in 2012 to 23 in 2017.

Goal 1:	To improve the health status and prevent premature death for the residents of Sampson County.
Objective # 4	Reduce the death rate resulting from the leading causes of cancer death, heart and circulatory death by 5%.
2014-2018	Sampson County Rates: 2008-2012 Heart Disease rate – 191.4 per 100,000 Stroke Disease rate – 52.5 per 100,000 Cancer Disease rate – 183.9 per 100,000 Source: State Center for Health Statistics
2018-2022	Sampson County Rates: 2012-2016 Heart Disease rate – 180.2 per 100,000 Stroke Disease rate – 53.9 per 100,000 Cancer Disease rate – 192.0 per 100,000 Source: State Center for Health Statistics Sampson County Rates 2017-Adult Obesity:37%, Physical Inactivity:32% Source: County Health Rankings and Roadmaps

Goal 1:	To improve the health status and prevent premature death for the residents of Sampson County.
Objective # 5	Increase the number of children served through the public health department by 5%. Provide comprehensive services to the children of Sampson County in the form of outreach, referral, immunizations and well child clinical services.
2014-2018	Services provided during 2013 fiscal year-189.
2018-2022	Services provided during 2017 fiscal year-247.

Goal 1:	To improve the health status and prevent premature death for the residents of Sampson County.
Objective # 6	Reduce the unintended poisoning mortality rate due to substance abuse.
2018-2022	Sampson County Medication /drug overdose: 2016- 136 NC Detect

Sampson County Health Department Strategic Plan 2018-2022



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**Sampson County Health Department
Strategic Plan
2018-2022**

I. Purpose:

It is the objective of this document to set forth priorities for the focus of the Sampson County Health Department for the next four years July 1, 2018 to June 30, 2022.

The areas selected are based upon:

- 2017 Community Health Assessment
- 2018 SOTCH Report
- Data relative to health status indicators of the population of Sampson County
- Public input and community surveys
- Judgment of key personnel as to resources required to achieve tasks included.
- Experience and expertise of the Sampson County Board of Health and the Health Advisory Board in identifying resources and needs.

Policy:

The priority areas of influence identified in this document are intended to outline areas of emphasis based upon community needs, but are not designed to exclude or discourage other programmatic goals and interests. Management team members and other staff are urged to continue to seek creative opportunities to address public health problems/issues related to their routine duties and responsibilities within the restraints of available resources and contractual program requirements. This plan is intended to serve as a general guide for the relatively short term of four years. The changeable nature of Public Health does not lend itself to planning for the longer term in any realistic manner. This document may be amended at any time that new or emerging issues demand the attention of this health department.

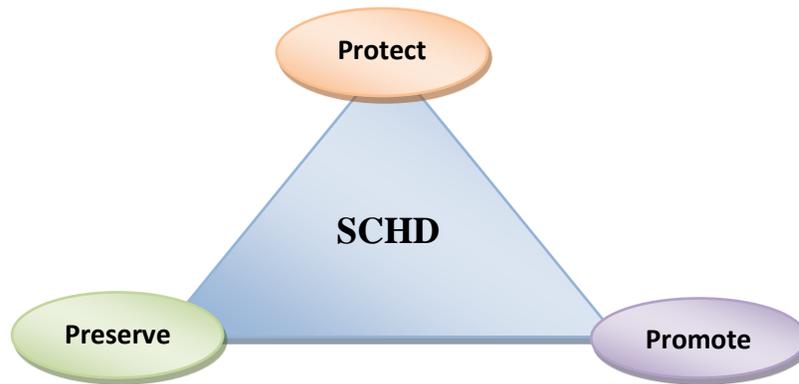
Method:

Based upon a review of the findings of the Community Health Assessment, discussions with the Board of Health, and meetings with the staff, a list of potential priority items were assembled. These were separated by a work group into different areas. The areas of priority identified in this document are not in priority order. Since each item applies to different program areas, it was felt that these could be accomplished concurrently. The planning group will meet at least annually to report on progress and /or revise the document as required.

**Sampson County Health Department
Strategic Action Plan
2018-2022**

II. Mission, Vision and Values

MISSION, VISION AND VALUES



Mission:

The mission of Sampson County Health Department is to preserve, protect and promote the health, environment and well-being of the citizens of Sampson County.

Vision:

The vision of Sampson County Health Department is to provide services, prevent adverse outcomes and promote efforts to improve the quality of life for the residents of Sampson County.

Values and Objectives:

Caring - We will be compassionate when dealing with others and to show concern for the interest and needs of others.

Commitment - We will be dedicated, loyal and empathetic in what we do for the customer and the public.

Communication - We will provide direct, sincere communications to customers, the public and co-workers.

Community Service - We will provide services to the community through education, outreach and other venues to help ensure the health, safety and welfare of the community.

Excellence in Customer Service - We will meet or exceed customer expectations.

Privacy - We will respect the confidentiality and privacy of others and be committed to confidential care for customers and the public.

Professionalism - We will treat customers and co-workers with DIGNITY, RESPECT, INTEGRITY and COMPASSION at all times.

Productiveness - We will work to the best of our ability to provide efficient, effective, quality care for our customers and the public.

Responsibility - We are accountable to customers and the public for what we do.

Teamwork - We will work together to provide the best possible care for customers and the public. There is no "I" in team.

**Sampson County Health Department
Strategic Plan
2018-2022**

III. General Information:

This plan reflects the areas of focus of the Sampson County Health Department during the next four year period of 2018-2022.

The Sampson County Health Department is committed to carrying out the following action plan to improve the health of Sampson County residents.

The Management Team of the Sampson County Health Department envisions an agency that strives to meet the following guiding principles:

- Health Department maintains Local Health Department Accreditation Standards, as defined in policies; protocols are maintained by all programs.
- Service deliverables and expansions are driven by community need.
- Improved efficiency is attained in all divisions.
- Health Department recruits, develops and retains a well-qualified, diverse workforce.
- Public image of the Health Department is positive.
- Quality of services is assured through implementation of the Quality Improvement/Quality Assurance plan.
- Residents experience improved health outcomes and quality of life.
- Health Department is accountable to the public in fiscal responsibility and service delivery.
- Efforts are conducted through improved internal collaboration and communication.
- Health Department is considered to be an employer of choice.
- Expanded service availability for county residents.
- Physical facilities are available or in the planning stage to address growing community needs and support newest technologies.
- Funding is available to support and improve our programs.
- Best practices, as recognized by the public health community, are utilized in service provision.
- Department is capable of providing a comprehensive response to Public Health Emergencies.

**Sampson County Health Department
Strategic Action Plan
2018-2022**

IV. Review and analysis of factors that impact the delivery of service:

Strengths, Weaknesses, Opportunities and Threats (SWOT) Analysis

SWOT Analysis is a tool that identifies strengths, weaknesses, opportunities, and threats of an organization. Specifically, SWOT is a basic model that assesses what an organization can and cannot do, as well as potential opportunities and threats that impact what an organization can accomplish. The Strategic Planning Team identified the following SWOT that can impact delivery of health services to Sampson County communities.

Strengths	Weaknesses
<ul style="list-style-type: none"> ◆ Local Government Support and funding ◆ Strong community partnerships ◆ Competent, well-trained, dedicated staff ◆ On-going professional development for employees ◆ Access to quality technological resources ◆ Bilingual staff ◆ Grant funding-allows innovation ◆ Highly qualified, knowledgeable billing support staff ◆ Inviting public health facilities ◆ Enhanced health education and outreach programs ◆ Comprehensive clinical services ◆ Electronic health record system ◆ New partnerships and regional collaborations ◆ Strong collaboration with emergency management to respond to public health preparedness concerns ◆ Quality improvement initiatives ◆ Responsible and proactive to emerging issues and trends 	<ul style="list-style-type: none"> ◆ Future Medicaid Reform uncertainties ◆ Potential for cuts in Federal/State Public Health Programs ◆ Ability to compensate professional staff at levels that attract highly qualified workers ◆ Ability to recruit in some professional fields such as nursing and nutrition ◆ Availability of mental health resources and providers in the county ◆ Limited primary care and chronic disease management services ◆ Economically diverse population ◆ Challenges related to a rapidly changing population ◆ Internal and external communication ◆ Limited transportation ◆ Reliable county vehicles ◆ High no show rates ◆ High RN/Nutritionist/NP turnover

Opportunities	Threats
<ul style="list-style-type: none"> ◆ Emerging technologies to promote more efficient service delivery ◆ Established relationship with media outlets ◆ Leadership roles of staff in various professional organizations, regional, state and nationally ◆ Safety Net provider for uninsured and underinsured ◆ Up-to-date electronic equipment and other tools for staff to perform more efficiently 	<ul style="list-style-type: none"> ◆ Lack of public transportation ◆ Limited funding in chronic disease, health promotion and disease prevention services ◆ Potential cuts to federal, state and local programs ◆ Limited primary care providers in the county for the under and uninsured population ◆ Limited services for men.

**Sampson County Health Department
Strategic Action Plan
2018-2022**

V. Summary of the Sampson County Community Health Assessment:

Sampson County performed the 2017 Community Health Assessment with the assistance of the Partners for Healthy Carolinians Task Force and other community partners. The following is a summary of the assessment findings.

Overview of the Process of Data Collection:

The collection of data for the Community Health Assessment involved multiple collection processes that included:

- A. Surveys: The Community Health Assessment (CHA) Team distributed paper surveys to various sites throughout the county and electronic surveys via Survey Monkey links on Healthy Carolinians and Sampson Regional Medical Center websites. A total of 960 surveys were collected.
- B. Secondary data: was also collected from a variety of sources, including the North Carolina Center of Health Statistics, LINC and other sources.

Data Results:

After compiling the data from the assessment process, the findings were categorized into the following areas: community health concerns, barriers to health care and community needs.

- A. Top Ten Community Health Concerns:
 - 1. Substance Abuse
 - 2. Low Income/Poverty
 - 3. Physical Activity/Nutrition
 - 4. STDs/Pregnancy Prevention
 - 5. Tobacco/Second Hand Smoke
 - 6. Chronic Disease
 - 7. Mental Health/Support/Counseling
 - 8. Teen Health/Activities
 - 9. Alcohol Abuse
 - 10. Weight Management

B. Barriers to Care:

1. No Health Insurance
2. Other
3. Insurance didn't cover what I/we needed
4. Couldn't get an appointment
5. Deductible/co-pay was too high
6. Doctor wouldn't take insurance or Medicaid
7. Wait was too long
8. Pharmacy wouldn't take insurance or Medicaid
9. Dentist wouldn't take insurance or Medicaid
10. No way to get there

C. Community Health Care Needs:

1. Higher Paying Employment
2. Positive Teen Activities
3. Availability of Employment
4. Better/More Recreational Facilities
5. More Affordable Health Services
6. Road Maintenance
7. Better/More Healthy Food Choices
8. Counseling/Mental Health/Support Groups
9. Child Care Options
10. Other

Healthy Carolinians Objectives:

After careful review and discussion of all the information obtained from the community assessment, the CHA Team chose to address three health related issues that were cited in the data: Substance Abuse; STDs/Sexual Activity/Pregnancy Prevention; and Chronic Disease.

1. **Substance Abuse:** Substance abuse has a major impact on individuals, families, and communities. The effects of substance abuse are cumulative, significantly contributing to costly social, physical, mental, and public health problems. In 2016, there were 136 medication or drug overdoses in Sampson County.
2. **STDs/Sexual Activity/Pregnancy Prevention:** STDs can be present in, and spread by, people who do not have any symptoms of the condition and have not yet been diagnosed with an STD. Therefore, public awareness and education about these infections and the methods of preventing them is important. Sampson County's STD rates fluctuated from 2013-2015. There are several safe and highly effective methods of contraception to prevent

unintended pregnancy. It is important to prevent teen pregnancy because it brings extensive social and economic costs through immediate and long-term impacts on teen parents and their children. Sampson County's 2011-2015 teen pregnancy rate for females ages 15-19 was 56.7 while North Carolina's rate was 36.2.

3. **Chronic Disease:** According to the Centers for Disease Control and Prevention (CDC), chronic diseases such as heart disease, stroke, cancer, diabetes, obesity, and arthritis are among the most common, costly, and preventable of all health problems in the U.S. These diseases also cause major limitations in daily living for people. The leading causes of death in Sampson County from 2011-2015 were: cancer, heart disease, cerebrovascular disease, diabetes, and chronic lower respiratory diseases.

Action Plans:

Community Action Plans have been developed to address each of the issues chosen by the Community Health Assessment (CHA) Team. Interventions will include, but not be limited to: educational sessions; assistance with achieving active lifestyles; community events; media campaigns; and website information.

Dissemination of the Community Health Assessment Document:

The Sampson County Partners for Healthy Carolinians Task Force will disseminate the document to task force members, community partners, government agencies, stakeholders and the general public with the hope that the information contained in the document will enable various agencies and stakeholders to use the information to assist with meeting the needs of the public and improving and promoting the health and well-being of the citizens of Sampson County.

Dissemination of the Community Health Assessment document will include, but not be limited to:

1. Sampson County Partners for Healthy Carolinians Task Force members.
2. Sampson County Health Department
3. Sampson County Board of Health
4. Sampson County Board of Commissioners.
5. Sampson County government offices
6. Sampson County Public Libraries
7. Sampson Regional Medical Center
8. News articles in the Sampson Independent highlighting the major findings of the assessment.
9. Sampson County website
10. Healthy Carolinians website

Summary:

Health issues continue to be a concern for the residents of Sampson County. Access to care is often difficult for residents due to: lack of health insurance or inadequate insurance; lack of available physicians and specialists who are accepting new patients and are available to schedule more immediate appointments; and lack of transportation. According to the US Census Bureau, 23.6% of Sampson County residents are uninsured. For those with health insurance, their insurance may not cover all of their medical needs. Residents may have difficulty receiving needed health care due to the lack of available physicians/specialists and the lack of immediate appointments. Lack of transportation is also a barrier to access to care due to Sampson County's sparsely populated rural communities and no public transportation system.

**Sampson County Health Department
Strategic Action Plan
2018-2022**

VI. Strategic Goals:

Goal 1:*	To improve the health status and prevent premature death for all residents of Sampson County.
Goal 2:	Provide a coordinated Public Health response to manmade or natural disaster or communicable disease outbreak.
Goal 3:	Maintain a competent public health workforce.
Goal 4:	To improve public services and programs and increase collaboration among fiscal agencies/health care providers leading to improved patient care.
Goal 5:	Increase public awareness of public health programs and services in Sampson County.
Goal 6:	To safeguard life, promote human health and protect the environment with the use of technology, rules and public education.

*Address Community Health Assessment Priorities

**Sampson County Health Department
Strategic Action Plan
2018-2022**

Goal 1:	To improve the health status and prevent premature death of all residents of Sampson County.		
Objective # 1	Reduce the premature death rate by 10% for Sampson County		
Baseline Data	Sampson County Diabetes death rate: 51.5 per 100,000 from 2012-2016 Source: North Carolina States Center for Health Statistics		
CHA Priority Addressed	Chronic Disease/Diabetes		
Activities	Lead Person	Partners N=new/E=existing	Timeframe
Collaborate with all known agencies and organizations in the county working towards diabetes prevention and treatment.	Diabetes Program Coordinator Health Promotion Coordinator	E-Sampson County Partners for Healthy Carolinians E-Local providers E-Sampson Regional Medical Center	Ongoing
Sponsor health fair during Diabetes Awareness Month	Health Educator. Diabetes Program Coordinator	E-Sampson County Partners for Healthy Carolinians	November- annually
Increase the number of diabetics served through clinical services by 10% annually (Current number= 8 monthly.)	Diabetes Program Coordinator	E-Sampson County Partners for Healthy Carolinians E-Local Providers	July 2019
Market Diabetes services and awareness. a. Submit diabetes awareness and prevention articles to local papers quarterly b. Send monthly diabetes support group notices to paper/health care providers c. Provide diabetes information packets	Health Educator/ Diabetes Program Coordinator		Ongoing

to providers at least every six months. d. Publicize community diabetes events in paper, radio, local cable channel and website.			
Implement a Diabetes Support group. (current number-0)	Diabetes Program Coordinator		June 2019
Increase access to flu vaccine for residents of Sampson County.	Immunization Coordinator	N-Faith based organizations, schools, local providers	Ongoing

**Sampson County Health Department
Strategic Action Plan
2018-2022**

Goal 1:	To improve the health status and prevent premature death of all residents of Sampson County.		
Objective # 2	Reduce the Infant mortality death rate by 1% for Sampson County		
Baseline Data	Sampson County Infant Mortality Rate: 7.2 per 1,000 in 2016 Source: North Carolina State Center for Health Statistics		
CHA Priority Addressed	Teen Pregnancy Prevention		
Activities	Lead Person	Partners N=new/E=existing	Timeframe
Collaborate with all known agencies and organizations in the county providing prenatal care services in Sampson County.	Maternal Health Coordinator Maternity Care Coordination staff. Child Service Coordination staff	E-Local providers E-Sampson Regional Medical Center	Ongoing
Update local providers about the Pregnancy Medical Home Program policy	Maternal Health Coordinator Pregnancy Care Management Coordination Staff	E-Local Providers	June 2019
Provide smoking education for prenatal patients to include Quit One, Quit Two process	Health Educator		Ongoing
Implement childbirth education classes	Maternal Health OB/GYN staff/ Health Educator		June 2019

**Sampson County Health Department
Strategic Action Plan
2018-2022**

Goal 1: (continued)	To improve the health status and prevent premature death for all the residents of Sampson County.		
Objective # 3	<p>Decrease the adolescent pregnancy rate among females ages 10-17 by 5%. Decrease the percentage of repeat pregnancies to teens aged 17 and under by 10%. Reduce the percentage of positive results amongst individuals aged 15-24 years tested for Chlamydia, Gonorrhea and Syphilis.</p>		
Baseline Data	<p>Sampson County Pregnancy rate for 15-19 year old group was 52.4 per 1,000 in 2016 with 19.3% of the total being repeat pregnancies. For 2017, North Carolina ranks 5th in the country for Gonorrhea cases, 6th in the country for Chlamydia cases and 8th in the country for Syphilis cases. Sampson County has a rate of 44.6 for Gonorrhea, 154.5 for Gonorrhea and 37.8 for Syphilis. North Carolina Congenital Syphilis cases have increased from 0 cases in 2012 to 23 in 2017.</p>		
CHA Priority Addressed	STDs/Sexual Activity/Pregnancy Prevention		
Activities	Lead Person(s)	Partners N=new/E=existing	Timeframe
Family Planning staff, Health educator, case management staff will provide contraceptive counseling and link to health department services to teens with one or more pregnancies	Family Planning Coordinator, Health Educator Case Management Staff	E- Health Educator, Case Management Staff E. Academic Abundance	Ongoing
Develop a plan to re-establish family planning education classes in the school systems	Health Educator Family Planning Coordinator	E- Academic Abundance	Ongoing
Expand family planning services to include long term contraceptive devices.	Family Planning Coordinator/Health Educator		Ongoing
Continue to provide emergency contraceptive services.	Family Planning Coordinator		Ongoing
Offer “Reducing the Risk” to 9 th grade	Health Educator	N-Sampson County City and County	Ongoing

students in participating high schools to decrease to reduce the percentage of untended pregnancy, STDs and HIV		Schools, Academic Abundance E- Sampson County Partners for HC.	
Offer NC Healthy Living Standard Course of Study in the School systems. (Current number of events-0)	Health Educator	N-Health Education staff, School System	Ongoing
Outreach activities to include Teen Health Fair held annually to focus on middle and high school students	Health Educator	E-Sampson Partners for Healthy Carolinians	Annually
Offer/provide STD testing services to all clients as requested or required	Clinic staff, STD ERRN, NPs		Ongoing
Provide individual and community education regarding STDs and potential complications	Clinic Staff, Health Educator		Ongoing
Provide STD/Teen Pregnancy Outreach in the community to the public with an emphasis on teens	Health Educator	E-Academic Abundance	Ongoing

**Sampson County Health Department
Strategic Action Plan
2018-2022**

Goal 1:	To improve the health status and prevent premature death for the residents of Sampson County.		
Objective # 4	Reduce the death rate resulting from the leading causes of cancer death, heart and circulatory death by 5%.		
Baseline Data	<p>Sampson County Rates:2012-2016 Heart Disease rate- 180.2 per 100,000 Stroke Disease rate - 53.9 per 100,000 Cancer Disease rate -192.0 per 100,000 Source: State Center for Health statistics</p> <p>Sampson County Rates 2017-Adult Obesity:37%, Physical Inactivity:32% Source: County Health Rankings and Roadmaps</p>		
CHA Priority Addressed	Chronic Disease/Cancer/Obesity		
Activities	Lead Person	Partners N=new/E=existing	Timeframe
Provide Breast and Cervical Control Program (BCCCP)/Wisewoman services for a minimal of 50 women meeting the BCCCP eligibility criteria.	BCCCP Program Coordinator	E-Local Health Care providers, Sampson Regional Medical Center.	Ongoing
Increase public awareness of breast cancer and cervical cancer risk and resources available through the Sampson County Health Department.	BCCCP Program Coordinator/Health Educator	E-Breast and Cervical Cancer Control Advisory Committee, Health Department Staff.	Ongoing
Implement Health Coaching Curriculum for BCCCP/WW Program. (Includes 3 classes)	BCCCP Program Coordinator/Health Educator		Ongoing

Promote Eat Smart, Move More, Maintain don't gain! Holiday Challenge each Year.	Health Educator		Ongoing
Sponsor Breast and Cervical Cancer Annual Rally and Health Fair for the purpose of promoting awareness in the minority population	Health Educator	E-Breast and Cervical Cancer Advisory Board	Annually-October
Provide education on the Chronic Diseases and preventative measures to decrease risk factors through articles, flyers, health fairs and pamphlets	Health Educator	E-Sampson County Partners for Healthy Carolinians	Ongoing
Implement Primary Care Clinic to provide Health Services for the un and underinsured population	Director of Nursing/Adult Health Clinic Manager		Ongoing
Provide Chronic Disease education to the public through newspaper articles, flyers, health fairs, and pamphlets.	Health Educator	E-Sampson Partners for Healthy Carolinians	On-Going
Implement the "Journey to Health" Program	Health Educator	E-Sampson County Partners for Healthy Carolinians/Sampson Regional Medical Center	Ongoing

**Sampson County Health Department
Strategic Action Plan
2018-2022**

Goal 1:	Improve the health status and prevent premature death for all residents of Sampson County.		
Objective # 5	Increase the number of children served through the public health department by 5%. Provide comprehensive services to the children of Sampson County in the form of outreach, referral, immunizations and well child clinical services.		
Baseline Data	Services provided during 2017 fiscal year-247.		
CHA Priority Addressed			
Activities	Lead Person	Partners N=new/E=existing	Timeframe
Increase the number of Child Health referrals for clinical services by 10%	Child Health Coordinator	E-DSS, Head Start, Local providers.	June 2019
Meet state requirements for referrals to the Care Coordination for Children Program and ensure all children that qualify are offered the program.	Care Coordinator for Children Program Coordinator	E-Local providers, Local hospital, Department of Social Services	Ongoing
Continue to provide immunization consultation services to 100% of the childcare providers in Sampson County. (Current numbers =38).	Immunization Coordinator.	E-Partnership for children, Headstart	Ongoing
Increase the number of children immunized with the 4Tdap; 3 Polio; 2 MMR, 3 HIB, 3 Hep B series by 24 months of age to 90% .	Immunization Coordinator	E-Local Providers	June 2019
Increase the number of private medical providers in our county documenting into the Immunization Registry to 100%.	Immunization Coordinator	E-Local Providers	June 2019

**Sampson County Health Department
Strategic Action Plan
2018-2022**

Goal 1:	Improve the health status and prevent premature death for all residents of Sampson County.		
Objective # 6	Reduce the unintended poisoning mortality rate due to substance abuse.		
Baseline Data	Sampson County Medication /drug overdose: 2016- 136 NC Detect		
CHA Priority Addressed	Substance Abuse		
Activities	Lead Person	Partners N=new/E=existing	Timeframe
Investigate and implement evidence based substance abuse prevention programs	Health Educator	E-Substance Abuse Coalition, Healthy Carolinians N- Eastpointe, Inc	Ongoing
Community Education on the use or misuse of prescription and other medications	Health Educator	E-Substance abuse Coalition, Healthy Carolinians N-Eastpointe, Inc	Ongoing
Continue to promote and provide Naloxone kits to the community residents	Health Educator, Health Department staff	E-Substance Abuse Coalition, Healthy Carolinians N-Eastpointe,Inc	Ongoing
Offer two Take Back Events this fiscal year	Health Educator	E-Substance Abuse Coalition, Healthy Carolinians	June 2019
Promote QuitlineNC and offer the 5As counseling method to decrease the percentage of adults, middle and high school students who are current smokers to include e-cigarettes/juuls	Health Educator	E-Substance Abuse Coalition, Healthy Carolinians	June 2019

**Sampson County Health Department
Strategic Action Plan
2018-2022**

Goal 2:	Provide a coordinated Public Health response to a manmade or natural disaster or communicable disease outbreak		
Objective # 1	Implement a communicable disease surveillance system that will allow for timely reporting of diseases as required by NC Communicable Disease Laws (10A NCAC 41A.0101).		
Baseline Data	Approximately 60% of the communicable diseases are reported to our agency by the local physicians. There are a total of 42 physician practices located in Sampson County. Of these 42 offices, only 60% consistently report to the local health department as required by NC Communicable Disease Laws. Those diseases that require reporting in 24hrs are not reported in a timely manner.		
CHA Priority Addressed	State Mandated Goal		
Activities	Lead Person	Partners N=new/E=existing	Timeframe
Provide education to local providers and local public health staff twice a year on diseases and conditions that are reportable according to NC Communicable Disease Laws.	Communicable Disease Program Coordinator	E- Local health providers in Sampson County	Ongoing
Implement the North Carolina Electronic Disease Surveillance System- NCEDSS- to monitor CD reports received from providers.	Communicable Disease/TB Program Coordinator, Immunization Coordinator, STD Coordinator	E- Local health providers in Sampson County.	Ongoing
Continue respiratory fit testing for 100% of staff and provide with an N95 mask or appropriate substitute.	Communicable Disease Coordinator	E-Local Health Department Staff	Annually
Continue to maintain an active Epi Team to meet as needed or quarterly to discuss and review agency plans regarding communicable diseases, outbreaks, train for response to outbreaks and other issues.	Epi Team Chair	E- Local Health Department Epi Team	Ongoing

**Sampson County Health Department
Strategic Action Plan
2018-2022**

Goal 2: (continued)	Provide a coordinated Public Health response to a bioterrorism event or communicable disease outbreak.		
Objective # 2	Improve operational readiness for management of man-made, natural disasters, including bioterrorist threats, emerging communicable diseases, and weapons of mass destruction		
Baseline Data	Not Applicable		
CHA Priority Addressed	State Mandated Goal		
Activities	Lead Person	Partners N=new/E=existing	Timeframe
Maintain two Preparedness Coordinators	Health Director		Ongoing
Maintain up-to-date shelter protocol inclusive of staff training for use in instances of disaster	Nursing Director	E-American Red Cross, Director of Social Services, Emergency Management Director	Ongoing
Conduct or participate in a full-scale Strategic National Stockpile (SNS) exercise.	Nursing Director/Preparedness Coordinator	E-EM, SRMC, LEPC	Annually
Conduct a minimum of 2 preparedness exercises to address the annual state required component of preparedness and submit an after action plan report within 90 days of exercise.	Nursing Director/Preparedness Coordinator	E-EM, SRMC, LEPC,	Annually
Continue development of Public Health Hazards Response Plan to include Strategic National Stockpile and Pandemic Influenza Plans	Nursing Director/Preparedness Coordinator	E-Local EMS, LEPC, Sampson Regional Medical Center, PHPR-ERO	Ongoing

Attend monthly preparedness Coordinators Meeting and collaborate with other counties in the region during plan development to maximize resources in the event of disaster.	Nursing Director, Preparedness Coordinator/Others as assigned by the Health Director.	E-PHPR-ERO	Ongoing
Ensure Preparedness Coordinators have received HSEEP Training per State requirements.	Health Director	E-PHPR-ERO	As Needed

**Sampson County Health Department
Strategic Action Plan
2018-2022**

Goal 3:	Maintain a competent public health workforce		
Objective # 1	Workforce will be equipped to provide the best quality services possible through the use of best practices for recruitment, continuing education/training and retention practices and through the addition of staff necessary to increase capacity to respond to public need.		
Baseline Data	Vacancy rate for FY 2017- 30%		
CHA Priority Addressed	Having a competent workforce is essential for meeting the CHA targets for improved health care and increased access to care.		
Activities	Lead Person	Partners N=new/E=existing	Timeframe
Train staff as appropriate to become/remain current with trends in communicable disease prevention care and treatment.	Director of Nursing /Management Team		On-going
Sampson County Health Department (SCHD) managers continue to apply current departmental training requirements	Management Team		On-going
All SCHD staff will attend a minimum of 8 hrs of continuing education related to their position in addition to required departmental/ position training	Management Team		On-going
The average annual vacancy rate will not exceed 30% annually	Management Team		ongoing
Recruit and retain professional staff-NP, Nurses, Nutritionist	Management Team		Ongoing
Maintain number of bilingual staff. (Current number=6.)	Management Team		ongoing

Licensed, registered or certified staff will be monitored to insure they are receiving the minimum number of contact hours.	Management Team		Ongoing
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**Sampson County Health Department
Strategic Action Plan
2018-2022**

Goal 4:	To improve public health services and programs and increase collaboration among fiscal agencies/health care providers leading to improved patient care.		
Objective # 1	Implement information system for automated means of providing improved patient care, capturing patient information, monitoring reporting and billing services.		
Baseline Data	The health department currently uses CureMD and multiple state electronic systems to capture information.		
CHA Priority Addressed	An annual review of electronic equipment to include replacement of inventory to make health care more accessible by ensuring appropriate electronic devices and systems are available to provide patient care, capturing patient information, monitoring reporting and billing services.		
Activities	Lead Person	Partners N=new/E=existing	Timeframe
Identify training needs of staff for evaluation and update of the EHR system	Management Team/Accounting Supervisor	State Agencies, CureMD Team, TAC Team	Ongoing
Evaluate and define optimal equipment needed to provide health department services.	Management Support/Accounting Supervisor/Department Supervisor	Department Supervisors, TAC Team	Ongoing
Follow-up on all needed equipment to include purchasing	Management Support	Sampson County IT,TAC Team	annually
On-going training and education based on the type of system to include system updates	Department Supervisors	N- Cure MD staff E-State CRUSH Project staff, CRUSH local team	On-going
Implement insurance billing on the Cure-MD/CRUSH Computer system.	Accounting Supervisor	CureMD staff, State agencies, TAC Team	On-going
Education on Client Services Data Warehouse (CSDW)/Cure-MD Reports	Accounting supervisor	E-State, Cure-MD staff	Ongoing

Maintain an inventory data system for evaluating computer software and hardware and evaluate at least annually and as needed.	Administrative Assistant	TAC Team Chair, Sampson County IT, Department Supervisors	Ongoing
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**Sampson County Health Department
Strategic Action Plan
2018-2022**

Goal 4:	To improve public health services and programs and increase collaboration among fiscal agencies/health care providers leading to improved care.		
Objective # 2	Improve coordination of efforts among divisions within the health department		
Baseline Data	No baseline data available		
CHA Priority Addressed	Teen Pregnancy Prevention		
Activities	Lead Person	Partners N=new/E=existing	Timeframe
Formally organize an Adolescent Prevention Coalition to review data and develop action plans to reduce teenage pregnancy in Sampson County.	SCHD Health Educator, Family Planning Coordinator	E-Sampson County Partners for Healthy Carolinians, Academic Abundance N-School Systems	Ongoing
Partner with local agencies for the purpose of development of the Community Health Assessment.	SCHD Health Educator	N-Local agencies, hospital, private agencies E-Sampson County Partners for Healthy Carolinians	Ongoing
Continue to partner with all community stakeholders including animal control, law enforcement, schools, local providers and other to advance positive public health outcomes	Management Team	E-Sampson County Partners for Healthy Carolinians	On-going
Review services provided by different divisions to the same client in order to provide coordinated care and better serve the clients	QI/QA Team		On-going

**Sampson County Health Department
Strategic Action Plan
2018-2022**

Goal 4 (continued)	To improve public health services and programs and increase collaboration among fiscal agencies/health care providers leading to improved patient care.		
Objective # 3	To assure quality service delivery in all health department programs and activities		
Baseline Data	The Health Department currently has a QI/QA Team in place that will monitor service delivery and implement changes as needed.		
CHA Priority Addressed			
Activities	Lead Person	Partners N=new/E=existing	Timeframe
Maintain Quality Improvement/ Quality Assurance Team Leader	Health Director		On-going
Maintain the department's quality improvement plan to develop internal improvement plans for services and programs.	QI/QA Team Leader/QI/QA Team		Ongoing
Maintain the department's quality assurance plan to ensure quality services are provided for all health department services and to provide input for quality improvement projects.	QI/QA Team Leader/QI/QA Team		Ongoing
Develop corrective action plans in response to program complaints, audits and reviews to improve program services.	Program Coordinators/QI/QA Team Leader.	E-State consultants	Ongoing
Implement QI/QA Program in Environmental Health to ensure quality services are provided and to provide information for quality improvement projects.	EH Supervisor	State Consultants	Ongoing

**Sampson County Health Department
Strategic Action Plan
2018-2022**

Goal 5:	Increase public awareness of public health programs and services in Sampson County.		
Objective # 1	Increase knowledge of the Health Department and Environmental Health Services. Strive to promote a positive image for the Sampson County Health Department and Environmental Health Services in the Community		
Baseline Data	Outreach activities to promote services		
CHA Priority Addressed			
Activities	Lead Person	Partners N=new/E=existing	Timeframe
Maintain Public Relations Plan for the Sampson County Health Department	Management Team/Health Educator		On-going
Request feedback on departmental facilities and services provided by health department /EH customers	Management Team		Annually
Seek consumer feedback on all programs and services provided by the Sampson County Health Department/EH .	Management Team		Annually
Develop mechanism for analyzing and responding to consumer feedback.	QI/QA Team/Management Team		Annually
Revise and update the Health department Website	Management Team	E-Information Technology	Annually

**Sampson County Health Department
Strategic Action Plan
2018-2022**

Goal 6:	To safeguard life, promote human health and protect the environment through the practice of modern environmental science, the use of technology, rules and public education.		
Objective # 1	Protect the public from food borne outbreaks through a diligent inspection program, education and by maintaining a well trained staff. Insure high standard of water quality in private wells through water sampling and education. Protect the environment from pollution of air and water systems		
Baseline Data			
CHA Priority Addressed	State Mandated Service		
Activities	Lead Person	Partners N=new/E=existing	Timeframe
Offer ServSafe training to at least 30 managers and employees of food establishments to ensure a high food service standard within the county	Environmental Health Supervisor/EH Staff		Ongoing
Staffing and assignments will be monitored and adjusted to ensure the 100% compliance inspections.	Environmental Health Supervisor/EH Staff		Ongoing
Continue to educate stakeholders and community about the state requirement for mandated services	Environmental Health Supervisor/EH Staff		Ongoing
Continue to monitor community response to HB2 smoking regulations	Environmental Health Supervisor/EH staff		On-going
Implement electronic recycling Plan	Environmental Health Supervisor		Ongoing
Implement a Mosquito Abatement Program	Environmental Health Supervisor		Ongoing

**Sampson County Health Department
Strategic Action Plan
2018-2022**

VII. Next steps:

In order to solicit community input to the Strategic Plan, the plan will be made available on the Sampson County Health Department Website and announced in the local newspaper. Public feedback will be requested.

All health department staff will receive a copy of the strategic plan as an e-mail attachment. Hard copies of the Strategic Plan will be available for public review at the health department or environmental health site.

Recognizing that a strategic plan provides a sense of direction, there is also the need to remain flexible to changing needs, resources and requirements. This plan will be reviewed and updated annually by the health department staff and the Board of Health.

Community Engagement with these efforts is needed and strongly encouraged. If you are interested in the health department initiatives, please contact: Wanda Robinson, Health Department Director- wrobinson@sampsonnc.com

This plan will be posted on the Sampson County Health Department website:
www.sampsonnc.com.

**SAMPSON COUNTY
BOARD OF COMMISSIONERS**

ITEM ABSTRACT

ITEM NO. 4 (b)

Meeting Date: December 3, 2018	<input type="checkbox"/>	Information Only	<input type="checkbox"/>	Public Comment
	<input type="checkbox"/>	Report/Presentation	<input type="checkbox"/>	Closed Session
	<input checked="" type="checkbox"/>	Action Item	<input type="checkbox"/>	Planning/Zoning
	<input type="checkbox"/>	Consent Agenda	<input type="checkbox"/>	Water District Issue

SUBJECT: Adoption of Market Schedule of Values and Present-Use Schedule of Values for 2019 Revaluation

DEPARTMENT: Tax Office

PUBLIC HEARING: No

CONTACT PERSON(S): Jim Johnson, Tax Administrator

PURPOSE: To comply with the statutory process for the adoption of schedule(s) of values that will be used for 2019 revaluation

ATTACHMENTS: Memorandum

BACKGROUND:

North Carolina General Statutes require that counties reappraise real properties at least once every eight years. The purpose is to assure all properties reflect current market value and to promote equity and fairness within the tax base. The date of Sampson County's last revaluation was January 1, 2011, and we have contracted with Pearson's Appraisal Service to complete the next reappraisal that will be effective January 1, 2019. As part of the reappraisal process, uniform schedules of values, standards, and rules to be used in appraising real property at its true value and at its present-use value are prepared and are sufficiently detailed to enable those making appraisals to adhere to them in appraising real property. The values, standards, and rules shall be reviewed and approved by the board of county commissioners before January 1 of the year they are applied.

The proposed schedule(s) were delivered on November 5th, and the required public hearing was held on November 26th. The schedule(s) may be adopted not less than 7 days after the public hearing and at least 21 days after presented.

RECOMMENDED ACTION OR MOTION:

Approve the recommended Market Schedule of Values and Present-Use Schedule of Values for 2019 Revaluation

Sampson County
Office of Tax Assessor
PO Box 1082
Clinton, NC 28329

Phone 910-592-8146

Fax 910-592-1227

TO: Ed Causey- County Manager
FROM: Jim Johnson- Tax Administrator
DATE: November 19, 2018
SUBJECT: Adoption of 2019 Reappraisal Schedule of Values

According to G.S. 105-286 each county must reappraise all real property at least once every eight years. Sampson County is scheduled for a reappraisal effective January 1, 2019.

According to G.S. 105-317 (c) (1) the proposed market value and present-use value schedule, standards and rules were delivered to the Sampson County Board of Commissioners on Monday November 5, 2018. A public hearing was scheduled for Monday November 26, 2018 at 10:00am. A notice was published to this effect in the Sampson Independent on Tuesday November 6, 2018. The notice also stated that the proposed market value and present-use schedule of values were available for public inspection at the Sampson County Tax Office.

After the adoption of the 2019 proposed market value and present-use value schedule, standards and rules a notice will be advertised in the Sampson Independent once a week for four weeks stating that the schedules have been adopted, are open for inspection and a taxpayer's right to appeal to the Property Tax Commission within 30 days of the first notice.

**SAMPSON COUNTY
BOARD OF COMMISSIONERS**

ITEM ABSTRACT

ITEM NO. 4(c)

Meeting Date: December 3, 2018	<input type="checkbox"/>	Information Only	<input type="checkbox"/>	Public Comment
	<input type="checkbox"/>	Report/Presentation	<input type="checkbox"/>	Closed Session
	<input checked="" type="checkbox"/>	Action Item	<input type="checkbox"/>	Planning/Zoning
	<input type="checkbox"/>	Consent Agenda	<input type="checkbox"/>	Water District Issue

SUBJECT: Social Services – Adoption of Modified Memorandum of Understanding between County and DHHS

DEPARTMENT: Social Services

PUBLIC HEARING: No

CONTACT PERSON(S): Edwin W. Causey, County Manager

PURPOSE: To consider adoption of a modified Memorandum of Understanding between the County and DHHS

ATTACHMENTS: Modification Agreement

BACKGROUND:

The North Carolina Department of Health and Human Services (DHHS) has provided a modified Memorandum of Understanding (MOU) for adoption by counties. As noted in the attached cover letter, modifications have been made in response to the feedback and information received from counties following the execution of the MOUs and DHHS’ ongoing analysis of performance data. The modifications move nine (9) additional performance measures from static to growth measures, for a total of 17 growth measures, five (5) of the measures have been updated to align with federal benchmarks, and one (1) of the measures has been removed. Also, in consideration of the impact of Hurricane Florence on county and state operations, the Department is modifying the MOUs to clarify that no performance improvement or corrective action will be initiated on the basis of this MOU for Fiscal Year 2018-2019. Ongoing oversight and monitoring activities will continue as they have in prior years.

RECOMMENDED ACTION OR MOTION:

Approve the Modified MOU



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor

MANDY COHEN, MD, MPH • Secretary

MICHAEL BECKETTS, MSW, MS, MEd • Assistant
Secretary

November 14, 2018

Dear County Manager and County Director of Social Services:

A Modification Agreement for the Memorandum of Understanding (MOU) covering Fiscal Year 2018-2019 is attached. These modifications have been made in response to the feedback and information received from counties following the execution of the MOU's and our ongoing analysis of performance data.

Specifically, the modifications to the MOU move nine (9) additional performance measures from static to growth measures, for a total of 17 growth measures, five (5) of the measures have been updated to align with federal benchmarks, and one (1) of the measures has been removed. The attachment to this letter describes each element that has been modified.

Further, given the impact of Hurricane Florence on county and state operations, the Department is modifying the MOUs to clarify that no performance improvement or corrective action will be initiated on the basis of this MOU for Fiscal Year 2018-2019. Ongoing oversight and monitoring activities will continue as they have in prior years.

DHHS is in the process of creating reports that will allow counties to pull the data for their county's performance on all measures. Additionally, we are creating a data validation process and will work collaboratively with counties to validate the performance data.

Attached is a list of the specific changes made in this Modification Agreement. All other parts of the MOU remain in effect and unchanged.

Thank you for your continued partnership to ensure the safety, health, and well-being of the children, families and adults served by these programs. As always, please contact me if you have questions, ideas or concerns.

Please return the signed Modification Agreement to Paris Penny by email at Paris.Penny@dhhs.nc.gov no later than December 17, 2018.

Sincerely,

A handwritten signature in blue ink that reads "M. Beckett".

Michael A. Beckett
Assistant Secretary for Human Services

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • OFFICE OF COMMUNICATIONS

LOCATION: 101 Blair Drive, Adams Building, Raleigh, NC 27603
MAILING ADDRESS: 2001 Mail Service Center, Raleigh, NC 27699-2001
www.ncdhhs.gov • TEL: 919-855-4840 • FAX: 919-733-9903

Modifications to the MOU

- 1) **Section 2.1:** Clarifying language that the Department will not take any actions under Attachment X on the basis of the MOU for fiscal year 2018-2019.
- 2) **Section 12.0:** Change to the Department's point of contact
- 3) **Section 14.0:** Clarifying language that for some performance measures, a County will be assessed based on an individualized growth measure and not the standard performance measure.
- 4) **Attachment I through IX - Performance Measurements:**
 - a. The format of the performance measurements has been modified. This modification creates three columns: Standard Measure, County Performance Measure and the Rationale and Authority. The Standard Measure is the statewide measure based upon federal or state law, rule or policy identified in the Authority. The County Performance Measure will be the county-specific target. For some performance measures, this county measure will be the same as the Standard Measure for all counties. For other performance measures this county measure will be the growth measure tailored to each individual county to be determined for next fiscal year's MOU.
 - b. Included with every performance measure is an expanded rationale giving additional background and context to the required measure as well as updated and additional citations to the authority from which the measure is derived.
 - c. Specific Attachments:
 - i. Attachment I: Child Welfare – Child Protective Services (CPS)
 - The two CPS performance measures have been changed to growth measures.
 - ii. Attachment II: Child Welfare – Foster Care
 - All Foster Care performance measures have been changed to growth measures.
 - We have deleted the Foster Care performance measure which read: "The County will document permanency goals for 95% of foster youth within 60 days of a child entering custody or for whom the county has placement authority."
 - We have amended the Standard Measure from 41% to 40.5% for the Foster Care performance measure which previously read: "The County will provide leadership for ensuring that 41% of children who enter foster care in a 12-month period are discharged to permanency within 12 months of entering foster care."
 - We have amended the Standard Measure from 9% to 9.1% for the Foster Care Performance Measure which previously read: "For all children who were victims of maltreatment during a twelve-month period, no more than 9% received a subsequent finding of maltreatment."
 - iii. Attachment III: Child Support
 - Each Child Support performance measure will remain growth measures.
 - In the first four Child Support performance measures, we have included in the text of the Standard Measures what is required under federal law.
 - The fifth Child Support performance measure remains unchanged.
 - iv. Attachment IV: Energy Programs
 - These performance measures will remain the Standard Measure for each county.

- The Rationale and Authority for these performance measures has been updated.
 - v. Attachment V: Work First
 - The first two of these performance measures have been changed to growth measures.
 - The remaining two performance measures will continue as the Standard Measure for all counties. The standard measure has been changed from 100% of applications and recertifications processed in the given timeframe to 95% of applications and recertifications processed in the given timeframe.
 - vi. Attachment VI: Food and Nutrition Services
 - These performance measures will remain the Standard Measure for each county.
 - We have amended the Standard Measure from 100% to 90% for the Food and Nutrition Services performance measure which previously read: “The County will ensure that 100% of Program Integrity claims are established within 180 days of the date of discovery.”
 - vii. Attachment VII: Adult Protective Services
 - Each Adult Protective Services measure has been changed to a growth measure.
 - viii. Attachment VIII: Special Assistance
 - Each Special Assistance measure has been changed to a growth measure
 - ix. Attachment IX: Child Care Subsidy
 - This performance measure will remain the Standard Measure for each county
 - The Rationale and Authority for this performance measure has been updated
- 5) Attachment X - Corrective Action**
- a. We have inserted a clarification that the Department will not initiate any actions set forth in Attachment X during this fiscal year.

**Modification Agreement to the
MEMORANDUM OF UNDERSTANDING (FISCAL YEAR 2018-19) BETWEEN
THE NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES
AND
SAMPSON COUNTY**

The parties agree to modify the MOU as set forth below. The terms and conditions set forth in the MOU are adopted by reference and fully incorporated as if set forth herein. The terms of this Modification Agreement supersede and replace any conflicting or contrary terms of the MOU.

2.1 Default and Modification

Performance Improvement/Corrective Action: Prior to the Department exercising its authority to withhold State and/or federal funding for a failure to satisfy the mandated performance requirements or failure to comply with the terms of this MOU, the steps set forth in Attachment X will govern. For this MOU covering Fiscal Year 2018-2019, the Department will not initiate any actions set forth in Attachment X on the basis of this MOU. Nothing contained in this MOU or Attachment X shall supersede or limit the Secretary’s authority to take any action otherwise set forth in N.C. Gen. Stat. § 108A-74.

12.0 Notice

The persons named below shall be the persons to whom notices provided for in this MOU shall be given. Either Party may change the person to whom notice shall be given upon written notice to the other Party. Any notice required under this MOU will only be effective if actually delivered to the parties named below. Delivery by hand, by first class mail, or by email are authorized methods to send notices.

For the Department of Health and Human Services, Division of Social Services

IF DELIVERED BY US POSTAL SERVICE	IF DELIVERED BY ANY OTHER MEANS
Michael Becketts, Assistant Secretary NC Department of Health and Human Services 2001 Mail Services Center Raleigh, NC 27699-2001	Michael Becketts NC DHHS Doretha Dix Campus, McBryde Building Phone: 919-527-6338 E-mail: Michael.Becketts@dhhs.nc.gov

14.0 Responsibilities of the County

The County hereby agrees that its responsibilities under this MOU are as follows:

- (1) The County shall adhere to the mandated performance requirements for each social services program as identified in Attachments I through IX. For a County Performance Measure designated in Attachments I through IX as a Growth Measure, the County's performance will be assessed based on its achievement of this Growth Measure. The County will ultimately work towards achievement of the Standard Measure.

**ATTACHMENT I — MANDATED PERFORMANCE REQUIREMENTS:
Child Welfare - CPS Assessments**

	Standard Measure	County Performance Measure	Rationale and Authority
1	The County will initiate 95% of all screened-in reports within required time frames	DHHS will work with the county to identify a performance measure for FY19-20 based on the prior fiscal year's performance.	<p>Ensure that allegations of abuse, neglect and dependency are initiated timely. The timeframes for initiating an investigation of child maltreatment are defined in state law as, immediately, within 24 hours, or within 72 hours depending on the nature and severity of the alleged maltreatment.</p> <p>NC General Statutes § 7B-302; 10A NCAC 70A .0105; NCDHHS Family Services Manual: Vol. 1, Chapter VIII: Child Protective Services, Section 1408 - Investigative & Family Assessments</p>
2	For all children who were victims of maltreatment during a twelve-month period, no more than 9.1% received a subsequent finding of maltreatment	DHHS will work with the county to identify a performance measure for FY19-20 based on the prior fiscal year's performance.	<p>Ensure that children who have been substantiated as abused, neglected or dependent are protected from further harm.</p> <p>National Standards for State Performance on Statewide Data Indicators established by the Children's Bureau to determine conformity with Title IV-B and IV-E of the Social Security Act and the Child and Family Services Review.</p>

**ATTACHMENT II— MANDATED PERFORMANCE REQUIREMENTS:
Child Welfare - Foster Care**

	Standard Measure	County Performance Measure	Rationale and Authority
1	The County will ensure that 95% of all foster youth have face-to-face visits by the social worker each month.	DHHS will work with the county to identify a performance measure for FY19-20 based on the prior fiscal year's performance.	Ensure the ongoing safety of children and the engagement and well-being of families. Child and Family Services Improvement Act of 2006 (Public Law 109–288, section 7) amending Section 422(b) of the Social Security Act (42 USC 622(b))
2	The County will provide leadership for ensuring that 40.5% of children who enter foster care in a 12-month period are discharged to permanency within 12 months of entering foster care.	DHHS will work with the county to identify a performance measure for FY19-20 based on the prior fiscal year's performance.	Ensure that children in out-of-home placements are able to obtain safe and permanent homes as soon as possible after removal from their home. National Standards for State Performance on Statewide Data Indicators established by the Children's Bureau to determine conformity with Title IV-B and IV-E of the Social Security Act and the Child and Family Services Review.
3	The County will provide leadership for ensuring that of children who enter foster care in a 12-month period who were discharged within 12 months to reunification, kinship care, or guardianship, no more than 8.3% re-enter foster care within 12 months of their discharge.	DHHS will work with the county to identify a performance measure for FY19-20 based on the prior fiscal year's performance.	Ensure that children existing foster care are in stable homes so that they do not re-enter foster care. CFSR: Safety Outcome 1: Children are, first and foremost protected from abuse and neglect. National Standards for State Performance on Statewide Data Indicators established by the Children's Bureau to determine conformity with Title IV-B and IV-E of the Social Security Act and the Child and Family Services Review.
4	The County will provide leadership for ensuring that of all children who enter foster care in a 12-month period in the county, the rate of placement moves per 1000 days of foster care will not exceed 4.1%.	DHHS will work with the county to identify a performance measure for FY19-20 based on the prior fiscal year's performance.	Ensure that children who are removed from their homes experience stability while they are in foster care. CFSR: Permanency Outcome 1: Children have permanency and stability in their living situations. National Standards for State Performance on Statewide Data Indicators established by the Children's Bureau to determine conformity with Title IV-B and IV-E of the Social Security Act and the Child and Family Services Review.

**ATTACHMENT III— MANDATED PERFORMANCE REQUIREMENTS:
Child Support**

	Standard Measure	County Performance Measure	Rationale and Authority
1	80% of paternities established or acknowledged for children born out of wedlock.	DHHS will work with the county to identify the County's performance measure for FY19-20 based on the County's performance for the preceding state fiscal year	<p>Paternity establishment is an essential component in obtaining and enforcing support orders for children.</p> <p>42 USC § 652(g)(1)(A) 42 USC § 658a(b)(6)(A) NCGS 110- 129.1</p>
2	80% of child support cases have a court order establishing support obligations.	DHHS will work with the county to identify the County's performance measure for FY19-20 based on the County's performance for the preceding state fiscal year	<p>A court order creates a legal obligation for a noncustodial parent to provide financial support to their children.</p> <p>42 USC § 652(g)(1)(A) 42 USC § 658a(b)(6)(B) NCGS 110- 129.1</p>
3	80% of current child support paid.	DHHS will work with the county to identify the County's performance measure for FY19-20 based on the County's performance for the preceding state fiscal year	<p>The current collections rate is an indicator for the regular and timely payment of child support obligations.</p> <p>42 USC § 652(g)(1)(A) 42 USC § 658a(b)(6)(C) NCGS 110- 129.1</p>
4	80% of cases received a payment towards arrears.	DHHS will work with the county to identify the County's performance measure for FY19-20 based on the County's performance for the preceding state fiscal year	<p>Collection of child support has been shown to reduce child poverty rates and improve child well-being.</p> <p>42 USC § 652(g)(1)(A) 42 USC § 658a(b)(6)(D) NCGS 110- 129.1</p>

5	The county will meet its annual goal of total child support collections.	DHHS will work with the county to identify the County's performance measure for FY19-20 based on the County's performance for the preceding state fiscal year	<p>Measuring total child support collections is an important measure of the program because it encompasses the strength of the laws, practices, and fiscal effort to determine its effectiveness.</p> <p>42 USC § 652(g)(1)(A) 42 USC § 658a(b)(6)(E) NCGS 110-129.1</p>
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**ATTACHMENT IV— MANDATED PERFORMANCE REQUIREMENTS:
Energy Programs**

	Standard Measure	County Performance Measure	Rationale and Authority
1	The County will process 95% of Crisis Intervention Program (CIP) applications within one (1) business day for applicants with no heat or cooling source.	The County will process 95% of Crisis Intervention Program (CIP) applications within one (1) business day for applicants with no heat or cooling source.	Ensure that eligible individuals in a household without a heating or cooling source receive relief as soon as possible. 42 USC §§ 8621-8630 10A NCAC 71V
2	The County will process 95% of Crisis Intervention Program (CIP) applications within two (2) business days of the application date for applicants who have a heat or cooling source.	The County will process 95% of Crisis Intervention Program (CIP) applications within two (2) business days of the application date for applicants who have a heat or cooling source.	Ensure that eligible households who are in danger of losing a heating or cooling source receive financial assistance to avert the crisis. 42 USC §§ 8621-8630 10A NCAC 71V

**ATTACHMENT V— MANDATED PERFORMANCE REQUIREMENTS:
Work First**

	Standard Measure	County Performance Measure	Rationale and Authority
1	The County will collect documentation from 50% of all Work-Eligible individuals that demonstrates completion of the required number of hours of federally countable work activities.	DHHS will work with the county to identify the County’s performance measure for FY19-20 based on the County’s performance for the preceding state fiscal year	Ensure that all work-eligible individuals are engaged in federally countable work activities. TANF State Plan FFY 2016 - 2019 NCGS 108A-27.2(10) NCGS 108A-27.6(1) NCGS 108A-27.13(a) NCGS 108A-27.14(a)-(b)
2	The County will collect documentation from 90% of two-parent families with Work Eligible individuals that verifies that they have completed the required number of hours of federally countable work activities.	DHHS will work with the county to identify the County’s performance measure for FY19-20 based on the County’s performance for the preceding state fiscal year	Ensure all work-eligible two-parent families are engaged in federally countable work activities for the required number of participation hours. TANF State Plan FFY 2016 - 2019 NCGS 108A-27.2(10) NCGS 108A-27.6(1) NCGS 108A-27.13(a) NCGS 108A-27.14(a)-(b)
3	The County will process 95% Work First applications within 45 days of receipt.	The County will process 95% Work First applications within 45 days of receipt.	Ensure that eligible families receive Work First benefits in a timely manner. TANF State Plan FFY 2016 - 2019 NCGS 108A-31
4	The County will process 95% Work First recertifications no later than the last day of the current recertification period.	The County will process 95% Work First recertifications no later than the last day of the current recertification period.	Ensure that Work First families continue to receive assistance and benefits without unnecessary interruption. TANF State Plan FFY 2016 - 2019 NCGS 108A-31

**ATTACHMENT VI— MANDATED PERFORMANCE REQUIREMENTS:
Food and Nutrition Services**

	Standard Measure	County Performance Measure	Rationale and Authority
1	The County will process 95% of expedited FNS applications within 4 calendar days from the date of application.	The County will process 95% of expedited FNS applications within 4 calendar days from the date of application.	Ensure all expedited FNS applications are processed within required timeframes. 7 CFR § 273.2 FNS Manual: Section 315 FNS Administrative Letter 1-2015
2	The County will process 95% of regular FNS applications within 25 days from the date of application.	The County will process 95% of regular FNS applications within 25 days from the date of application.	Ensure all regular FNS applications are processed within required timeframes. 7 CFR § 273.2 FNS Manual: Section 315 FNS Administrative Letter1-2015
3	The County will ensure that 95% of FNS recertifications are processed on time, each month.	The County will ensure that 95% of FNS recertifications are processed on time, each month.	Ensure that eligible families have their recertification benefits processed in a timely manner without interruption. 7 CFR § 273.14
4	The County will ensure that 90% of Program Integrity claims are established within 180 days of the date of discovery.	The County will ensure that 90% of Program Integrity claims are established within 180 days of the date of discovery.	Ensure allegations of fraud are addressed promptly. 7 CFR § 273.18

**ATTACHMENT VII— MANDATED PERFORMANCE REQUIREMENTS:
Adult Protective Services (APS)**

	Standard Measure	County Performance Measure	Rationale and Authority
1	The County will complete 95% of APS evaluations involving allegations of abuse or neglect within 30 days of the report.	DHHS will work with the county to identify the County's performance measure for FY19-20 based on the County's performance for the preceding state fiscal year	Responding quickly to allegations of adult maltreatment is essential to case decision-making to protect the adult. State law requires that a prompt and thorough evaluation is made of all reports of adult maltreatment. NCGS 108A-103
2	The County will complete 85% of APS evaluations involving allegations of exploitation within 45 days of the report.	DHHS will work with the county to identify the County's performance measure for FY19-20 based on the County's performance for the preceding state fiscal year	Protecting a disabled adult from exploitation is critical to ensuring their safety and well-being. State law requires a prompt and thorough evaluation is made of all reports of adult exploitation. NCGS 108A-103

**ATTACHMENT VIII— MANDATED PERFORMANCE REQUIREMENTS:
Special Assistance (SA)**

	Standard Measure	County Performance Measure	Rationale and Authority
1	The County will process 85% of Special Assistance for the Aged (SAA) applications within 45 calendar days of the application date.	DHHS will work with the county to identify the County's performance measure for FY19-20 based on the County's performance for the preceding state fiscal year	<p>Ensure eligible individuals receive supplemental payments to support stable living arrangements.</p> <p>Timely application processing of SAA benefits is essential to an individual's proper care and treatment.</p> <p>10A NCAC 71P .0604</p>
2	The County will process 85% of Special Assistance for the Disabled (SAD) applications within 60 calendar days of the application date.	DHHS will work with the county to identify the County's performance measure for FY19-20 based on the County's performance for the preceding state fiscal year	<p>Ensure eligible individuals receive supplemental payments to support stable living arrangements.</p> <p>Timely application processing of SAD benefits is essential to an individual's proper care and treatment.</p> <p>10A NCAC 71P .0604</p>

**ATTACHMENT IX— MANDATED PERFORMANCE REQUIREMENTS:
Child Care Subsidy**

	Standard Measure	County Performance Measure	Rationale and Authority
1	The County will process 95% of Child Care Subsidy applications within 30 calendar days of the application date.	The County will process 95% of Child Care Subsidy applications within 30 calendar days of the application date.	Ensure that families can place their children in quality child care without undue delay. North Carolina Child Care Development Fund State Plan

ATTACHMENT X— CORRECTIVE ACTION

For this MOU covering Fiscal Year 2018-2019, the Department will not initiate any actions set forth in Attachment X on the basis of this MOU..

1. Non-Compliance with performance requirements or terms of the MOU

- a. In the event a County Department of Social Services (County DSS)** fails to satisfy a performance requirement for three consecutive months or fails to comply with a term of this MOU, the Department will provide the County DSS with written notification identifying the relevant performance requirement or term and how the County DSS failed to satisfy it.
- b. Upon receipt of notification, the County DSS shall promptly provide the Department with written acknowledgment of receipt.
- c. If the County DSS does not agree that it failed to satisfy the performance requirement or comply with the terms of the MOU, it shall set forth, in writing, the basis for its disagreement. If the County DSS believes its failure to adhere to a mandated performance requirement or term of this MOU is due in whole or in part upon the failure of the Department to meet any of its responsibilities under this MOU or other external factors (i.e., limited court dates, continuances, etc.), the County DSS shall set forth in writing how the failure of the Department or external factors to meet its responsibility to the County DSS contributed to the inability of the County DSS to meet the mandated performance standard or other term of this MOU. This notice shall be received by the Department, along with all supporting documentation, within 10 business days of the County DSS' receipt of the Department's written notification of non-compliance.
- d. If written notice is received in accordance with subsection (c) of this section, the Department will provide the appropriate division director with the all documentation received. Following a review of all documentation, the division director will provide the county with a decision to proceed in developing the performance improvement plan or to rescind the notice of non-compliance.

2. Performance Improvement Plan

- a. The County DSS and Department shall work together to develop a performance improvement plan to address the non-compliance. The Parties will consider and address the County DSS's written disagreement with the identified non-compliance, if any, in the development of the performance improvement plan.
- b. The performance improvement plan shall include, at a minimum:
 - i. The role and responsibility of DHHS in providing support to the County DSS to address the non-compliance.
 - ii. The specific actions the County DSS will take to address the non-compliance and ensure ongoing compliance.
- c. The performance improvement plan shall be signed by the Department and the County DSS Director. A copy of the performance improvement plan will be sent to the chair of the DSS Governing Board.

3. Continued Non-Compliance

- a. In the event a County DSS continues to fail to satisfy a performance requirement or comply with the terms of the MOU for an extended period of time and is not meeting the terms of the performance improvement plan, the County DSS and the Department will enter into a corrective action plan, not to exceed a period of twelve months. An extended

period of time is defined as three consecutive months, or five months out of a twelve-month period measured beginning with the first month after which the performance improvement plan is signed.

- b. The corrective action plan shall include, at a minimum:
 - i. A strategy to ensure regular supervisory oversight of the social services program at issue;
 - ii. A detailed strategy to ensure the issue central to the non-compliance is addressed and corrected;
 - iii. A strategy to ensure program and case documentation is both sufficient and completed within time frames prescribed by law, rule or policy; and
 - iv. A plan for the continuous review of the corrective activities by both the County Director of Social Services, the County DSS Governing Board, and the Department.
- c. The corrective action plan will be signed by the Department and the County DSS Director. A copy of the corrective action plan will be sent to the Chair of the DSS Governing Board, the County Manager, and the Chair of the Board of County Commissioners.

4. Failure to Complete Corrective Action Plan/Urgent Circumstances

- a. In the event a County DSS fails to complete the corrective action plan or otherwise fails to comply with the terms of the corrective action plan, the Department may exercise its authority under the law, and this MOU, to withhold federal and/or state funding.
- b. In circumstances of continuous extended non-compliance or other urgent circumstances, the Secretary may also exercise her statutory authority to assume control of service delivery in the County pursuant to N.C.G.S. 108A-74.

** In the event the performance requirement or term of the MOU falls outside of the authority of the County DSS, the notification of non-compliance will be sent to the County, and all subsequent steps contained herein shall be followed by the County.

Effective Date: This Modification Agreement shall become effective upon the date of execution by both parties and shall continue in effect until June 30, 2019.

Signature Warranty: Each individual signing below warrants that he or she is duly authorized by the party to sign this Modification Agreement and to bind the party to the terms and conditions of this Modification Agreement and the MOU.

Sampson County

North Carolina Department of Health and Human Services

BY: _____
Name

BY: _____
Name

TITLE: _____

TITLE: _____

DATE: _____

DATE: _____

**SAMPSON COUNTY
BOARD OF COMMISSIONERS**

ITEM ABSTRACT

ITEM NO. 4 (d)

Meeting Date: December 3, 2018	<input type="checkbox"/> Information Only <input type="checkbox"/> Report/Presentation <input checked="" type="checkbox"/> Action Item <input type="checkbox"/> Consent Agenda	<input type="checkbox"/> Public Comment <input type="checkbox"/> Closed Session <input type="checkbox"/> Planning/Zoning <input type="checkbox"/> Water District Issue
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SUBJECT: Appointments

DEPARTMENT: Governing Body

PUBLIC HEARING: No

CONTACT PERSON: Vice Chairperson Sue Lee

PURPOSE: To consider appointments to various boards and commissions

Health Advisory Board

The following Health Advisory Board members will complete their first or second terms on the Board; each are eligible to serve another three-year term:

- Dr. Jeffrey Bell (dentist), first term ends 12/2018
- Dr. Elizabeth Bryan (physician), second term ends 12/2018
- Charlotte Harrell (pharmacist), first term ends 12/2018
- Linda Heath (nurse), first term ends 12/2018
- Harry Parker (commissioner), first term ends 12/2108

Sampson Regional Medical Center Board of Trustees

There are five trustee appointments which expire at the first of the year. In addition, one trustees member has resigned. Pursuant to their bylaws, the Board of Trustees has provided notice of such vacancies and provided two nominations for each vacant seat. See attached.

SAMPSON COUNTY HEALTH DEPARTMENT

Wanda Robinson
Complex Road, Suite 200
Health Director
28328

360 County

Clinton NC



MEMORANDUM

TO: Ed Causey, County Manager

FROM: Wanda Robinson, RN, Health Director

DATE: November 19, 2018

SUBJECT: Term Ending - Board of Health Members

This is being submitted to request appointments to the Board of Health.

The following Board of Health members will soon be ending their first or second terms on the board. The members listed below are eligible to serve another three year term.

Dr. Jeffrey Bell – Dentist 1st term ending 12/2018

Dr. Elizabeth Bryan – Physician 2nd term ending 12/2018

Charlotte Harrell – Pharmacist 1st term ending 12/2018

Linda Heath - Nurse 1st term ending 12/2018

Harry Parker – Commissioner 1st term ending 12/2018

Please call me if you have any questions concerning this matter.



607 Beaman Street • Post Office Drawer 260 • Clinton, NC 28329-0260
Telephone: (910) 592-8511 • Fax: (910) 590-2321

November 7, 2018



Office of Sampson County Manager
406 County Complex Road
Clinton, NC 28328

Dear Mr. Causey,

Sampson Regional Medical Center is notifying you that the Board of Trustees has five (5) active Board members whose six-year terms are expiring on December 31, 2018 and are up for reappointment. The Board of Trustees has one (1) Board member who resigned from the Board of Trustees effective September 24, 2018.

Board members with terms ending that are eligible for reappointment:

1. Curtis Barwick
2. Floyd Collins
3. Anne Faircloth
4. Telia Kivett
5. Alfred Smith

Board resignation:

6. Terry Spell

In accordance with Sampson Regional Medical Center's Governing Board By-Laws, the Board of Trustees shall nominate two (2) persons for each vacancy to occur by the expiration of the term and shall immediately certify said nominations to the Sampson County Board of Commissioners, who shall fill such vacancy by appointment. Therefore, the Sampson Regional Medical Center Board of Trustees submit the following persons for consideration of appointment for the six (6) vacancies:

1. Curtis Barwick
2. Floyd Collins
3. Anne Faircloth
4. Telia Kivett
5. Alfred Smith
6. David Parker

Alternate recommendations:

7. Grover Ezzell
8. Jimmy Moore
9. Kent Fann
10. Jeff Shipp
11. Tara Jackson
12. Nelson Powell

Thank you for your consideration. If you have any questions, please contact me at 910-590-8716.

Best regards,

A handwritten signature in black ink, appearing to read 'S. Howerton', written in a cursive style.

Dr. Shawn Howerton
Chief Executive and Medical Officer

**SAMPSON COUNTY
BOARD OF COMMISSIONERS**

ITEM ABSTRACT

ITEM NO. 5

Meeting Date: December 3, 2018	<input type="checkbox"/>	Information Only	<input type="checkbox"/>	Public Comment
	<input type="checkbox"/>	Report/Presentation	<input type="checkbox"/>	Closed Session
	<input type="checkbox"/>	Action Item	<input type="checkbox"/>	Planning/Zoning
	<input checked="" type="checkbox"/>	Consent Agenda	<input type="checkbox"/>	Water District Issue

SUBJECT: Consent Agenda

DEPARTMENT: Administration/Multiple Departments

ITEM DESCRIPTIONS/ATTACHMENTS:

- a. Approve the minutes of the November 5, 2018 meeting
- b. Approve the Department of Aging's submission of an application for United Way funding in the amount of \$20,000 for construction of wheelchair ramps
- c. Approve the Health Department's submission of an application for United Way funding in the amount of \$5,000 for the Breast and Cervical Cancer Control Program (BCCCP)
- d. Adopt a resolution authorizing the lease of agriculture tracts adjacent to the Detention Center for the period December 1, 2018 - December 31, 2019 to Mac Sutton for farming purposes
- e. Approve the Sampson Area Transportation Department's Drug and Alcohol Policy Addendum
- f. Approve tax refunds and releases as submitted
- g. Approve budget amendments as submitted

RECOMMENDED ACTION OR MOTION:

Motion to approve Consent Agenda as presented.

The Sampson County Board of Commissioners convened for their regular meeting at 6:00 p.m. on Monday, November 5, 2018 in the County Auditorium, 435 Rowan Road in Clinton, North Carolina. Members present: Chairman Clark Wooten, Vice Chairperson Sue Lee, and Commissioners Thaddeus Godwin, Jerol Kivett, and Harry Parker.

The Chairman called the meeting to order and acknowledged Vice Chairperson Lee, who then called upon County Manager Ed Causey for the invocation. Assistant County Manager Susan Holder then led the Pledge of Allegiance.

Approval of Agenda

Upon a motion made by Commissioner Godwin and seconded by Commissioner Parker, the Board voted unanimously to approve the agenda with the following changes: Resolution Supporting Request to Department of Transportation for Grant Dollars was added as Item 4 (q); Budget Amendment for Sampson County Schools Resource Officers was added as Item 4 (r).

Item 1: Presentations and Reports

Recognition of Retirees Service plaques were presented to Robert Balance and Jeffrey Culbreth in recognition of their years of service to the County.

Item 2: Planning and Zoning

R18-000001 The Chairman called the hearing to order and acknowledged Senior Planner Anita Lane, who reviewed a request to rezone approximately 1.26 acres located at 60 Olde Store Road from MRD-Mixed Residential District to C-Commercial, and the associated findings of fact. The Chairman opened the floor for public comments, and the following were received:

Anne Way: I'm here representing everyone who signed the petition opposing this rezoning. It's a tiny little residential neighborhood. It's a dead-end road. That property, if it were not a four-bay garage, it would be the third house down in this neighborhood. There are 15 houses in here. We're surrounded by farmland and all these little residential homes. This just happens to be a four-bay garage sitting there. In other words, if it were commercial, we would be having all this traffic coming through down a dead-end road. Most of us in there are well over 50 years old. Most of us are retired and most of us have lived there next to 30 years, and we do not want to see it zoned

commercial. It is farmland and it is just this one row of 15 houses. The commercial is out on (Hwy) 421, like she said, more than 400 ft from (Hwy) 421. That is one thing but down in our little neighborhood we don't want it. And there was, like you said, a petition handed out to the Planning Board and almost everybody in there signed it. I suppose they didn't pass it on to you.

Ruby Murfee: I live directly across the road from where this property is being rezoned. Directly across the road. I don't want to look at a garage, a body shop full of junk cars, or excuse me, to be repaired cars, vehicles and other equipment in that direction in my view from my front window and my front door. And it is not something that is going to be there for a little while, but this is going to be for a duration and on and on. And this is what I am going to have to look at. And I don't think I should have to put up with that or look at that more less.

Anne Way: We're just worried about property values going down and the decline of quality of life if it were zoned commercial in the middle of this residential area.

Pam Faircloth: My husband and I own JBF Properties. My husband and I bought some property there on Pope Road, and we lived in the house at 56 Olde Store Road, directly adjacent to that property. That house, our daughter currently lives in, is approximately 4,200 square feet. It's actually the largest house in the neighborhood. We owned and operated the body shop which was not a four-bay garage. It had a paint booth in it. It had a frame machine in it. We owned and operated that business there for 10-12 years. An opportunity arose for my husband and I to start PJ's Truck Bodies and Equipment Company. We started PJ's Truck Bodies and Equipment Company in 2002. The body shop was still being used at that time by two of my brother-in-laws. Our daughter owns a piece of property on Pope Road, that is staying in that residence right now. She is going to build a house there. We actually contacted Quintin and Summar Shirley, who own Tarheel Collision located in Dunn because they have a body shop. We lived there for over 20 years. We lived directly across from the Murfees. No one ever complained about the body shop. As far as their purchasing the house and 60 Olde Store Road, that's what the plan is and that's what we all agreed to. We've already come up with a purchase agreement.

Mr. Starling clarified that the Board should consider that any of the permitted uses in the commercial district could be conducted.

The hearing was closed. The Chairman noted that the request met the requirements of the Sampson County Land Use Plan and that he would vote based on that fact. Upon a motion made by Commissioner Kivett and seconded by Vice Chairperson Lee, the Board voted unanimously to approve the request to rezone approximately 1.26 acres located at 60 Olde Store Road from MRD-Mixed Residential District to C-Commercial, accepting the provided findings of fact and adopting the

following zoning consistency statement: *Whereas, in accordance with the provisions of North Carolina General Statute 153A-341, the Sampson County Board of Commissioners does hereby find and determine that the recommendation of the ordinance amendment R18-000001 is consistent with the goals and objectives of the Sampson County Land Use Plan and other long-range planning documents due to the fact that this property is located in close proximity of a major thoroughfare.*

R18-000002 The Chairman called the hearing to order and acknowledged Senior Planner Anita Lane, who reviewed a request to rezone approximately 5.37 acres located on Spivey's Corner Hwy from C-Commercial to R-Residential, and the associated findings of fact. The Chairman opened the floor for public comment and none were received. In the interest of transparency, County Attorney Joel Starling informed the Board that Planning Board member Ann Naylor, as they applicant, had recused herself from voting on the request. The hearing was closed. Upon a motion made by Commissioner Godwin and seconded by Vice Chairperson Lee, the Board voted unanimously to rezone approximately 5.37 acres located on Spivey's Corner Hwy from C-Commercial to R-Residential, accepting the provided findings of fact and adopting the following zoning consistency statement: *Whereas, in accordance with the provisions of North Carolina General Statute 153A-341, the Sampson County Board of Commissioners does hereby find and determine that the recommendation of the ordinance amendment R18-000002 is consistent with the goals and objectives of the Sampson County Land Use Plan for residential growth due to the fact this area is located within a portion of the county designated as a Residential Growth Area in Section 2 of the Sampson County Land Use Plan.*

Item 3: Action Items

Presentation of Market Schedule of Values and Present-Use Schedule of Values for 2019 Revaluation Tax Administrator Jim Johnson presented the Board with the proposed Market Schedule of Values and Present-Use Schedule of Values for 2019 Revaluation and then proposed that the Board schedule a public hearing for November 26, 2018, at 10 a.m. Upon a motion made by Chairman Wooten and seconded by Vice Chairperson Lee, the Board voted unanimously to schedule a public hearing for November 26, 2018 at 10 a.m. in the County Auditorium. [The hearing was later moved to the County Administration Building Conference Room, with appropriate postings performed to announce room change.]

Designation of Voting Delegation for NCACC Legislative Goals Conference Upon a motion made by Chairman Wooten and seconded by Vice Chairperson Lee, the Board voted unanimously to designate Commissioner Kivett as voting delegate for the NCACC Legislative Goals Conference scheduled on January 10-11, 2019.

Public Hearing – Naming of Private Roads The Chairman opened the hearing and called upon Assistant County Manager Susan Holder who reviewed the

recommendations for naming certain private roads. The floor was opened for public comments and none were received. The hearing was closed. Upon a motion made by Chairman Wooten and seconded by Commissioner Kivett, the Board voted unanimously to name private roads as follows:

PVT 1624 1259

Thunder Way Lane

Appointment - Library Board of Trustees Upon a motion made by Vice Chairperson Lee and seconded by Chairman Wooten, the Board voted unanimously to reappoint Cynthia Asante to the Library Board of Trustees. Upon a motion made by Vice Chairperson Lee and seconded by Chairman Wooten, the Board voted unanimously to appoint Karen Kinlaw to the Library Board of Trustees.

Item 4: Consent Agenda

Upon a motion made by Commissioner Kivett and seconded by Commissioner Godwin, the Board voted unanimously to approve the Consent Agenda as follows:

- a. Approved the minutes of September 10, 2018; September 24, 2018; October 1, 2018; and October 9, 2018 meetings
- b. Adopted a resolution proclaiming November as Native American Heritage Month (Copy filed in Inc. Minute Book ____ Page ____.)
- c. Approved the Designation of Applicant’s Agent and Applicant Disaster Assistance Agreement documents to apply for FEMA Public Assistance (Hurricane Florence) (Copy filed in Inc. Minute Book ____ Page ____.)
- d. Awarded the bid for disaster debris removal to the lowest responsive, responsible bidder, DRC Emergency Services LLC, in the amount of \$117.38 per ton, and authorized the County Manager to execute the contract for services
- e. Approved the Sampson County Local Government Holiday Schedule for Calendar Year 2019:

New Year’s Day	Tuesday, January 1, 2019
Martin Luther King, Jr. Birthday	Monday, January 21, 2019
Good Friday	Friday, April 19, 2019
Memorial Day	Monday, May 27, 2019
Independence Day	Thursday, July 4, 2019
Labor Day	Monday, September 2, 2019
Veterans Day	Monday, November 11, 2019
Thanksgiving	Thursday & Friday, November 28 & 29, 2019
Christmas	Tuesday, Wednesday & Thursday, December 24, 25, & 26, 2019

- f. Approved the Board of Commissioners Meeting Schedule for Calendar Year 2019 (all meetings to be held at 6:00 pm in the Sampson County Auditorium unless otherwise announced):

Monday, January 7, 2019	Monday, July 1, 2019
Monday, February 4, 2019	Monday, August 5, 2019
Monday, March 4, 2019	Monday, September 9, 2018
Monday, April 1, 2019	Monday, October 7, 2019
Monday, May 6, 2019	Monday, November 4, 2019
Monday, June 3, 2019	Monday, December 2, 2019

- g. Approved the contract between the Sampson County Department of Social Services and Sampson Area Transportation for non-emergency medical transportation (Copy filed in Inc. Minute Book ____ Page ____.)
- h. Approved the System Safety Plan for Sampson Area Transportation (Copy filed in Inc. Minute Book ____ Page ____.)
- i. Adopted the Procurement Policy Governing Purchases Made with Federal Money (Copy filed in Inc. Minute Book ____ Page ____.)
- j. Adopted the Conflicts of Interest and Gift Policy Governing Purchases Made with Federal Money (Copy filed in Inc. Minute Book ____ Page ____.)
- k. Approved the delinquent disabled veteran applications for Donald Allen and Butler James Kendrick, Jr.
- l. Approved tax refunds and releases as submitted:

#8594	Gerardo Eudeca	\$112.34
#8744	BJ Williamson, Inc.	\$536.96
#8743	Constance Williamson	\$151.56
#8735	Bobby Thornton	\$120.38
#8748	Michael Albee	\$168.21
#8754	Jennifer Grice	\$114.50
#8756	Fred Lenoir	\$170.42
#8757	Wendy Jordan	\$117.59
#8763	Janet Mesecha	\$196.44
#8765	Ashley Wilkins	\$192.61
#8770	Bobby Hill	\$249.09
#8766	Manuel Anselmo	\$272.30
#8752	Katrina Hemmingway	\$971.72
Tax Release	Adaline Group LLC	\$334.70
Tax Release	Curtis Dew, Jr.	\$376.68

- m. Approved budget amendments as submitted:

<u>EXPENDITURE</u>		<u>Finance</u>		
<u>Code Number</u>		<u>Description (Object of Expenditure)</u>	<u>Increase</u>	<u>Decrease</u>
29549430	562004	Rehabilitation	\$175,000.00	
29549430	519049	Administration	\$70,000.00	
<u>REVENUE</u>				
<u>Code Number</u>		<u>Source of Revenue</u>	<u>Increase</u>	<u>Decrease</u>
29034943	403614	Grant-NC Housing Finance	\$245,000.00	
<u>EXPENDITURE</u>		<u>Finance-Taylor's Bridge Fire Dept.</u>		
<u>Code Number</u>		<u>Description (Object of Expenditure)</u>	<u>Increase</u>	<u>Decrease</u>
23243410	581026	Taylor's Bridge Fire Department	\$46,000.00	
<u>Code Number</u>		<u>Source of Revenue</u>	<u>Increase</u>	<u>Decrease</u>
23043426	499900	Fund Balance Appropriated	\$46,000.00	
<u>EXPENDITURE</u>		<u>Finance</u>		
<u>Code Number</u>		<u>Description (Object of Expenditure)</u>	<u>Increase</u>	<u>Decrease</u>
11141300	599900	Disaster Relief	\$350,000.00	
61971000	544000	Contract Services	\$200,000.00	
<u>REVENUE</u>				
<u>Code Number</u>		<u>Source of Revenue</u>	<u>Increase</u>	<u>Decrease</u>
11033010	402605	FEMA Funds	\$350,000.00	
61937100	408900	Miscellaneous Revenue	\$200,000.00	
<u>EXPENDITURE</u>		<u>Finance</u>		
<u>Code Number</u>		<u>Description (Object of Expenditure)</u>	<u>Increase</u>	<u>Decrease</u>
05558310	581000	Transfer to State Agency	\$22,910.00	
<u>REVENUE</u>				
<u>Code Number</u>		<u>Source of Revenue</u>	<u>Increase</u>	<u>Decrease</u>
05435831	409906	FBA Youth Shelter	\$8,200.00	
05435831	409905	FBA Psychological	\$500.00	
05435831	409900	FBA Administration	\$8,439.00	
05435831	409902	FBA Teen Court Restitution	\$4,266.00	
05435831	409903	FBA Teen Inspire	\$1,505.00	
<u>EXPENDITURE</u>		<u>Environmental Health</u>		
<u>Code Number</u>		<u>Description (Object of Expenditure)</u>	<u>Increase</u>	<u>Decrease</u>
12551810	526200	Department Supplies	\$95,660.00	
<u>REVENUE</u>				
<u>Code Number</u>		<u>Source of Revenue</u>	<u>Increase</u>	<u>Decrease</u>
12535181	404000	State Assistance	\$95,660.00	

<u>EXPENDITURE</u>		<u>Cooperative Extension</u>		
<u>Code Number</u>		<u>Description (Object of Expenditure)</u>	<u>Increase</u>	<u>Decrease</u>
04449500	529900	Miscellaneous Exp.	\$500.00	

<u>REVENUE</u>				
<u>Code Number</u>		<u>Source of Revenue</u>	<u>Increase</u>	<u>Decrease</u>
04034950	408900	4-H Programs	\$500.00	

<u>EXPENDITURE</u>		<u>Emergency Management</u>		
<u>Code Number</u>		<u>Description (Object of Expenditure)</u>	<u>Increase</u>	<u>Decrease</u>
11243300	526200	Departmental Supplies	\$4,962.00	

<u>REVENUE</u>				
<u>Code Number</u>		<u>Source of Revenue</u>	<u>Increase</u>	<u>Decrease</u>
11033839	408900	Miscellaneous Revenue	\$4,962.00	

(Board of Health Items)

- n. Adopted Fiscal Services Policy and Procedures (Copy filed in Inc. Minute Book ____ Page ____.)
- o. Adopted revised Operating Procedures of Board of Commissioners sitting as Board of Health (Copy filed in Inc. Minute Book ____ Page ____.)
- p. Approved new Lab Corp and State Lab Fees
- q. (Walk On) Resolution Supporting Request to Department of Transportation for Grant Dollars (Copy filed in Inc. Minute Book ____ Page ____.)
- r. (Walk On) Budget Amendment for Sampson County Schools Resource Officers (Copy filed in Inc. Minute Book ____ Page ____.)

Item 5: Board Information

The Board was provided the following items for information only:

- a. UNC School of Government - Elected Officials Needs Assessment Invitation
- b. Sampson County Convention and Visitors Bureau Resolution Supporting Agriculture

(Board Information, Board of Health)

- c. 2018 State of the County (Health) Report
- d. Health Advisory Board Minutes, August 21, 2018

County Manager's Reports

County Manager Ed Causey placed emphasis on Item 4 (d), the debris removal contract which was awarded to DRC Emergency Services, LLC. He noted that the contract could be signed immediately and that the services thereof could begin as soon as five days. He also noted that as part of the after-action review of Hurricane Florence disaster response that all county employees were given the opportunity to provide feedback, and that there were 40 responses. Reviewing the responses showed that overall the County's response was good, however, there is room for improvement. Therefore, staff will be working to improve emergency response overall, and will include each department, and the Sampson County and Clinton City school systems. He noted that the Board will be provided a revised Emergency Operations Report by March 1, 2019, which will highlight suggested operational changes. Prompted by Commissioner Parker's request for a debris removal update, Mr. Causey informed the Board that the State was conducting debris removal on the rights-of-way of State roads.

Public Comments

The Vice Chairperson opened the floor for comments and the following were received:

Linda Bradsher: I am representing the people down on Mossy Log on the Black River. I did live at 111 Ride Safe Lane, in Harrells, which I can't live there anymore because my house is washed away. All of our citizens that live in Mossy Log, everyone had horrific damage. And our street looks like a war zone with all the debris and everything. I've been told that since this is a private road not kept up by the State, that they would have to have a private contractor come in and take that debris away. That happened last year, well, two years ago in Matthew and it took a year almost to get all the debris out from our development. I'm just wondering if it's going to take another year to get it out?

The Chairman expressed sympathy to the Mossy Log residents and acknowledged Mr. Causey, who reviewed the debris removal information shared earlier, noting that county-wide debris removal would begin as soon as 5 days.

Linda Bradsher: We were charged \$50 to have our power cut back on and we had to get a permit to redo our houses. I understand that legislation passed that ruling that you would not have to pay a fee for that particular thing. The County did charge us and now they say in order to get your money back you've got to fill out a form, you've got to the zoning commission, or wherever over there in that building back there, to get your money. But the people that are not here tonight, do they get their money back if they do not know about it?

The Chairman ensured Ms. Bradsher that the County would fully abide by the terms of Section 5.16 of the 2018 Hurricane Florence Disaster Recovery Act (Senate Bill 3) and provide refunds to all qualified persons.

Linda Bradsher: Now I understand from a guy at FEMA that there are monies available to the citizens of the County that have been flooded that can get help through the County.

Assistant County Manager Susan Holder clarified that the County was hosting the Disaster Recovery Center, where FEMA and SBA agents were accepting applications for individual assistance through their programs and noted that the County had no control over the federal funding used in those programs.

Linda Bradsher: Do you ever purchase property? I have had my house totally flooded twice and right now it is totally unlivable and I don't have the money to replace it. I cannot get any money from FEMA. I cannot get any money from anybody. So, what will you do about my taxes on that piece of property?

The Chairman noted that the Board would take that question under advisement and provided direction once advised.

Linda Bradsher: Everybody where we live has the same problem. We have either been flooded twice or three times. So, there aren't any monies available individually for help?

The Chairman stated there were not any County monies allocated for individual assistance. Ms. Holder noted that said citizens may have been mistaking the United Way program as a County program and noted that United Way accepted donated monies after the storm and was managing the distribution of those monies; however, there were no County monies allocated.

Linda Bradsher: I cannot afford to redo my house. I simply do not have the means. I'm an old woman. You know, if you can't get help what good can you do. I'm not the only one. There are people sitting right there on that back row that are in the same situation. They all live down there where I live. You're empathizing is okay, but it doesn't help me get through my crisis. And Mr. Parker, I have a question for you. Have you been to Mossy Log?

Chairman Wooten reminded Ms. Bradsher of the Public Comment Rules and Procedures. Ms. Bradsher provided no further comments.

Janet Hosey: You may remember that I was here last month pleading with the debris pickup in Ivanhoe after the flood. My heart certainly goes out to those folk in Mossy

Log. But, I am here to say thank you for the debris pickup to Mr. Causey and to this man, for whatever efforts they had to do at NCDOT. It really has made a difference in our spirits just to have that debris moved away. I wanted to publicly thank you. I feel sorry for the people at Mossy Log. I also wanted to make a note from the last meeting. The NCDOT man said about American Materials being in Harrells. And I want to make sure that you understand that American Materials has been in Ivanhoe since 1999. I just wanted to make you aware that we are a small community, unincorporated and we don't have a mayor, but we've got a lot of thriving businesses in our little community. Some fourth generation. Black River Organic Farm, we've got several blueberry farms, we've Johnson Lumber Products, and of course you know we've got poultry farms, but they're all in Ivanhoe and I hope that we get a little more recognition. And I noticed in the Sampson Independent when they had the road closure notices on the front page, I noticed they were putting Ivanhoe Road in Harrells. Ivanhoe Road is in Ivanhoe, it's not in Harrells. And I wanted to ask what we can do about the recognition of Sampson County. I watch the news for the weather on WECT and WWAY and they put up the map and there's that big triangle county where there's nothing in between. They have Kenansville, they've got Burgaw, they've got Fayetteville, but they just show that triangular shape on the weather map on both of those stations. And Sampson County is not recognized whatsoever. They don't have Clinton in there or anything.

The Chairman made Ms. Hosey aware that the County does not control the weather channels nor what is aired on those channels. He then noted that Public Information Officer Susan Holder was on several weather stations during the Hurricane Florence storm event providing updates for county residents. Ms. Holder then informed Ms. Hosey that the National Weather Service - Raleigh website provided online county specific weather information.

Janet Hosey: This came in the mail today. It's from Bladen Community College. We live in Sampson County. I don't know why we're getting Bladen County mail and we have never gotten a Sampson Community College brochure.

Closed Session - GS 143-318.11(a)(4) Matters Related to Industry Location

Upon a motion made by Vice Chairperson Lee and seconded by Chairman Wooten, the Board voted unanimously to go into closed session pursuant to GS 143-318.11(a)(4) for matters related to industry location. In Closed Session, Economic Development Director John Swope discussed a potential industry with interest in Sampson County. Upon a motion made by Chairman Wooten and seconded by Commissioner Kivett, the Board voted unanimously to come out of Closed Session.

Recess to Reconvene

Upon a motion made by Chairman Wooten and seconded by Vice Chairperson Lee, the Board voted unanimously to recess to reconvene on November 26, 2018, at 10 a.m. in the County Auditorium for the public hearing for the schedule of values.

Clark H. Wooten, Chairman

Susan J. Holder, Clerk to the Board

Program Funding

Request Application



United Way of Sampson County

Sponsoring Agency: _____

Program Name: _____

Mailing Address: _____

Phone/email _____

Funding Request for 2019 Program Funding \$ _____

CERTIFICATION

The requested amount herein was considered and approved for submission by the

_____ Board of Directors at a meeting on _____
(Sponsoring Agency) (date)

Our fiscal year is _____ to _____
(date) (date)

Management and the Board of Directors have read and are prepared to discuss this Funding Request.

We acknowledge that funds allocated by United Way are contributed dollars and that fair and full disclosure is required in the completion of this Funding Request Application and all other requested information.

Executive Director ~ Name

Board President or Authorized person Name

Volunteer Title

Signature - Executive Director

Signature ~ Board President or Authorized Person

Date

Date

REQUIRED: Specific use of UWSC funding. (Use only space provided)

[Empty rectangular box for text entry]

Organization's Governance & Oversight

Organizations *not currently* receiving UWSC funding *must* complete the following.

Board Meetings

1. How many meetings were scheduled during the last fiscal year?
2. How many times did the Board meet during the last fiscal year?
3. At how many of the Board meetings did you have a quorum during the last fiscal year?
4. Are detailed reports of agency activities provided to the board on a regular basis? (Y/N)

Current Demographics of Board of Directors

Male	_____	Black	_____	_____
Female	_____	White	_____	_____
Hispanic	_____	Other	_____	

Fiscal Oversight

1. Briefly describe the system used for safeguarding against unauthorized or improper disbursement of funds, (i.e. two signatures required on checks).

National/State Affiliations

1. Are you nationally and/or state affiliated? (Y / N)? _____ YES _____ NO
2. Does the organization adhere to national standards? _____ YES _____ NO

Please briefly describe those national standards.

ORGANIZATION OVERVIEW

Organizations *not currently* receiving UWSC funding *must* complete the following.

1. Describe the organization's mission.

2. List any organizations or programs with whom your organization has collaborated to provide joint programming, and briefly describe the type(s) of collaboration (co-sponsorship of events, seminars, community issues, etc.) and the results of those collaborations.

5. Does the organization employ paid staff?

_____ YES _____ NO

6. Does the organization have job descriptions for all staff?

_____ YES _____ NO

PROGRAM OVERVIEW

Program Name: _____

Program Director's name: _____

1. Provide a *brief* program description and goals.

2. What social/human welfare issue(s) does this program address?

3. What is the program's targeted population, capacity, and number of people to be served? Is it at capacity?

4. Do you have a waiting list for this program? If so, how many are on the waiting list, and what is the expected waiting time before your program will be able to provide services to them?

5. What are the eligibility requirements for participating in this program?

6. What fees are charged for services, and what percent of participants pay fees?

7. What is the long range plan for insuring financial stability for the program?

8. What impact would UWSC funding have on this program's outcomes?

9. To what extent are volunteers utilized in this program?

10. Are reference/background checks complete on all volunteers? _____ YES _____ NO

11. What type of training do volunteers receive? Are they evaluated on a regular basis?

**MEASURING PROGRAM EFFECTIVENESS
OUTCOMES LOGIC MODEL**

**PROGRAM
NAME** _____

Please submit a logic model for the program for which UWSC funding is being requested. **Do Not** report on program outcomes in this model. Present in narrative format.

INPUTS	ACTIVITIES	OUTPUTS

**MEASURING PROGRAM EFFECTIVENESS
OUTCOMES FRAMEWORK**

**PROGRAM
NAME:** _____

Complete an outcome measurement framework for the program for which UWSC funding is being requested.

OUTCOMES	INDICATORS	DATA SOURCE	DATA COLLECTION METHOD

OUTCOMES MEASUREMENT RESULTS

Program Name: _____

1. Viewing your outcomes as your program's goals, how many participants do you estimate will achieve the outcome results that you have targeted for the funding cycle requested?
2. How often do you measure this program's outcome results? (Daily, Monthly, Quarterly, Semi-Annually, etc)
3. Who is responsible for implementing, collecting, and reviewing the outcomes/program effectiveness information for this program? (i.e. Committee, individuals with specific responsibilities, etc.)
4. What level of involvement does the Board of Directors have in the process of program outcome measurements and implementation?
5. What changes have been planned or made to the program as a result of the outcome measurements?

AGREEMENT OF AFFILIATION

BETWEEN

Sampson County Department of Aging

with its office located
405 County Complex Road; Suite 140, Clinton, NC 28328

(Hereinafter referred to as the Agency)

And

UNITED WAY OF SAMPSON COUNTY, INC.
(Hereinafter referred to as United Way)

This agreement is entered into in the mutual beliefs of the above named parties that: (a) the county of Sampson, North Carolina forms the basis for our community--wide efforts and that participation from all areas of our community is essential; (b) a effective way of providing maximum resources for health and human care services: and (c) it is the consideration of the total health and human care needs of our community, development of volunteers and our commitment to bring about a delivery system according to open, rational and non-discriminatory procedures which form the basis for this working relationship.

Both United Way and the Agency Agree, That Each

1. Has an active, responsible, and voluntary governing body, with representation from diverse elements in the community, which exercises effective control over the operations of the organization;
2. Faithfully adheres to a policy of nondiscrimination with respect to age, sex, race, religion, and national origin in connection with the makeup of its governing body, committees, and staff and the persons whom it directly and indirectly serves;
3. Has been ruled exempt from taxation under Section 501(c) (3) of the Internal Revenue code as well as corresponding provisions of other applicable state, local, or foreign laws or regulations;
4. Uses ethical methods of publicity and promotion as established by national professional public relations associations. (For example, see attached "Code of Professional Standards" adopted by the Public Relations Society of America.);

5. Issues an annual report to the public, including a financial report that complies with the "Standards of Accounting and Financial Reporting for Voluntary Health and Welfare Organizations" or similar standards that are recognized and approved by United Way of America's Board of Governors.

B The Agency Agrees

1. To provide a needed, non-duplicated service of education, prevention, remediation and/or contribution in the field of health, welfare or recreation within our community/county;
2. To support and assist the United Way in the annual fund raising campaign;
3. To engage in an effective public relations program in which the objectives, services and accomplishments of the Agency and the United Way support of such services are adequately publicized; to cooperate with and assist the United Way in its public information programs; and to make use of the United Way logo on letterheads and at all of its public functions;
4. To submit its proposed annual budget and budget request approved in advance by its governing board and in the format prescribed by United Way to the United Way within the agreed upon time schedule and to cooperate with the Allocations Committee in accordance with its review procedures;
5. To cooperate with the United Way planning committee in its efforts to coordinate human care services in the community and cooperate in the conduct of such studies as may be needed in support or planning, Allocations, Communications and/ or Fund Raising;
6. To conform with the united Way audit policy as approved by the Board of Directors on 10/30/91 as revised 2/23/94. A copy of the audit, financial statement, or IRS form 990 should b submitted of the United Way within four months after the Agency's fiscal year;
7. To submit quarterly financial reports to the United Way on the forms provided for that purpose that accurately reflect the Agency's current financial status;
8. To submit for prior approval and discussion by the United Way, all proposals for supplementary fundraising efforts as outlined in the United Way Policy On

Supplementary Fund Raising;

9. To submit for prior approval and discussion by United Way all proposals for new programs and/or expansion of a programs that may require United Way financial support now or in the future; and

10. To realize and utilize all possible operating income that might be secured through the Agency's normal activities, e. g. , fees for service, interest, non-designated contributions and membership fees, while at no time paying a commission in connection with fund raising.

C. The United Way Agrees

1. To respect the essential autonomy of the individual Agency and the authority of its Board of Directors to determine its own policies and to manage its own service;
2. To develop its objectives for the annual fund raising campaign with due regard for the requirements of all anticipating agencies, fund raising realities and other pertinent considerations to raise the maximum funds. To use its best efforts to achieve the campaign objectives and to exceed those objectives whenever possible;
3. To provide a reasonable, comprehensive and courteous review of each Agency;
4. To allocate contributed funds in a manner which recognizes the relative need among services provided by the Agencies;
5. To pay the Agency on the basis of the annual approved allocation and campaign collections;
6. To act as a steward of contributed funds by informing the public of the allocations; and
7. To submit its annual financial records to an audit by a Certified Public Accountant, a copy of which shall be made available for inspection by the Agency upon request.

D. Enforcement and Termination

1. This agreement may be revoked by either party by such party giving written notice to the other party at least ninety (90) days prior to the United Way annual fund raising drive. The party to whom notice of termination

raising drive. The party to whom notice of termination is given shall have the right to a hearing before the governing board of the other party; and

- 2. The United Way reserves the right to issue a "Notice of Exception" to an agency exhibiting substantial problems or deficiencies as identified by the United Way in any area of operation. Said Notice, signed by the originating allocations review committee, shall describe such problem or deficiency and explain the nature of contraction to United Way policy or understanding. The Agency shall be given one (1) year to show substantial progress in eliminating the problem or deficiency.

If substantial progress has not been made during the year, a "Notice of Probation" will be issued. All officers and executives of the Agency, as well as, any state or national office to which the Agency is affiliated shall receive a copy of the "Notice of Probation". If the problem or deficiency noted has not been resolved to the satisfaction of United Way by the end of the second year, the Agency's affiliation with the United Way will be terminated. If the Agency requests a meeting, the United Way will arrange for a panel of representative board members and will insure the members of the originating allocations committee group attend the meeting.

In witness of approval of this Agreement of Affiliation, the undersigned have affixed their signatures:

Sampson County Department of Aging

AGENCY

BY:

CHAIRMAN / PRESIDENT OF BOARD OF DIRECTORS

BY:

CHIEF EXECUTIVE OFFICER OR SECRETARY

DATE

UNITED WAY OF SAMPSON COUNTY, INC.

BY:

PRESIDENT OF BOARD OF DIRECTORS

BY:

VICE PRESIDENT / SECRETARY / TREASURER

DATE

United Way of Sampson County Audit Policy

The following Audit Policy was adopted by the United Way Board of Directors at a meeting held on October 30, 1991, and was revised on February 23, 1994, October 27, 1000, and February 7, 2005.

The financial records of the affiliated agencies shall be submitted and examined by the United Way of Sampson County, Inc. (UWSC) at least annually. Each agency should comply with the following set of rules when submitting financial reports to United Way, however, in no case should the reports be in any less detail than that which is required by each agency's governing board.

Failure to adhere to United Way of Sampson County's financial standing guidelines may restrict or prohibit funding of an agency and/or program.

- (A) If the total support and revenue to the agency from UWSC exceeds \$35,000 for the fiscal year, the agency shall submit a copy of their financial statement including both a balance sheet and income/expense statement in nothing less than an audit format and performed by a certified public accountant (CPA). Information as to the total support and revenue and all of the fundraising activities including the kind and amounts of all funds raised, costs and expenses incidental thereto, allocation and disbursement of funds raised, changes in fund balances, notes to the audit and opinion as to the fairness of the presentation by the accountant shall be included.
- (B) If the total support and revenue to the agency from UWSC exceeds \$10,000, but is less than or equal to \$35,000 for the fiscal year, the agency may select one of these options:
 - (1) A copy of their financial statement, audited by a certified public accountant as defined in (A) above, or
 - (2) A copy of their financial position (balance sheet and income statement) presented in a review format by a CPA.
- (C) If the total support and revenue to the agency from UWSC is less than or equal to \$10,000 for the fiscal year, the agency may select one of these options:
 - (1) A copy of the financial statements audited by a certified public accountant as defined in (A) above; OR
 - (2) A copy of a review performed by a certified public accountant as defined in (B) above; OR
 - (3) A copy of a compilation performed by an independent public accountant accompanied by a statement signed by three members of the organization's governing board that to the best of their knowledge and belief the financial reports are true and correct, OR
 - (4) A copy of your completed current year IRS Form 990 accompanied by a statement signed by three members of the organization's governing board that to the best of their knowledge and belief the financial report is true and correct. **In addition, the organization must provide an income statement, balance sheet and prior six months of bank statements.**
- (D) Annual financial statements shall be submitted to United Way within four months after the agency's fiscal year.

BY: _____
Sampson County Department of Aging
AGENCY

BY: _____
CHAIRMAN/PRESIDENT OF BOARD OF DIRECTORS

BY: _____
CHIEF EXECUTIVE OFFICER OR SECRETARY

DATE

UNITED WAY OF SAMPSON COUNTY, INC.

BY: _____
PRESIDENT OF BOARD OF DIRECTORS

BY: _____
VICE PRESIDENT/SECRETARY/TREASURER

DATE

POLICY ON SUPPLEMENTAL FUND RAISING BY AFFILIATED

PREAMBLE

The United Way of Sampson County, Inc. (hereinafter referred to as United Way) and our affiliate agencies (hereinafter referred to as agencies) are jointly concerned with the total effect of all fund raising activities conducted throughout the Sampson County area by community service organizations. In order for the United Way to maintain its integrity, it must provide a clear set of guidelines for member agencies to follow when seeking additional (non-United Way) financial support. These guidelines for the conduct of supplemental fund raising activities are designed to maximize yield, minimize competition, and avoid excessive intrusion on the donor community.

In an environment of limited resources and expanding needs, the United Way recognizes the value to participating agencies and to the community served of expanded supplemental resources generated by activities which do not conflict with the United Way. The United Way endorses the concept that good management practices dictate that agencies explore all ethical avenues for earning and obtaining multiple sources of funding to provide human care services. However, the methods used by the agencies to approach these sources should be in harmony with the United Way's fund raising principle that there will be one (1) annual, comprehensive effort for contributions from the community.

It is therefore essential that supplemental fund raising activities be conducted in a manner which would not adversely affect the United Way annual campaign or the member agencies abilities to provide human care services.

STRUCTURE

The chairman of the allocations committee will be responsible for forming a standing subcommittee which will be called the supplemental income producing subcommittee. Membership may include representation from the executive committee to include the treasurer and from the planning committee. This subcommittee will provide a forum for careful consideration, encouragement, consultation and advice on agency income producing proposals. This subcommittee will also serve as a clearing house for gathering resource information and scheduling, as appropriate, to help prevent competing activities.

Agencies are encouraged to have preliminary discussion with United Way well in advance of commitments being made regarding any proposed fund raising activity. Agencies making proposals will submit a written request to the supplemental income producing subcommittee or the allocations committee chairman at least sixty (60) days

prior to the scheduled commencement dated, specifying the activity, the area and population to be covered, the resource development method to be employed, expected completion date and anticipated revenues. Annual activities will be discussed prior to the initial event and then again only if significant changes occur.

All supplemental income received by agencies will be considered part of the total agency budget and will be reviewed by the allocations committee.

III. DEFINITION

"Income producing activity" is any activity by or in behalf of a participating agency that produces income for any purpose in addition to and other than the support of United Way.

ACTIVITIES

Agency income producing activities as covered in these guidelines fall within three (3) major groups: (A) Self-support activities which do not require prior approval of United Way; (B) Activities which require consultation and prior approval by United Way; and (C) Activities which are generally inappropriate.

SELF-SUPPORT ACTIVITIES NOT REQUIRING PRIOR UNITED WAY APPROVAL

Certain types of revenues are encouraged by the United Way and do not require approval. Such operating revenue, however, must be reflected in the agency's annual operating budget.

1. Membership - All types of membership programs wherein the member becomes involved and identified with the agency and being a part of an active constituency.
2. Program Service Fees - Fees related to participating in agency programs and services. establishment of appropriate fees are entirely within the province of the agency's Board of directors.
3. Rental Fees - Fees for the use of agency facilities are appropriate sources of agency revenue.
4. Grants-In-Aid - Private and public foundations, corporations and individuals, government agencies and private organizations that are in the business of being grant makers to the extent that these funds have no implications for United Way funding.
5. Purchase of Service Contracts - Reimbursements

from private and public agencies for services rendered on a contractual basis.

6. Bequests and Memorials - Endowments, trusts, honor gifts, scholarships, real property, and other forms of deferred or donor restricted or unrestricted giving.
7. Investment Income - Agencies having endowment funds are encouraged to manage such funds in a manner consistent with the agency's endowment policy and donor's wishes.
8. Out of Area Contributions - Agencies rendering significant services outside the United Way of Sampson County defined community are expected to develop appropriate amounts of contribution support from such areas.
9. Sales of Services or Manufactured Products - Agencies able to derive income from the sale of services, salvaged materials, or manufactured items as a part of their service program are encouraged to develop income from these sources.
10. Contributed Equipment, Materials, or Services - which do not diminish the support of the annual United Way campaign, and for which no general appeal is made between September 1 and November 1.

ACTIVITIES WHICH REQUIRE CONSULTATION AND PRIOR

APPROVAL BY UNITED WAY

1. Sustaining Membership - Sustaining membership is an affiliation with an agency for the primary purpose of financially supporting the aims of the organization without expectation of use of services or participating in the activities of the agencies. Those approached for membership should have a genuine personal interest in a relationship with the agency.
2. Entertainment - Motion pictures, concerts, stage plays, celebrity show, circuses, ice show, variety show, amateur nights, rodeos, etc.
3. Meals and Refreshments - Breakfast, lunches, dinners, picnics, wine-tasting, cocktail parties, teas, etc.
4. Shows - Painting, photography, antiques, home and garden, hobbies, flower arranging, pets, boats, autos, sporting goods, program activities, fashions, etc.
5. Public Sales - Income from value received sales of products directed toward the community-at-large.

6. Sports Tournaments - Golf, bowling, tennis, bridge, baseball, basketball, football, automobiles, airplanes, boats, horses, etc., directed toward the general public.
7. Social Activities - Dances, tours, charter trips, skating parties, excursions, etc., directed toward the general public.
8. Solicitations of Agency Board Members, Volunteers and Staff only.
9. Capital Fund Raising Campaigns.
10. Any and all other forms of fund raising not mentioned above but which might occur during or immediately preceding the United Way annual campaign.

C. ACTIVITIES WHICH ARE GENERALLY INAPPROPRIATE

1. Commercial Promotions - wherein a for-profit business or organization is given responsibility for raising funds for the agency.
2. Activities - seeking charitable gifts in which the persons being solicited are not likely to be identified by the agency or its representatives such as those names received from a purchased mailing list.
3. Solicitation - from companies which are not presently contributing to the United Way. Confirmation with the United Way office prior to making such contacts is required.
4. Lending its Name - to the promotional campaign of a business or sales organization.
5. Telethons - or similar mass media appeals designed to raise funds for special or specifically identified projects or purposes not otherwise provided for in the agency's budget.
6. Door-to-Door fund - solicitation of the general public.
7. Mailing of unordered items - with a request for money in return.
8. Employee work place solicitations.
9. Gambling

ADVOCATE BODIES

All fund raising activities conducted by guilds, auxiliaries, or other community organizations on behalf of the member agency shall be considered activities of the agency itself. The agency will be considered responsible to assure that the fund raising activities conform to the United Way guidelines.

VI. APPROVAL PROCEDURES

Where prior United Way approval is required, the following process will be followed:

1. A written request on United Way forms at least sixty (60) days prior to the beginning of the event.
2. The written request will be reviewed by the designated United Way committee.
3. A decision will be given to the agency within thirty (30) days of submission of the request.

AMENDMENTS

Certain programs and activities historic in character and/or required by charter terms of the member agencies' national organization may necessitate ratification of these guidelines. These requirements should be presented by the member agency to the United Way in the form of an addendum to this policy. Any waivers of addenda negotiated between the United Way and one member agency will be made known to all member agencies.

EFFECTIVE DATE

These guidelines will take effect October 30, 1991.

AGENCY

BY: _____
CHAIRMAN/PRESIDENT OF BOARD OF DIRECTORS

By: _____
CHIEF EXECUTIVE OFFICER OR SECRETARY

DATE

UNITED WAY OF SAMPSON COUNTY, INC.

By: _____
PRESIDENT OF BOARD OF DIRECTORS

BY: _____
VICE PRESIDENT/SECRETARY/TREASURER

DATE

Program Funding

Request Application



United Way of Sampson County

Sponsoring Agency: Sampson County Health Department

Program Name: Sampson County Breast and Cervical Cancer Awareness and Outreach Program

Mailing Address: 360 County Complex Rd., Suite 200, Clinton, NC 28328

Phone/email: 910-592-1131 ext. 4971 / wrobinson@sampsonnc.com

Funding Request for 2019 Program Funding \$ 5,000.00

CERTIFICATION

The requested amount herein was considered and approved for submission by the

Sampson County Health Department Board of Directors at a meeting on December 3, 2018
 (Sponsoring Agency) (date)

Our fiscal year is July 1, 2019 to June 30, 2020
 (date) (date)

Management and the Board of Directors have read and are prepared to discuss this Funding Request.

We acknowledge that funds allocated by United Way are contributed dollars and that fair and full disclosure is required in the completion of this Funding Request Application and all other requested information.

Wanda Robinson
 Executive Director ~ Name

Mr. Clark Wooten
 Board President or Authorized person Name

Volunteer Title

Signature - Executive Director

Signature ~ Board President or Authorized Person

Date

Date

REQUIRED: Specific use of UWSC funding. (Use only space provided)

The Sampson County Health Department is a non-profit, public agency that seeks to provide care for the indigent residents of Sampson County. The health department is dedicated to ensuring that each man, woman, and child who resides in Sampson County has the highest possible health status and is an equal opportunity provider. Traditionally, the focus of public health has always been the prevention of disease and the education of citizens on health issues. Today, our role has expanded to include community health assessments and the provision of other needed community services.

According to Sampson County's 2017 Community Health Assessment, cancer has remained among the top three leading causes of death over the last decade. This is why the Breast and Cervical Cancer Control Program (BCCCP) Advisory Board is adamant about educating Sampson County residents regarding the importance of early detection and treatment of breast and cervical cancer. BCCCP is based in the health department and offers services to 40-64 year old minority females who are uninsured or underinsured and need assistance in obtaining basic preventive health services, such as a breast exam, pap smear, and a screening mammogram. This population is difficult to reach and may not seek care due to lack of education and the inability to pay for services.

United Way funds are requested to provide financial resources for the Breast and Cervical Cancer Control Program Advisory Board to provide a public awareness campaign for the purpose of recruiting and educating minority females and to provide mammograms and pap smears to women who qualify for the program once state funds are depleted.

The Breast and Cervical Cancer Control Program Advisory Board will continue to campaign year round. The campaign will consist of public services announcements, health fairs, pink and teal ribbon campaigns, faith-based presentations, community presentations and the annual BCCCP Rally. The remainder of the funds will be used to pay for 25-30 mammograms in the BCCCP program due to the lapse of funds mid-year.

Organization's Governance & Oversight

Organizations *not currently* receiving UWSC funding *must* complete the following.

Board Meetings

1. How many meetings were scheduled during the last fiscal year?
2. How many times did the Board meet during the last fiscal year?
3. At how many of the Board meetings did you have a quorum during the last fiscal year?
4. Are detailed reports of agency activities provided to the board on a regular basis? Yes
 No

Current Demographics of Board of Directors

Male	_____	Black	_____
Female	_____	White	_____
Hispanic	_____	Other	_____

Fiscal Oversight

1. Briefly describe the system used for safeguarding against unauthorized or improper disbursement of funds, (i.e. two signatures required on checks).

National/State Affiliations

1. Are you nationally and/or state affiliated? (Y / N)?
2. Does the organization adhere to national standards?

Please briefly describe those national standards.

YES
 YES

NO
 NO

ORGANIZATION OVERVIEW

Organizations *not currently* receiving UWSC funding *must* complete the following.

1. Describe the organization's mission.

2. List any organizations or programs with whom your organization has collaborated to provide joint programming, and briefly describe the type(s) of collaboration (co-sponsorship of events, seminars, community issues, etc.) and the results of those collaborations.

5. Does the organization employ paid staff?

	YES
	YES

6. Does the organization have job descriptions for all staff?

	NO
	NO

PROGRAM OVERVIEW

Sampson County Breast and Cervical Cancer Awareness and Outreach Program

Program Name:

Wanda Robinson, Chair / Sabrina Pope, Co-Chair

Program Director's name:

1. Provide a *brief* program description and goals.

The Breast and Cervical Cancer Outreach Program is co-sponsored by the Sampson County Health Department and the Sampson County Breast and Cervical Cancer Control Program Advisory Board. This Board is a group of volunteers whose primary goal is to recruit and educate women on breast and cervical cancer and the importance of early detection and treatment.

The BCCCP Board's secondary goal is to provide health care access by obtaining funding for an additional 25-30 mammograms for females that qualify for the program once state funds have been depleted for the year.

2. What social/human welfare issue(s) does this program address?

The Breast and Cervical Cancer Control Program and the outreach campaign addresses breast and cervical cancer. The American Cancer Society estimated that in 2018 approximately 266,120 new cases of invasive breast cancer will be diagnosed in women, and approximately 40,920 women will die from breast cancer. Breast cancer is the most common cancer among women in United States, other than skin cancer. It is the second leading cause of cancer death in women, after lung cancer.

In addition to addressing breast cancer, Sampson County Breast and Cervical Cancer Control Program (BCCCP) Advisory Board is also focused on cervical cancer. The American Cancer Society estimated that in 2018, approximately 13,240 new cases of invasive cervical cancer will be diagnosed, and approximately 4,170 women will die from cervical cancer. According to the Centers for Disease Control and Prevention (2018), research shows that cervical cancer is highly preventable with routine pap screenings as recommended. Screenings help prevent the disease by finding precancerous lesions so they can be treated before they become cancerous. Regular, routine screening for cervical and breast cancers also helps find these diseases at an early, often highly treatable stage.

3. What is the program's targeted population, capacity, and number of people to be served? Is it at capacity?

The target population is 40-64 year old minority females. Sampson County's total population has been estimated to be 63,713 with 51% of the population being female (US Census Bureau, 2016 American Community Survey 5-Year Estimates). For fiscal year 2017-2018, our outreach campaigns reached 2,200+ residents and provided 36 mammograms using United Way funds. We were able to reach minority women with a focus on African-American and Hispanic women at various health fairs including, but not limited to, Unity in the Community in Harrells; Smithfield-Clinton Plant Health Fair; and the Annual Farmworker Festival in Newton Grove. We also reached the target population through PSA's on local radio and television stations and newspaper articles. The costs of the mammograms ranged from \$130.16 to \$161.35, depending on the type of mammogram needed. For fiscal year 2018-2019, it is the BCCCP Board's hope to reach 2,400+ Sampsonians with outreach campaigns and to provide 25-30 mammograms based on costs for the type of mammogram needed once state program funds have been depleted.

4. Do you have a waiting list for this program? If so, how many are on the waiting list, and what is the expected waiting time before your program will be able to provide services to them?

Currently there is not a waiting list; however, once state and federal funds are depleted for services, usually in the month of March, a waiting list will exist. United Way funds are normally used to fill in the gap during the waiting period until the new fiscal year begins in July.

5. What are the eligibility requirements for participating in this program?

To be eligible for the BCCCP program, women must be 40-64 years old and have a gross family income at or below 250% of the federal poverty level based on family size. Other eligibility requirements include being uninsured, underinsured or without a source of health care.

6. What fees are charged for services, and what percent of participants pay fees?

There is no fee for anyone that meets the eligibility requirements.

7. What is the long range plan for insuring financial stability for the program?

The Breast and Cervical Cancer Control Program Advisory Board plans to continue to actively seek grants and other funding sources for this program until every uninsured individual has comprehensive health insurance.

8. What impact would UWSC funding have on this program's outcomes?

United Way funds enhance the program by providing funding for patient services. Patients will be placed on a waiting list if UWSC funds are not provided. For fiscal year 2018-2019, the cost of mammograms will increase and will range from \$130.82 to \$161.86 depending on the type of mammogram needed, which means a decrease in the number of mammograms that can be provided annually. With the funding requested, the Breast and Cervical Cancer Control Program Advisory Board and Health Department would be able to sustain the number of mammograms provided by United Way.

9. To what extent are volunteers utilized in this program?

The Breast and Cervical Cancer Control Program (BCCCP) Advisory Board is completely a volunteer group that is dedicated to planning and implementing the Annual Breast Cancer Rally and conducting the post-event and outreach evaluations. The BCCCP Advisory Board serves as a resource to the community, provides outreach, and communicates and advocates for breast and cervical cancer education. The volunteer advisory board promotes the Buddy System, solicits for members, and organizes activities and presentations.

10. Are reference/background checks complete on all volunteers? YES NO

11. What type of training do volunteers receive? Are they evaluated on a regular basis?

Training is provided by health department staff and members of the Breast and Cervical Cancer Control Program Advisory Board to new members and by health department staff and/or advisory board members as needed.

MEASURING PROGRAM EFFECTIVENESS

OUTCOMES LOGIC MODEL

**PROGRAM
NAME**

Sampson County Breast and Cervical Cancer Awareness and Outreach Program

Please submit a logic model for the program for which UWSC funding is being requested. **Do Not** report on program outcomes in this model. Present in narrative format.

INPUTS	ACTIVITIES	OUTPUTS
1. Public Awareness Campaign and Outreach	<p>1. Media campaign</p> <ul style="list-style-type: none"> • PSA's, newspaper articles, flyer distribution, faith-based and community presentations, health fairs, breast and cervical cancer displays and Facebook announcements to reach target population. • Newspaper articles, displays, presentations during October, Breast Cancer Awareness Month, and January, Cervical Cancer Awareness Month. 	1. Increase knowledge among 2,400 minority county residents.
2. Annual BCCCP Health Fair and Rally	<p>2. Educational:</p> <ul style="list-style-type: none"> • Presentations and health fairs at venues such as the Annual Farmworker Festival-Newton Grove, Smithfield-Clinton Plant, and Unity in the Community-Harrells offered by the Sampson County Health Department and BCCCP Advisory Board staff to reach target population. • Distribution of Breast & Cervical Cancer Awareness ribbons to various churches, public/ private agencies and civic groups throughout the county to reach target population. • Breast Cancer Rally and Health Fair held in October, which is designated as Breast Cancer Awareness Month to reach target population. 	2. Increase percentage of number of pap smears and mammograms.
3. Access to Health Care.	3. Provide 25-30 mammograms for women eligible through the BCCCP program.	3. Increase the number of mammograms provided

MEASURING PROGRAM EFFECTIVENESS OUTCOMES FRAMEWORK

**PROGRAM
NAME:**

Sampson County Breast and Cervical Cancer Awareness and Outreach Program

Complete an outcome measurement framework for the program for which UWSC funding is being requested.

OUTCOMES	INDICATORS	DATA SOURCE	DATA COLLECTION METHOD
<p>1. Newspaper articles (10), PSAs to local radio and television stations (2), flyer distribution (200), faith-based and community presentations/health fairs (2,200 participants), health fairs (13), and Facebook announcements (12) to increase breast and cervical cancer awareness among target population. Pink and Teal Ribbon Campaign (445 pink ribbons and 100 teal ribbons) distributed ribbons to local churches.</p>	<p>1. Increase the number of clients requesting appointments for BCCCP clinic and increase in number of BCCCP Advisory Board Members and volunteers.</p>	<p>1. Appointment system.</p>	<p>1. Appointment system.</p>
<p>2. 2,200 participants in rally, health fairs, and presentations and reported increase from target population in knowledge on the importance of early detection and treatment for breast and cervical cancer.</p>	<p>2. Increase in number of attendance at annual rally, health fairs and community presentations.</p>	<p>2. Sign in sheets at annual rally, presentations, and health fairs. Evaluation forms after the rally, health fairs and community presentations.</p>	<p>2. Sign in sheets at annual rally, presentations, and health fairs. Evaluation forms after the rally, health fairs and community presentations.</p>
<p>3. 25-30 eligible clients receive mammograms through BCCCP clinic.</p>	<p>3. Increase in the number of clients requesting appointments</p>	<p>3. Appointment system</p>	<p>3. Appointment system</p>

OUTCOMES MEASUREMENT RESULTS

Sampson County Breast and Cervical Cancer Awareness and Outreach Program

Program Name: _____

1. Viewing your outcomes as your program's goals, how many participants do you estimate will achieve the outcome results that you have targeted for the funding cycle requested?

BCCCP's priority population is minorities with a focus on African-American and Hispanic women. Based on previous program evaluations, it is estimated that approximately 200 participants will attend the annual rally and funding will be provided for 25-30 mammograms. More than 2,400 members of our target audience will be reached through flyers, faith-based presentations, community presentations, health fairs and the media.

2. How often do you measure this program's outcome results? (Daily, Monthly, Quarterly, Semi-Annually, etc)

Program outcomes and outreach activities are evaluated on a monthly basis during BCCCP Advisory Board meetings and after the annual Breast Cancer Awareness Rally.

3. Who is responsible for implementing, collecting, and reviewing the outcomes/program effectiveness information for this program? (i.e. Committee, individuals with specific responsibilities, etc.)

The Sampson County BCCCP Program Coordinator, Nursing Director, and Health Director are responsible for evaluating program requirements and outcomes. The BCCCP Advisory Board and Health Department evaluate the efforts of the outreach campaigns and the annual rally.

4. What level of involvement does the Board of Directors have in the process of program outcome measurements and implementation?

Data is assimilated and reported to the BCCCP Advisory Board, Sampson County Board of Health, and the Sampson County Board of County Commissioners.

5. What changes have been planned or made to the program as a result of the outcome measurements?

Due to an increase in the number of women in the BCCCP age group seeking additional services, the health department implemented a new program, WISEWOMAN, in July 2014 that targets minority women, which offers physical exam screenings, limited lab work, education and referrals to providers as needed for overall health. The Advisory Board has been able to increase promotion for the program and target the minority and hard to reach populations, such as the African American, Latino and Native American communities to encourage participation in the program. In addition, 25-30 women will receive mammograms once state funds are depleted.



Program Name: County Breast & Cervical Cancer Awareness & Outreach - Ma

	Actual 2018	Projected 2019		
	Program Budget	Program Budget	Program Variance	Comments
DIRECT EXPENSES				
1 Salaries (list positions on attached sheet)	\$1,703	\$2,576	\$873	Retirement, medial & dental insurance, 401K
2 Employee Benefits	\$525	\$789	\$264	FICA and Medicare FICA
3 Payroll Taxes	\$121	\$198	\$77	Workman's Comp Insurance
4 Property and other Taxes	\$80		-\$80	
5 Advertising			\$0	
6 Professional Fees & Contracts			\$0	
7 Investment Expenses: (Bank charges, broker fees, etc.)			\$0	
8 Supplies			\$0	
9 Telephone			\$0	
10 Postage & Shipping			\$0	
11 Occupancy (Building and Grounds)			\$0	
12 Utilities (power, water, etc)			\$0	
13 Insurance			\$0	
14 Property & Equipment			\$0	
15 Depreciation			\$0	
16 Rental & Maintenance of Equipment			\$0	
17 Outside Printing			\$0	
18 Public/Private Transportation Fees			\$0	
19 Other Transportation			\$0	
20 Conference and Conventions			\$0	
21 Training	\$540	\$548	\$8	Staff training
22 Specific Assistance to Individuals			\$0	
23 Organization Dues			\$0	
24 Thrift store operating expenses			\$0	
25 Special Events/Fundraiser/Sales to Public (Cookies, etc)			\$0	
26 Miscellaneous 1: Laboratory Services	\$429	\$500	\$71	
27 Miscellaneous 2: Medical Services	\$4,516	\$5,234	\$718	(Mammograms, biopsies, readings, etc.)
28 Miscellaneous 3: Medical Services - UW Grant	\$4,999	\$5,000	\$1	(UW Grant Funds - Mammograms)
29 Miscellaneous 4: Medical Supplies		\$100	\$100	
30 Miscellaneous 5: (explain)			\$0	
31 TOTAL EXPENSES	\$12,913	\$14,945	\$2,032	
REVENUE				
32 <u>UW Sampson County (Include request for projected year)</u>	<u>\$5,000</u>	<u>\$5,000</u>	<u>\$0</u>	
33 Other United Ways			\$0	
34 Other Foundation Grant 1 (explain)			\$0	
35 Other Foundation Grant 2 (explain)			\$0	
36 Other Foundation Grant 3 (explain)			\$0	
37 Other Foundation Grant 4 (explain)			\$0	
38 State Revenue/grants-1	\$9,690	\$9,945	\$255	State allocation per Woman seen
39 State Revenue/grants-2			\$0	
40 Federal Revenue/grants			\$0	
41 County Revenue/grants			\$0	
42 City Revenue/grants			\$0	
43 Thrift Store, retail sales			\$0	
44 Special Events/Fundraiser/Sales to Public (Cookies, etc)			\$0	
45 Membership Dues, parent fees etc			\$0	
46 Program Income: client fees, participant fees etc.			\$0	
47 Investment Income (interest, dividends, gain on sale of assets)			\$0	
48 Endowment Contribution			\$0	
49 Contributions (Restricted & Unrestricted)			\$0	
50 Refunds			\$0	
51 Match Requirements			\$0	
52 Miscellaneous 1: (explain)			\$0	
53 Miscellaneous 2: (explain)			\$0	
54 Miscellaneous 3: (explain)			\$0	
55 Miscellaneous 4: (explain)			\$0	
56 TOTAL REVENUE	\$14,690	\$14,945	\$255	
57 SURPLUS/(DEFICIT)	\$1,777	\$0	(\$1,777)	



Program Name: **Sampson County Breast & Cervical Cancer Awareness & Outreach Program - Mammogra**

UNDUPLICATED PEOPLE SERVED TOTAL	Actual 2018				Projected 2019			
	Male	Female	Unknown	Total	Male	Female	Unknown	Total
AGE								
0-12				0				0
13-18				0				0
19-45		6		6		7		7
46-64		27		27		28		28
65 +		2		2		3		3
Unknown				0				0
TOTAL	0	35	0	35	0	38	0	38
RACE/ETHNICITY								
Caucasian		8		8		9		9
Asian				0				0
African American		9		9		10		10
Hispanic		18		18		19		19
Native American				0				0
Other				0				0
Unknown				0				0
TOTAL	0	35	0	35	0	38	0	38
INCOME								
\$7,500 or less		6		6		7		7
\$7,501 - \$15,000		14		14		15		15
\$15,001 - \$30,000		13		13		14		14
\$30,001 - \$50,000		1		1		1		1
\$50,000 +		1		1		1		1
TOTAL	0	35	110⁰	35	0	38	0	38



Program Name: Sampson County Breast & Cervical Cancer Awareness & Outreach Program

	Staff Position	Salary	Number of Hours Worked/Week
1	20 Volunteers	\$0.00	N/A
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
TOTAL	1	\$0.00	0
	Average	\$0.00	#DIV/0!

United Way of Sampson County Audit Policy

The following Audit Policy was adopted by the United Way Board of Directors at a meeting held on October 30, 1991, and was revised on February 23, 1994, October 27, 1000, and February 7, 2005.

The financial records of the affiliated agencies shall be submitted and examined by the United Way of Sampson County, Inc. (UWSC) at least annually. Each agency should comply with the following set of rules when submitting financial reports to United Way, however, in no case should the reports be in any less detail than that which is required by each agency's governing board.

Failure to adhere to United Way of Sampson County's financial standing guidelines may restrict or prohibit funding of an agency and/or program.

- (A) If the total support and revenue to the agency from UWSC exceeds \$35,000 for the fiscal year, the agency shall submit a copy of their financial statement including both a balance sheet and income/expense statement in nothing less than an audit format and performed by a certified public accountant (CPA). Information as to the total support and revenue and all of the fundraising activities including the kind and amounts of all funds raised, costs and expenses incidental thereto, allocation and disbursement of funds raised, changes in fund balances, notes to the audit and opinion as to the fairness of the presentation by the accountant shall be included.

- (B) If the total support and revenue to the agency from UWSC exceeds \$10,000, but is less than or equal to \$35,000 for the fiscal year, the agency may select one of these options:
 - (1) A copy of their financial statement, audited by a certified public accountant as defined in (A) above, or
 - (2) A copy of their financial position (balance sheet and income statement) presented in a review format by a CPA.

- (C) If the total support and revenue to the agency from UWSC is less than or equal to \$10,000 for the fiscal year, the agency may select one of these options:
 - (1) A copy of the financial statements audited by a certified public accountant as defined in (A) above; OR
 - (2) A copy of a review performed by a certified public accountant as defined in (B) above; OR
 - (3) A copy of a compilation performed by an independent public accountant accompanied by a statement signed by three members of the organization's governing board that to the best of their knowledge and belief the financial reports are true and correct, OR
 - (4) A copy of your completed current year IRS Form 990 accompanied by a statement signed by three members of the organization's governing board that to the best of their knowledge and belief the financial report is true and correct. In addition, the organization must provide an income statement, balance sheet and prior six months of bank statements.

- (D) Annual financial statements shall be submitted to United Way within four months after the agency's fiscal year.

BY: Sampson County Health Department
AGENCY

BY: _____
CHAIRMAN/PRESIDENT OF BOARD OF DIRECTORS

BY: _____
CHIEF EXECUTIVE OFFICER OR SECRETARY

DATE

UNITED WAY OF SAMPSON COUNTY, INC.

BY: _____
PRESIDENT OF BOARD OF DIRECTORS

BY: _____
VICE PRESIDENT/SECRETARY/TREASURER

DATE

AGREEMENT OF AFFILIATION

BETWEEN

Sampson County Health Department

with its office located

360 County Complex Rd., Suite 200 Clinton, NC 28328

(Hereinafter referred to as the Agency)

And

UNITED WAY OF SAMPSON COUNTY, INC.

(Hereinafter referred to as United Way)

This agreement is entered into in the mutual beliefs of the above named parties that: (a) the county of Sampson, North Carolina forms the basis for our community--wide efforts and that participation from all areas of our community is essential; (b) a effective way of providing maximum resources for health and human care services: and (c) it is the consideration of the total health and human care needs of our community, development of volunteers and our commitment to bring about a delivery system according to open, rational and non-discriminatory procedures which form the basis for this working relationship.

Both United Way and the Agency Agree, That Each

1. Has an active, responsible, and voluntary governing body, with representation from diverse elements in the community, which exercises effective control over the operations of the organization;
2. Faithfully adheres to a policy of nondiscrimination with respect to age, sex, race, religion, and national origin in connection with the makeup of its governing body, committees, and staff and the persons whom it directly and indirectly serves;
3. Has been ruled exempt from taxation under Section 501(c) (3) of the Internal Revenue code as well as corresponding provisions of other applicable state, local, or foreign laws or regulations;
4. Uses ethical methods of publicity and promotion as established by national professional public relations associations. (For example, see attached "Code of Professional Standards" adopted by the Public Relations Society of America.);

5. Issues an annual report to the public, including a financial report that complies with the "Standards of Accounting and Financial Reporting for Voluntary Health and Welfare Organizations" or similar standards that are recognized and approved by United Way of America's Board of Governors.

B The Agency Agrees

1. To provide a needed, non-duplicated service of education, prevention, remediation and/or contribution in the field of health, welfare or recreation within our community/county;
2. To support and assist the United Way in the annual fund raising campaign;
3. To engage in an effective public relations program in which the objectives, services and accomplishments of the Agency and the United Way support of such services are adequately publicized; to cooperate with and assist the United Way in its public information programs; and to make use of the United Way logo on letterheads and at all of its public functions;
4. To submit its proposed annual budget and budget request approved in advance by its governing board and in the format prescribed by United Way to the United Way within the agreed upon time schedule and to cooperate with the Allocations Committee in accordance with its review procedures;
5. To cooperate with the United Way planning committee in its efforts to coordinate human care services in the community and cooperate in the conduct of such studies as may be needed in support or planning, Allocations, Communications and/ or Fund Raising;
6. To conform with the united Way audit policy as approved by the Board of Directors on 10/30/91 as revised 2/23/94. A copy of the audit, financial statement, or IRS form 990 should be submitted to the United Way within four months after the Agency's fiscal year;
7. To submit quarterly financial reports to the United Way on the forms provided for that purpose that accurately reflect the Agency's current financial status;
8. To submit for prior approval and discussion by the United Way, all proposals for supplementary fundraising efforts as outlined in the United Way Policy On

Supplementary Fund Raising;

9. To submit for prior approval and discussion by United Way all proposals for new programs and/or expansion of a programs that may require United Way financial support now or in the future; and

10. To realize and utilize all possible operating income that might be secured through the Agency's normal activities, e. g. , fees for service, interest, non-designated contributions and membership fees, while at no time paying a commission in connection with fund raising.

C. The United Way Agrees

1. To respect the essential autonomy of the individual Agency and the authority of its Board of Directors to determine its own policies and to manage its own service;
2. To develop its objectives for the annual fund raising campaign with due regard for the requirements of all anticipating agencies, fund raising realities and other pertinent considerations to raise the maximum funds. To use its best efforts to achieve the campaign objectives and to exceed those objectives whenever possible;
3. To provide a reasonable, comprehensive and courteous review of each Agency;
4. To allocate contributed funds in a manner which recognizes the relative need among services provided by the Agencies;
5. To pay the Agency on the basis of the annual approved allocation and campaign collections;
6. To act as a steward of contributed funds by informing the public of the allocations; and
7. To submit its annual financial records to an audit by a Certified Public Accountant, a copy of which shall be made available for inspection by the Agency upon request.

D. Enforcement and Termination

1. This agreement may be revoked by either party by such party giving written notice to the other party at least ninety (90) days prior to the United Way annual fund raising drive. The party to whom notice of termination

raising drive. The party to whom notice of termination is given shall have the right to a hearing before the governing board of the other party; and

2. The United Way reserves the right to issue a "Notice of Exception" to an agency exhibiting substantial problems or deficiencies as identified by the United Way in any area of operation. Said Notice, signed by the originating allocations review committee, shall describe such problem or deficiency and explain the nature of contraction to United Way policy or understanding. The Agency shall be given one (1) year to show substantial progress in eliminating the problem or deficiency.

If substantial progress has not been made during the year, a "Notice of Probation" will be issued. All officers and executives of the Agency, as well as, any state or national office to which the Agency is affiliated shall receive a copy of the "Notice of Probation". If the problem or deficiency noted has not been resolved to the satisfaction of United Way by the end of the second year, the Agency's affiliation with the United Way will be terminated. If the Agency requests a meeting, the United Way will arrange for a panel of representative board members and will insure the members of the originating allocations committee group attend the meeting.

In witness of approval of this Agreement of Affiliation, the undersigned have affixed their signatures:

Sampson County Health Department
AGENCY

BY: _____
CHAIRMAN / PRESIDENT OF BOARD OF DIRECTORS

BY: _____
CHIEF EXECUTIVE OFFICER OR SECRETARY

DATE

UNITED WAY OF SAMPSON COUNTY, INC.

BY: _____
PRESIDENT OF BOARD OF DIRECTORS

BY: _____
VICE PRESIDENT / SECRETARY / TREASURER

DATE

POLICY ON SUPPLEMENTAL FUND RAISING BY AFFILIATED

PREAMBLE

The United Way of Sampson County, Inc. (hereinafter referred to as United Way) and our affiliate agencies (hereinafter referred to as agencies) are jointly concerned with the total effect of all fund raising activities conducted throughout the Sampson County area by community service organizations. In order for the United Way to maintain its integrity, it must provide a clear set of guidelines for member agencies to follow when seeking additional (non-United Way) financial support. These guidelines for the conduct of supplemental fund raising activities are designed to maximize yield, minimize competition, and avoid excessive intrusion on the donor community.

In an environment of limited resources and expanding needs, the United Way recognizes the value to participating agencies and to the community served of expanded supplemental resources generated by activities which do not conflict with the United Way. The United Way endorses the concept that good management practices dictate that agencies explore all ethical avenues for earning and obtaining multiple sources of funding to provide human care services. However, the methods used by the agencies to approach these sources should be in harmony with the United Way's fund raising principle that there will be one (1) annual, comprehensive effort for contributions from the community.

It is therefore essential that supplemental fund raising activities be conducted in a manner which would not adversely affect the United Way annual campaign or the member agencies abilities to provide human care services.

STRUCTURE

The chairman of the allocations committee will be responsible for forming a standing subcommittee which will be called the supplemental income producing subcommittee. Membership may include representation from the executive committee to include the treasurer and from the planning committee. This subcommittee will provide a forum for careful consideration, encouragement, consultation and advice on agency income producing proposals. This subcommittee will also serve as a clearing house for gathering resource information and scheduling, as appropriate, to help prevent competing activities.

Agencies are encouraged to have preliminary discussion with United Way well in advance of commitments being made regarding any proposed fund raising activity. Agencies making proposals will submit a written request to the supplemental income producing subcommittee or the allocations committee chairman at least sixty (60) days

prior to the scheduled commencement dated, specifying the activity, the area and population to be covered, the resource development method to be employed, expected completion date and anticipated revenues. Annual activities will be discussed prior to the initial event and then again only if significant changes occur.

All supplemental income received by agencies will be considered part of the total agency budget and will be reviewed by the allocations committee.

III. DEFINITION

"Income producing activity" is any activity by or in behalf of a participating agency that produces income for any purpose in addition to and other than the support of United Way.

ACTIVITIES

Agency income producing activities as covered in these guidelines fall within three (3) major groups: (A) Self-support activities which do not require prior approval of United Way; (B) Activities which require consultation and prior approval by United Way; and (C) Activities which are generally inappropriate.

SELF-SUPPORT ACTIVITIES NOT REQUIRING PRIOR UNITED WAY APPROVAL

Certain types of revenues are encouraged by the United Way and do not require approval. Such operating revenue, however, must be reflected in the agency's annual operating budget.

1. Membership - All types of membership programs wherein the member becomes involved and identified with the agency and being a part of an active constituency.
2. Program Service Fees - Fees related to participating in agency programs and services. establishment of appropriate fees are entirely within the province of the agency's Board of directors.
3. Rental Fees - Fees for the use of agency facilities are appropriate sources of agency revenue.
4. Grants-In-Aid - Private and public foundations, corporations and individuals, government agencies and private organizations that are in the business of being grant makers to the extent that these funds have no implications for United Way funding.
5. Purchase of Service Contracts - Reimbursements

from private and public agencies for services rendered on a contractual basis.

6. Bequests and Memorials - Endowments, trusts, honor gifts, scholarships, real property, and other forms of deferred or donor restricted or unrestricted giving.
7. Investment Income - Agencies having endowment funds are encouraged to manage such funds in a manner consistent with the agency's endowment policy and donor's wishes.
8. Out of Area Contributions - Agencies rendering significant services outside the United Way of Sampson County defined community are expected to develop appropriate amounts of contribution support from such areas.
9. Sales of Services or Manufactured Products - Agencies able to derive income from the sale of services, salvaged materials, or manufactured items as a part of their service program are encouraged to develop income from these sources.
10. Contributed Equipment, Materials, or Services - which do not diminish the support of the annual United Way campaign, and for which no general appeal is made between September 1 and November 1.

ACTIVITIES WHICH REQUIRE CONSULTATION AND PRIOR

APPROVAL BY UNITED WAY

1. Sustaining Membership - Sustaining membership is an affiliation with an agency for the primary purpose of financially supporting the aims of the organization without expectation of use of services or participating in the activities of the agencies. Those approached for membership should have a genuine personal interest in a relationship with the agency.
2. Entertainment - Motion pictures, concerts, stage plays, celebrity show, circuses, ice show, variety show, amateur nights, rodeos, etc.
3. Meals and Refreshments - Breakfast, lunches, dinners, picnics, wine-tasting, cocktail parties, teas, etc.
4. Shows - Painting, photography, antiques, home and garden, hobbies, flower arranging, pets, boats, autos, sporting goods, program activities, fashions, etc.
5. Public Sales - Income from value received sales of products directed toward the community-at-large.

6. Sports Tournaments - Golf, bowling, tennis, bridge, baseball, basketball, football, automobiles, airplanes, boats, horses, etc., directed toward the general public.
7. Social Activities - Dances, tours, charter trips, skating parties, excursions, etc., directed toward the general public.
8. Solicitations of Agency Board Members, Volunteers and Staff only.
9. Capital Fund Raising Campaigns.
10. Any and all other forms of fund raising not mentioned above but which might occur during or immediately preceding the United Way annual campaign.

C. ACTIVITIES WHICH ARE GENERALLY INAPPROPRIATE

1. Commercial Promotions - wherein a for-profit business or organization is given responsibility for raising funds for the agency.
2. Activities - seeking charitable gifts in which the persons being solicited are not likely to be identified by the agency or its representatives such as those names received from a purchased mailing list.
3. Solicitation - from companies which are not presently contributing to the United Way. Confirmation with the United Way office prior to making such contacts is required.
4. Lending its Name - to the promotional campaign of a business or sales organization.
5. Telethons - or similar mass media appeals designed to raise funds for special or specifically identified projects or purposes not otherwise provided for in the agency's budget.
6. Door-to-Door fund - solicitation of the general public.
7. Mailing of unordered items - with a request for money in return.
8. Employee work place solicitations.
9. Gambling

ADVOCATE BODIES

All fund raising activities conducted by guilds, auxiliaries, or other community organizations on behalf of the member agency shall be considered activities of the agency itself. The agency will be considered responsible to assure that the fund raising activities conform to the United Way guidelines.

VI. APPROVAL PROCEDURES

Where prior United Way approval is required, the following process will be followed:

1. A written request on United Way forms at least sixty (60) days prior to the beginning of the event.
2. The written request will be reviewed by the designated United Way committee.
3. A decision will be given to the agency within thirty (30) days of submission of the request.

AMENDMENTS

Certain programs and activities historic in character and/or required by charter terms of the member agencies' national organization may necessitate ratification of these guidelines. These requirements should be presented by the member agency to the United Way in the form of an addendum to this policy. Any waivers of addenda negotiated between the United Way and one member agency will be made known to all member agencies.

EFFECTIVE DATE

These guidelines will take effect October 30, 1991.

AGENCY

BY: _____
CHAIRMAN/PRESIDENT OF BOARD OF DIRECTORS

By: _____
CHIEF EXECUTIVE OFFICER OR SECRETARY

DATE

UNITED WAY OF SAMPSON COUNTY, INC.

By: _____
PRESIDENT OF BOARD OF DIRECTORS

BY: _____
VICE PRESIDENT/SECRETARY/TREASURER

DATE

STATE OF NORTH CAROLINA)
)
COUNTY OF SAMPSON)

LEASE AGREEMENT

THIS LEASE AGREEMENT (“Agreement”), made this the 3rd day of December, 2018 by and between SAMPSON COUNTY, a body corporate and politic and a political subdivision of the State of North Carolina (“Lessor”), and Kenneth Mac Sutton, a natural person whose principal office is located at 2246 Indian Town Road, Clinton, NC 28328 (“Lessee”).

WITNESSETH:

WHEREAS, the Sampson County Board of Commissioners has previously delegated to the Sampson County Manager the authority to enter into leases for a term of one (1) year or less pursuant to the provisions of North Carolina General Statutes § 153A-176 and § 160A-272; and

WHEREAS, subject to the terms and conditions hereinafter set forth, Lessor doth hereby let and lease unto Lessee and Lessee doth hereby accept as Lessee of said Lessor that certain parcel or parcels of land, lying and being in North Clinton Township, Sampson County, North Carolina, and more particularly described as follows:

Being all of that certain parcel of land identified as Tract 1, containing 12.57 acres, more or less, and all of that certain parcel of land identified as Tract 2, containing 8.86 acres, more or less, as shown on that Map of Survey entitled Sampson County “Britt Property” dated June 28, 2005 by Owen Surveying, Incorporated and recorded in Map Book 53, Page 77, Sampson County Registry.

NOW, THEREFORE, for and in consideration of the payments and mutual covenants set forth herein, the parties, intending to be legally bound, hereby agree as follows:

1. **Term.** This Agreement shall begin as of December 1, 2018 and, unless sooner terminated as herein provided, shall exist and continue until December 31, 2019, and in no event shall the term of the lease be for more than **one (1) year**.

2. **Rent.** Lessee agrees to pay Lessor rent in the amount of one thousand seven hundred dollars (\$1,700.00), which is calculated at the rate of one hundred dollars (\$100.00) per acre for the 17 farmable acres located on the leased premises as reported by the Farm Service Agency, which has been assigned Farm Land # 2418 – Tract # 4814. Such rent to be paid in one lump sum payment upon execution of this document.

3. **Cancellation.** Lessor shall have the right to cancel this Agreement, provided that Lessor has given thirty (30) days prior written notice of its intention to cancel this Agreement. Cancellation under this provision voids the lease.

4. **Maintenance.** It is understood and agreed that during the term of this Agreement, Lessee shall be solely responsible for maintenance to and upkeep of the leased premises.

5. **No Alterations by Lessee.** Lessee shall make no alterations to the leased premises other than tilling and planting the land and such other alterations to the soil as are reasonably necessary in order to farm the property. Lessee agrees to maintain the leased premises and return the same to Lessor in the same condition as it was at the beginning of the term of this Agreement.

6. **Use of Premises; Quiet Enjoyment.** Lessee shall not use and occupy the leased premises in any illegal manner or for any illegal purpose. Lessor covenants and agrees that upon Lessee's payment of the rent and performance of all the terms, covenants, and conditions on Lessee's part to be observed and performed under this Agreement, Lessee may peaceably and quietly have, hold, occupy, and enjoy the premises.

7. **Entry of Lessor.** Lessor shall have the right to enter in and upon the leased premises at all reasonable times for the purposes of (a) examination and inspection thereof, (b) exhibiting the premises to prospective lessees or purchasers; and (c) for any other reasonable purpose.

8. **Environmental Issues.** Lessee for its successors and assigns represents, warrants and agrees that (a) neither Lessee nor any other person or entity will improperly use or install any Hazardous Material on the leased premises; (b) Lessee has not and will not violate any Environmental Laws relating to or affecting the leased premises; (c) the leased premises shall not be used to generate, manufacture, transport, treat, store, handle, dispose, or process Hazardous Materials; (d) Lessee shall not cause nor permit the improper installation of Hazardous Materials in the leased premises nor a release of Hazardous Materials on the leased premises; and (e) Lessee shall at all times comply with an ensure compliance by all parties with all applicable Environmental Laws.

"Hazardous Materials", as used herein, shall include but shall not be limited to any of the following: (a) asbestos; (b) urea formaldehyde foam insulation; (c) transformers or other equipment which contain dielectric fluid containing levels of polychlorinated biphenyls in excess of fifty (50) parts per million; and (d) any other chemical, material, substance or other matter of any kind whatsoever which is prohibited, limited or regulated by any federal, state, county, regional or local authority or legislation, including, without limitation, the Federal Resource Conservation and Recovery Act, 42 U.S.C. Sections 6901 et seq. and the Federal Comprehensive Environmental Response Compensation and Liability Act of 1980, as amended, 42 U.S.C. Sections 9601 et seq., the regulations promulgated from time to time thereunder, environmental laws administered by the Environmental Protection Agency and laws and regulations of any state in which any Mortgaged Property is situated, or any other governmental organization or agency having jurisdiction thereof.

"Environmental Laws", as used herein, shall mean, all federal, state, and local laws, regulations, and other provisions having the force or effect of law, all judicial and administrative orders and determinations, all contractual obligations, and all common law concerning public health and safety, worker health and safety, pollution, or protection of the environment, including all those relating to the presence, use, production, generation, handling, transportation,

treatment, storage, disposal, distribution, labeling, testing, processing, discharge, release, threatened release, control, exposure to, or cleanup of any Hazardous Materials.

9. **Bankruptcy and Insolvency.** It is expressly agreed that if at any time during the term of this Agreement, Lessee should be adjudged bankrupt or insolvent by a court of competent jurisdiction, Lessor may at its option declare this Agreement terminated and canceled and take possession of the leased premises.

10. **Forfeiture for Non-Compliance.** It is expressly agreed that if Lessee shall neglect to perform any matter or thing herein agreed to be done and performed by Lessee, and shall remain in default thereof for a period of thirty (30) days after actual notice from Lessor calling attention to such default, Lessor may declare Lessee's lease terminated and canceled and take possession of the leased premises without prejudice to any other legal remedy Lessor may have on account of such default. In the event that Lessor shall have to institute a suit to collect any unpaid rent due under this Agreement, Lessor shall be entitled to recover a reasonable attorney's fee which shall be not more than fifteen (15%) percent of the rent so recovered by the Lessor from the Lessee or any guarantor of this Lease.

11. **Non-Waiver.** No prior indulgence, waiver, election or non-election by Lessor under this Agreement shall effect Lessor's right to declare a breach of this Agreement in the future or effect Lessee's duties and liabilities hereunder.

12. **No Assignment; No Subletting.** Lessee may not assign or sub lease this leased premises or any portion thereof without the prior written consent of Lessor.

13. **Notices.** All notices or other communications hereunder are sufficiently given if given by first class United States mail, postage prepaid, and will be deemed to have been received three (3) business days after deposit in the United States mail, first class, postage prepaid, as follows:

(a) If intended for the County, addressed to it at the following address:

Sampson County Manager
406 County Complex Road
Clinton, North Carolina 28328

(b) If intended for Lessee addressed to it at the following address:

Mr. Kenneth Mac Sutton
2246 Indian Town Road
Clinton, North Carolina 28328

14. **Entire Agreement.** This Lease Agreement, together with all its covenants, conditions, and provisions, shall inure to the benefit of and bind the parties hereto, their respective heirs, executors, administrators, successors, and assigns, and shall constitute the entire agreement between the parties.

15. **Choice of Law.** This Agreement shall be governed by and construed under the laws of the State of North Carolina.

16. **Headings.** The headings in this Agreement are for ease of reference only and shall not effect the interpretation of the provisions hereof.

IN WITNESS WHEREOF, the parties have executed this Agreement in duplicate originals, one of which is retained by each of the parties, the day and year first above written.

LESSOR

SAMPSON COUNTY

By: _____
Edwin W. Causey, County Manager

Attest: _____
Susan J. Holder, Clerk to the Board

LESSEE:

Kenneth Mac Sutton

NORTH CAROLINA
SAMPSON COUNTY

I, _____, a Notary Public in and for said County and State, do hereby certify that **EDWIN W. CAUSEY, County Manager, and SUSAN HOLDER, Clerk to the Sampson County Board of Commissioners**, personally appeared before me this day and acknowledged the due execution of the foregoing instrument. WITNESS my hand and notarial seal, this ____ day of December, 2017.

NOTARY PUBLIC

My commission expires: _____

NORTH CAROLINA
SAMPSON COUNTY

I, _____, a Notary Public in and for said County and State, do hereby certify that **KENNETH MAC SUTTON** personally came before me this day and acknowledged the due execution the foregoing instrument. WITNESS my hand and notarial seal, this the ____ day of December, 2017.

NOTARY PUBLIC

My commission expires: _____

DRUG AND ALCOHOL POLICY ADDENDUM

EFFECTIVE: JANUARY 1, 2018

The United States Department of Transportation (USDOT) – Office of Drug and Alcohol Policy and Compliance (ODAPC) has issued an update to USDOT’s drug and alcohol testing regulation (49 CFR Part 40). The new regulation has been revised and the changes (summarized below) will become effective on January 1, 2018. Therefore, the Sampson Area Transportation drug and alcohol testing policy is amended as follows:

1. CHANGES TO THE DRUG TESTING PANEL

- a. Four new opioids added to the drug testing panel –
 - i. The USDOT drug test remains a “5-panel” drug test; however, the list of opioids for which are tested will expand from three to seven opioids.
 - ii. The “opioid” category will continue to test for codeine, morphine, and heroin; however, the “opioid” testing panel will now be expanded to include four (4) new semi-synthetic opioids:
 1. (1) Hydrocodone, (2) Hydromorphone, (3) Oxycodone, and (4) Oxymorphone.
 2. Common brand names for these semi-synthetic opioids include, but may not be limited to: OxyContin®, Percodan®, Percocet®, Vicodin®, Lortab®, Norco®, Dilaudid®, Exalgo®.
- b. ‘MDA’ will be tested as an initial test analyte
- c. ‘MDEA’ will no longer be tested for under the “amphetamines” category.

2. BLIND SPECIMEN TESTING

- a. The USDOT no longer requires blind specimens to be submitted to laboratories.

3. ADDITIONS TO THE LIST OF “FATAL FLAWS”

- a. The following three circumstances have been added to the list of “fatal flaws”:
 - i. No CCF received by the laboratory with the urine specimen.
 - ii. In cases where a specimen has been collected, there was no specimen submitted with the CCF to the laboratory.
 - iii. Two separate collections are performed using one CCF.

4. MRO VERIFICATION OF PRESCRIPTIONS

- a. When a tested employee is taking a prescribed medication, after verifying the prescription and immediately notifying the employer of a verified negative result, the MRO must then (after notifying the employee) wait five (5) business days to be contacted by the employee's prescribing physician before notifying the employer of a medical qualification issue or significant safety risk.
 - i. Specifically, in cases where an MRO verifies a prescription is consistent with the Controlled Substances Act, but that the MRO has still made a determination that the prescription may disqualify the employee under other USDOT medical qualification requirements, or that the prescription poses a significant safety-risk, the MRO must advise the employee that they will have five (5) business days from the date the MRO reports the verified negative result to the employer for the employee to have their prescribing physician contact the MRO. The prescribing physician will need to contact the MRO to assist the MRO in determining if the medication can be changed to one that does not make the employee medically unqualified or does not pose a significant safety risk. If in the MRO's reasonable medical judgment, a medical qualification issue or a significant safety risk still remains after the MRO communicates with the employee's prescribing physician, or after five (5) business days, whichever is shorter, the MRO must communicate this issue to the employer consistent with 49 CFR Part 40.327.

5. DEFINITIONS

- a. The term "***DOT, the Department, DOT Agency***"
 - i. Modified to encompass all DOT agencies, including, but not limited to, FAA, FRA, FMCSA, FTA, PHMSA, NHTSA, Office of the Secretary (OST), and any designee of a DOT agency.
 - ii. For the purposes of testing under 49 CFR Part 40, the USCG (in the Department of Homeland Security) is considered to be a DOT agency for drug testing purposes.
- b. The term "***Opiate***" is replaced with the term "***Opioid***" in all points of reference.
- c. The definition of "***Alcohol Screening Device (ASD)***" is modified to include reference to the list of approved devices as listed on ODAPC's website.

- d. The definition of “**Evidential Breath Testing Device (EBT)**” is modified to include reference to the list of approved devices as listed on ODAPC’s website.
- e. The definition of “**Substance Abuse Professional (SAP)**” will be modified to include reference to ODAPC’s website. The fully revised definition includes:
 - i. A licensed physician (medical doctor or doctor of osteopathy) or licensed or certified psychologist, social worker, employee assistance professional, state-licensed or certified marriage and family therapist, or drug and alcohol counselor (certified by an organization listed at <https://www.transportation.gov/odapc/sap>) with knowledge of and clinical experience in the diagnosis and treatment of drug and alcohol related disorders.

NOTE: The revisions listed in this addendum include only those revisions to 49 CFR Part 40 which may be referenced in our drug & alcohol testing policy. A list of all the revisions made to 49 CFR Part 40 can be found at <https://www.transportation.gov/odapc>.

Addendum Authorization Date: _____

Authorized Official (Printed Name): _____

Signature: _____

The SSP will be updated as changes occur. An annual review is required to ensure all information is current. The annual review must be adopted by the board.

This operational policy was adopted by the Sampson County Board of Commissioners.

Date _____

Month _____

Year _____

System Program Director (Signature) *William Oates*

Governing Board Chairman (Signature) _____

OFFICE OF THE SAMPSON COUNTY TAX ADMINISTRATOR

P. O. BOX 1082 - CLINTON, NORTH CAROLINA 28329-1082

8801

JIM JOHNSON
Tax Administrator

Telephone 910-592-8146
910-592-8147

SAMPSON COUNTY BOARD OF COMMISSIONERS
406 COUNTY COMPLEX ROAD, BUILDING C
CLINTON, NORTH CAROLINA 28328

Members:

Pursuant to North Carolina G. S. 105-381, I hereby demand refund and remission of taxes assessed and collected by Sampson County against the property owned by Juan Castaneda Vazquez in _____ Township, Sampson County, for the year(s) and in the amount(s) of:

YEAR	
<u>2018</u>	\$ <u>254.91</u>
	\$
	\$
	\$
	\$
	\$
TOTAL REFUND	\$ <u>254.91</u>

These taxes were assessed through clerical error as follows.

Bill # 0043921949
FDY 9253
Tas Turned in (traded in)
2015 GMC

G02	County Tax	<u>234.98</u>
	School Tax	_____
F10	Fire Tax	<u>19.93</u>
	City Tax	_____
	TOTAL \$	<u>254.91</u>

Mailing Address.

280 Bowden RD
TURKEY NC, 28393

Yours very truly

J. Castaneda Vazquez
Taxpayer

Social Security # _____

RECOMMEND APPROVAL:

Jim Johnson
Sampson County Tax Administrator

Board Approved _____
Date _____ Initials _____

OFFICE OF THE SAMPSON COUNTY TAX ADMINISTRATOR

P. O. BOX 1082 - CLINTON, NORTH CAROLINA 28329-1082

8780

JIM JOHNSON
Tax Administrator

Telephone 910-592-8146
910-592-8147

SAMPSON COUNTY BOARD OF COMMISSIONERS
406 COUNTY COMPLEX ROAD, BUILDING C
CLINTON, NORTH CAROLINA 28328

Members:

Pursuant to North Carolina G. S. 105-381, I hereby demand refund and remission of taxes assessed and collected by Sampson County against the property owned by G & R Farms in Newton Grove Township, Sampson County, for the year(s) and in the amount(s) of:

YEAR	
<u>2017</u>	\$ <u>121.71</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL REFUND	\$ <u>121.71</u>

These taxes were assessed through clerical error as follows.

Sold! 2000 Hud TL # BE4574 602 County Tax 108.55
 2013 Toyo Trk XR3962 School Tax _____
 Surrendered Tags Fire Tax 13.16
 City Tax _____
 TOTAL \$ 121.71

Mailing Address.

G & R Farms
668 S. Eldridge Rd.
Newton Grove, NC 28366

Yours very truly

Rhonda West-Partner
Taxpayer

Social Security # _____

RECOMMEND APPROVAL

Jim Johnson
Sampson County Tax Administrator

Board Approved _____
Date _____ Initials _____

OFFICE OF THE SAMPSON COUNTY TAX ADMINISTRATOR

P. O. BOX 1082 - CLINTON, NORTH CAROLINA 28329-1082

8781

JIM JOHNSON
Tax Administrator

Telephone 910-592-8146
910-592-8147

SAMPSON COUNTY BOARD OF COMMISSIONERS
406 COUNTY COMPLEX ROAD, BUILDING C
CLINTON, NORTH CAROLINA 28328

Members:

Pursuant to North Carolina G. S. 105-381, I hereby demand refund and remission of taxes assessed and collected by Sampson County against the property owned by George W Brockley in _____ Township, Sampson County, for the year(s) and in the amount(s) of:

YEAR	\$
<u>2018</u>	\$ _____
_____	\$ _____
<u>1</u>	\$ _____
_____	\$ _____
_____	\$ _____

TOTAL REFUND \$ 340.62

These taxes were assessed through clerical error as follows.

2015 CADILLAC
Vehicle sold Tag turned in
Tag # DHT 4313

<u>602</u> County Tax	<u>205.12</u>
<u>501</u> School Tax	<u>30.05</u>
Fire Tax	_____
<u>102</u> City Tax	<u>99.45</u>
TOTAL \$	<u>340.62</u>

Mailing Address.

PO Box 343
Clinton, NC 28329

Yours very truly

George W. Brockley
Taxpayer

Social Security # _____

RECOMMEND APPROVAL:

Jim Johnson
Sampson County Tax Administrator

Board Approved _____
Date _____ Initials _____

OFFICE OF THE SAMPSON COUNTY TAX ADMINISTRATOR

P. O. BOX 1082 - CLINTON, NORTH CAROLINA 28329-1082

8785

JIM JOHNSON
Tax Administrator

Telephone 910-592-8146
910-592-8147

SAMPSON COUNTY BOARD OF COMMISSIONERS
406 COUNTY COMPLEX ROAD, BUILDING C
CLINTON, NORTH CAROLINA 28328

Members:

Pursuant to North Carolina G. S. 105-381, I hereby demand refund and remission of taxes assessed and collected by Sampson County against the property owned by Cristobal Manuel Rivas in _____ Township, Sampson County, for the year(s) and in the amount(s) of:

YEAR	
<u>2017</u>	\$ <u>216.47</u>
<u>S</u>	\$ _____
TOTAL REFUND	\$ <u>216.47</u>

These taxes were assessed through clerical error as follows.

Bill # 0043189179
PSM 5849
Tas Turned in (turn back in)
2016 Ford

602 County Tax	<u>166.90</u>
601 School Tax	<u>29.34</u>
F17 Fire Tax	<u>20.23</u>
City Tax	_____
TOTAL \$	<u>216.47</u>

Mailing Address.

X 2352 Southeast Blvd
Clinton NC 28328

Yours very truly

X Cristobal Rivas
Taxpayer

Social Security # _____

RECOMMEND APPROVAL:

Jim Johnson
Sampson County Tax Administrator

Board Approved _____

Date

Initials

OFFICE OF THE SAMPSON COUNTY TAX ADMINISTRATOR

P. O. BOX 1082 - CLINTON, NORTH CAROLINA 28329-1082

8767

JIM JOHNSON
Tax Administrator

Telephone 910-592-8146
910-592-8147

SAMPSON COUNTY BOARD OF COMMISSIONERS
406 COUNTY COMPLEX ROAD, BUILDING C
CLINTON, NORTH CAROLINA 28328

Members:

Pursuant to North Carolina G. S. 105-381, I hereby demand refund and remission of taxes assessed and collected by Sampson County against the property owned by Bobby Ray Avery in _____ Township, Sampson County, for the year(s) and in the amount(s) of:

YEAR	
<u>2017</u>	\$ <u>109.57</u>
<u>§</u>	\$ _____
TOTAL REFUND	\$ <u>109.57</u>

These taxes were assessed through clerical error as follows.

Bill # 0034977395
ACF 6109
Tax Turn in (traded)
2015 Ford

Co2	County Tax	<u>98.79</u>
	School Tax	_____
Fax	Fire Tax	<u>10.78</u>
	City Tax	_____
	TOTAL \$	<u>109.57</u>

Mailing Address.

2478 Christmas Tree Rd.
Dunn N.C. 28334

Yours very truly

Bobby R Avery
Taxpayer

Social Security # _____

RECOMMEND APPROVAL

Jim Johnson
Sampson County Tax Administrator

Board Approved _____
Date _____ Initials _____

*mailed 10-17-18

OFFICE OF THE SAMPSON COUNTY TAX ADMINISTRATOR

P. O. BOX 1082 - CLINTON, NORTH CAROLINA 28329-1082

8772

JIM JOHNSON
Tax Administrator

Telephone 910-592-8146
910-592-8147

SAMPSON COUNTY BOARD OF COMMISSIONERS
406 COUNTY COMPLEX ROAD, BUILDING C
CLINTON, NORTH CAROLINA 28328

Members:

Pursuant to North Carolina G. S. 105-381, I hereby demand refund and remission of taxes assessed and collected by Sampson County against the property owned by MHC Truck Leasing in North Clinton Township, Sampson County, for the year(s) and in the amount(s) of:

YEAR	
<u>2018</u>	\$ <u>805.83</u>
<u>2017</u>	\$ <u>5260.65</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL REFUND	\$ <u>6063.48</u>

These taxes were assessed through clerical error as follows.

cct # 95179
ID # 41239
listed by MHC / renewed tag thru
Double billed VTS / paid thru
VTS

601	County Tax	<u>3651.37</u>
501	School Tax	<u>641.75</u>
	Fire Tax	_____
602	City Tax	<u>1770.36</u>
	TOTAL \$	<u>6063.48</u>

Mailing Address.

MHC Truck Leasing, Inc
1120 Tomahawk Creek Pkwy
Leawood, KS 66211-2695

Yours very truly

Opus Hughes
Taxpayer

Federal ID # _____
Social Security # _____

RECOMMEND APPROVAL:

Jim Johnson
Sampson County Tax Administrator

Board Approved _____
Date _____ Initials _____

My File Edit Tools Help



- Original Bill
- Reprint
- Garnish
- Preferences
- Diagnostics

Bill Information

Year	Category	Number
2017	PP-R	3364

Notes/Alerts

JAN 1 Owner: MHC TRUCK LEASING, I

Special Conditions/Notes

View prior unpaid bills

Effective Date

Due 10/26/2018

Billed Item Information

Year_Property	2017_41239	View Source
Property ID	41239	

Customer Information

Customer ID 95179 [View Bills](#)
 MHC TRUCK LEASING, INC
 11120 TOMAHAWK CREEK PKWY
 LEAWOOD, KS 66211

Property Information

Parcel ID
 Prop ID 41239 [View Bills](#)
 Prop Loc

- Installments
- Charges
- History
- Events
- Audits

Installment	Due Date	Billed	Abt/Adj	Pmt/Crd	Unpaid	Interest Paid	Interest Due
1	09/01/2017	11,261.61	0.00	11,261.61	0.00	0.00	0.00
Totals:		11,261.61	0.00	11,261.61	0.00	0.00	0.00

Personal Property Detail Values

My File Edit Tools Help

Property

ID 41239 Sequence 1

Tax year 2017 AR category 25 Bill number 3364

Owner 95179 MHC TRUCK LEASING, INC

Description

Class MV MOTOR VEHICLE

Item MV MV

Schedule B8 B8

Purchase information

Year purchased 2014

Purchased value 581,802

Acquisitions 0

Removals 0

Net value 581,802

Percent good 66

Depreciated value 383,989

2 of 3

QVR

6 @ 96,967 each



Property ID Version Sequence
 Tax year AR category Bill number
 Owner MHC TRUCK LEASING, INC

Value Charges PP Detail

Property type Class code MOTOR VEHICLE

Value Information

Item MV
 Serial Tag/Certificate
 Schedule B8
 Parcel

Park/Location
 Space number
 Year Make Model
 Width Length
 Horsepower Propulsion

1 of 3

Taxed - Value /
 Act# 95779
 PID# 41239

96,967 (2017)

Also pd
 thru VTS
 2017

**STATE OF NORTH CAROLINA
 REGISTRATION CARD**

NC LIC NUMBER YD3035	PLT. EXP. DATE 10/31/2018	INSPECTION DUE
VEHICLE ID # 1XRZDP9X8FJ450961	GROSS WT 80,000	
MAKE/SERIES KW	TITLE # 338174142888011	EQUIP # 4475
SHIPPING WEIGHT 15922	STYLE TR	YEAR 2015
	FUEL D	TOTAL FEE 804.00
CLASSIFICATION FARM VEHICLE	VEHICLE BRAND	
CUSTOMER ID # OWNER 1 000028073759	CUSTOMER ID # OWNER 2	COUNTY SAMP
MURPHY BROWN LLC 2822 W. NC 24 HWY WARSAW, NC 28398-7952		

MURPHY BROWN LLC
 License 804.00
 Prop. Tax 881.87

**NC DIVISION OF MOTOR VEHICLES
 RECEIPT OF FEES PAID**

Appraised Value: \$64,370.00
 Appeal Deadline: 12/15/2017
 Sampson County Tax Department
 910-592-8146

Taxing Unit	Tax Rate	Amount
SAMPSON COUNTY	0.825000	531.06
CLINTON	0.400000	257.48
CLINTON SD	0.145000	93.34

101
 ep

TOTAL 1685.87 Total Property Tax 881.87
 D ACCT 500014223 011-08/21/2017-11C0110 ACCT

006 - OWNERS INSURANCE COMPANY
 INSURANCE COMPANY AUTHORIZED IN NC

MWTB301055 POLICY NUMBER



14525688

NCVTS Vehicle Appeal Workflow Admin Options Help VNORRIS1 Search Abstract # [v] Tax Year: 2018

NCVTS -> Vehicle Tax -> Bill Search Results -> Bill Detail

Bill #: 0022946698-2016-2016-0000-00 REG
 Bill Status: PAID Returned Mail: NA
 Interest Recalc Prorate Bill Print

Taxpayer Info

Owner Id	ID Number	Name	Mailing Address	Owner Order
19130548	DRIVER LICENSE-*****73759	MURPHY BROWN LLC	PO BOX 856 WARSAW NC 28398-0856	PRIMARY

Property Info

Personal:	Value (\$)	78,630	Adj Value (\$)	0
Exempt:		0		0
Total Value:		78,630		0
Lender:	VIN#:	1XKZDP9X8FJ450961	Plate#:	YD3035
Description:	2015 KW CONSTRUCTION TR			
Situs:	1-599 COMMERCE ST CLINTON NC 28328			

Bill Info

Source Type/System:	RMV PROPERTY TAX
Abstract #:	0022946698-2016-2016-0000
Bill Date:	07/31/2016
Interest Begin Date:	11/16/2016
Bill Due Date:	11/15/2016
Created By:	CLPOTTER
Final Payment Date:	09/08/2016

Tax Amount

#	Months	Description	Original Billed(\$)	Current Due (\$)
		Tax & Fees	1,081.16	0.00
		Interest		0.00
		Total	1,081.16	0.00

Additional Taxes

Payment History

Transaction Summary

Transaction Detail History

Notes

Change History

All Notes Notes Logs Documents Refresh

Submit Notes

Add Note

- Temporary
- Permanent

Add

TYPE NOTE HERE...

NCVTS Vehicle Appeal Workflow Admin Options Help VNORRIS1 Search Abstract # [] Tax Year: 2018

NCVTS -> Vehicle Tax -> Bill Search Results -> Bill Detail

Bill #: 0022946698-2017-2017-0000-00 REG
 Bill Status: PAID Returned Mail: NA

Interest Recalc Prorate Bill Print

Taxpayer Info

Owner Id	ID Number	Name	Mailing Address	Owner Order *
23303402	DRIVER LICENSE-*****73759	MURPHY BROWN LLC	PO BOX 856 WARSAW NC 28398-0856	PRIMARY

Property Info

	Value (\$)	Adj Value (\$)
Personal:	64,370	0
Exempt:	0	0
Total Value:	64,370	0

Lender: VIN#: 1XKZDP9X8FJ450961 Plate#: YD3035
 Description: 2015 KW CONSTRUCTION TR
 Situs: 1-599 COMMERCE ST CLINTON NC 28328

Bill Info

Source Type/System:	RMV PROPERTY TAX
Abstract #:	0022946698-2017-2017-0000
Bill Date:	07/30/2017 Created By: CLPOTTER
Interest Begin Date:	11/16/2017 Final Payment Date: 08/22/2017
Bill Due Date:	11/15/2017

Tax Amount

#	Months	Description	Original Billed(\$)	Current Due (\$)
		Tax & Fees	881.87	0.00
		Interest		0.00
		Total	881.87	0.00

Additional Taxes

Payment History

Transaction Summary

Date	Type	Update User	Trans #	Interest Date	Trans Amount(\$)
08/21/2017	PAYMENT	VTSSUPP	36630183	8/21/2017	881.87

Transaction Detail History

Notes

Change History

All Notes Notes Logs Documents Refresh

Submit Notes

Add Note

Temporary
 Permanent

Add

TYPE NOTE HERE...

taxed 96,967 value (2017)
 Act# 95179
 PIP# 41239

Also pd thru
 VTS

**STATE OF NORTH CAROLINA
 REGISTRATION CARD**

NC LIC NUMBER YD3036	PLA EXP DATE 10/31/2018	INSPECTION DUE
VEHICLE ID # 1XRZDP9XFPJ450962	GROSS WT 80,000	
MAKE/SERIES KW	TITLE # 338175142887011	EQUIP # 4476
SHIPPING WEIGHT 15922	STYLE TR	YEAR 2015
	FUEL D	TOTAL FEE 804.00
CLASSIFICATION FARM VEHICLE	VEHICLE BRAND	
CUSTOMER ID # OWNER 1 000028073759	CUSTOMER ID # OWNER 2	COUNTY SAMPSON
MURPHY BROWN LLC 2822 W NC 24 HWY WARSAW NC 28398-7952		

**NC DIVISION OF MOTOR VEHICLES
 RECEIPT OF FEES PAID**

MURPHY BROWN LLC
 License 804.00
 Prop Tax 881.87

Appraised Value: \$64,370.00
 Appeal Deadline: 12/15/2017
 Sampson County Tax Department
 910-592-8146

Handwritten:
 10-18
 14525689

Taxing Unit	Tax Rate	Amount
SAMPSON COUNTY	0.825000	681.05
CLINTON	0.400000	257.48
CLINTON SD	0.145000	93.94

TOTAL 1685.87
 D ACCT 500014223

Total Property Tax 881.87
 011 - 08/21/2017 T100110
 ACCT

004 - OLD REPUBLIC INSURANCE CO
 INSURANCE COMPANY AUTHORIZED IN NC
 MWTB301055
 POLICY NUMBER



1XRZDP9XFPJ450962



14525689

NCVTS Vehicle Appeal Workflow Admin Options Help VNORRIS1 Search Abstract # [v] [] Tax Year: 2018

NCVTS -> Vehicle Tax -> Bill Search Results -> Bill Detail

Bill #: 0022946704-2016-2016-0000-00 REG
 Bill Status: PAID Returned Mail: NA
 Interest Recalc Prorate Bill Print

Taxpayer Info

Owner Id	ID Number	Name	Mailing Address	Owner Order *
19130548	DRIVER LICENSE-*****73759	MURPHY BROWN LLC	PO BOX 856 WARSAW NC 28398-0856	PRIMARY

Property Info

Personal:	Value (\$)	78,630	Adj Value (\$)	0
Exempt:		0		0
Total Value:		78,630		0
Lender:	VIN#:	1XKZDP9XXFJ450962	Plate#:	YD3036
Description:	2015 KW CONSTRUCTION TR			
Situs:	1-599 COMMERCE ST CLINTON NC 28328			

Bill Info

Source Type/System:	RMV PROPERTY TAX		
Abstract #:	0022946704-2016-2016-0000		
Bill Date:	07/31/2016	Created By:	CLPOTTER
Interest Begin Date:	11/16/2016	Final Payment Date:	09/08/2016
Bill Due Date:	11/15/2016		

Tax Amount

# Months	Description	Original Billed(\$)	Current Due (\$)
	Tax & Fees	1,081.16	0.00
	Interest		0.00
	Total	1,081.16	0.00

Additional Taxes

Payment History

Transaction Summary

Transaction Detail History

Notes

Change History

All Notes Notes Logs Documents Refresh

Submit Notes

Add Note

- Temporary
- Permanent

Add

TYPE NOTE HERE...

NCVTS Vehicle Appeal Workflow Admin Options Help VNORRIS1 Search Abstract # [v] [] Tax Year: 2018

NCVTS -> Vehicle Tax -> Bill Search Results -> Bill Detail

Bill #: 0022946704-2017-2017-0000-00 REG
 Bill Status: PAID Returned Mail: NA

Interest Recalc Prorate Bill Print

Taxpayer Info

Owner Id	ID Number	Name	Mailing Address	Owner Order *
23303402	DRIVER LICENSE-*****73759	MURPHY BROWN LLC	PO BOX 856 WARSAW NC 28398-0856	PRIMARY

Property Info

Personal:	Value (\$)	Adj Value (\$)
Exempt:	64,370	0
Total Value:	0	0
	64,370	0
Lender:	VIN#: 1XKZDP9XXFJ450962	Plate#: YD3036
Description:	2015 KW CONSTRUCTION TR	
Situs:	1-599 COMMERCE ST CLINTON NC 28328	

Bill Info

Source Type/System:	RMV PROPERTY TAX
Abstract #:	0022946704-2017-2017-0000
Bill Date:	07/30/2017 Created By: CLPOTTER
Interest Begin Date:	11/16/2017 Final Payment Date: 08/22/2017
Bill Due Date:	11/15/2017

Tax Amount

# Months	Description	Original Billed(\$)	Current Due (\$)
	Tax & Fees	881.87	0.00
	Interest		0.00
	Total	881.87	0.00

Additional Taxes

Payment History

Transaction Summary

Transaction Detail History

Notes

Change History

All Notes Notes Logs Documents Refresh

Submit Notes

Add Note

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 Permanent

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TYPE NOTE HERE...

Taxed @ 96,967 Value 2017

Acct# 95179

PID# 41235

Also PD
VTS

STATE OF NORTH CAROLINA
REGISTRATION CARD

NC DIVISION OF MOTOR VEHICLES
RECEIPT OF FEES PAID

NC LIC NUMBER YD3037	PLT EXP DATE 10/31/2018	INSPECTION DUE
VEHICLE ID # 1XKZD99X1RJ450963	GROSS WT 80,000	
MAKE/SERIES KW	TITLE # 338176142886011	EQUIP # 4477
SHIPPING WEIGHT 15922	STYLE TR	YEAR 2015
	FUEL D	TOTAL FEE 804.00
CLASSIFICATION FARM VEHICLE	VEHICLE BRAND	
CUSTOMER ID # OWNER 1 000028073753	CUSTOMER ID # OWNER 2	COUNTY SAMPS
MURPHY BROWN LLC 2822 W NC 24 HWY WARSAW NC 28398-7952		

MURPHY BROWN LLC
License 804.00
Prop. Tax 881.87

Appraised Value: \$64,370.00
Appeal Deadline: 12/15/2017
Sampson County Tax Department
910-592-8146

Taxing Unit	Tax Rate	Amount
SAMPSON COUNTY	0.825000	531.05
CLINTON	0.400000	257.48
CLINTON SD	0.145000	93.34

101
CP

TOTAL 1685.87
D ACCT 500014223

Total Property Tax 881.87
011 08/22/2017 T100110
ACCT

004 - OLD REPUBLIC INSURANCE CO
INSURANCE COMPANY AUTHORIZED IN NC

MWTB301055

POLICY NUMBER



1XKZD99X1RJ450963



14525690

NCVTS Vehicle Appeal Workflow Admin Options Help VNORRIS1 Search Abstract # [v] [] Tax Year: 2018

NCVTS -> Vehicle Tax -> Bill Search Results -> Bill Detail(?)

Bill #: 0022946713-2016-2016-0000-00 REG
 Bill Status: PAID Returned Mail: NA
 Interest Recalc Prorate Bill Print

Taxpayer Info

Owner Id	ID Number	Name	Mailing Address	Owner Order *
19130548	DRIVER LICENSE-*****73759	MURPHY BROWN LLC	PO BOX 856 WARSAW NC 28398-0856	PRIMARY

Property Info

Personal:	Value (\$)	78,630	Adj Value (\$)	0
Exempt:		0		0
Total Value:		78,630		0
Lender:	VIN#: 1XKZDP9X1FJ450963	Plate#: YD3037		
Description:	2015 KW CONSTRUCTION TR			
Situs:	1-599 COMMERCE ST CLINTON NC 28328			

Bill Info

Source Type/System:	RMV PROPERTY TAX
Abstract.#:	0022946713-2016-2016-0000
Bill Date:	07/31/2016 Created By: CLPOTTER
Interest Begin Date:	11/15/2016 Final Payment Date: 09/08/2016
Bill Due Date:	11/15/2016

Tax Amount

#	# Months	Description	Original Billed(\$)	Current Due (\$)
		Tax & Fees	1,081.16	0.00
		Interest		0.00
		Total	1,081.16	0.00

Additional Taxes

Payment History

Transaction Summary

Transaction Detail History

Notes

Change History

All Notes Notes Logs Documents Refresh

Submit Notes

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Temporary
 Permanent

TYPE NOTE HERE...

Add

NCVTS Vehicle Appeal Workflow Admin Options Help: VNORRIS1 Search Abstract # [v] Tax Year: 2018

NCVTS -> Vehicle Tax -> Bill Search Results -> Bill Detail

Bill #: 0022946713-2017-2017-0000-00 REG
 Bill Status: PAID Returned Mail: NA Interest Recalc Prorate Bill Print

Taxpayer Info

Owner Id	ID Number	Name	Mailing Address	Owner Order
23303402	DRIVER LICENSE-*****73759	MURPHY BROWN LLC	PO BOX 856 WARSAW NC 28398-0856	PRIMARY

Property Info

Personal:	Value (\$)	Adj Value (\$)
Exempt:	64,370	0
Total Value:	0	0
	64,370	0
Lender:	VIN#: 1XKZDP9X1FJ450963	Plate#: YD3037
Description:	2015 KW CONSTRUCTION TR	
Situs:	1-599 COMMERCE ST CLINTON NC 28328	

Property Details

Bill Info

Source Type/System:	RMV PROPERTY TAX
Abstract #:	0022946713-2017-2017-0000
Bill Date:	07/30/2017 Created By: CLPOTTER
Interest Begin Date:	11/15/2017 Final Payment Date: 08/23/2017
Bill Due Date:	11/15/2017

Tax Amount

# Months	Description	Original Billed(\$)	Current Due (\$)
	Tax & Fees	881.87	0.00
	Interest		0.00
	Total	881.87	0.00

Additional Taxes

Payment History

Transaction Summary

Transaction Detail History

Notes

Change History

All Notes Notes Logs Documents Refresh

Submit Notes

Add Note

Temporary
 Permanent

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TYPE NOTE HERE...

Taxed @ Value \$94,967 2017
 Dat # 95179
 PIPK 41235

Also pd
 thru VTS

**STATE OF NORTH CAROLINA
 REGISTRATION CARD**

NC LIC NUMBER YD3038	PLT EXP DATE 10/31/2018	INSPECTION DUE
VEHICLE ID # 1XKZDP9X3FJ450964	GROSS WT 80,000	EQUIP # 4478
MAKE/SERIES KW	TITLE # 338177142885011	
SHIPPING WEIGHT 15922	STYLE TR	YEAR 2015
	FUEL D	TOTAL FEE 804.00
CLASSIFICATION FARM VEHICLE	VEHICLE BRAND	
CUSTOMER ID # OWNER 1 000028073759	CUSTOMER ID # OWNER 2	COUNTY SAMPS
MURPHY BROWN LLC 2822 W NC 24 HWY WARSAW NC 28398-7952		

**NC DIVISION OF MOTOR VEHICLES
 RECEIPT OF FEES PAID**

MURPHY BROWN LLC
 License 804.00
 Prop Tax 881.87

Appraised Value: \$64,370.00
 Appeal Deadline: 12/15/2017

Sampson County Tax Department
 910-592-8146

Taxing Unit	Tax Rate	Amount
SAMPSON COUNTY	0.825000	531.05
CLINTON	0.400000	257.48
CLINTON SD	0.145000	93.34

TOTAL 1685.87
 0 ACCT 500014223

Total Property Tax 881.87
 011 08/22/2017 TIC0110
 ACCT

Please Fold Here

004 OLD REPUBLIC INSURANCE CO
 INSURANCE COMPANY AUTHORIZED IN NC

MWTB301055
 POLICY NUMBER



1XKZDP9X3FJ450964



14525691

NCVTS Vehicle Appeal Workflow Admin Options Help VNORRIS1 Search Abstract # [v] [] Tax Year: 2018

NCVTS -> Vehicle Tax -> Bill Search Results -> Bill Detail

Bill #: 0022946717-2016-2016-0000-00 REG
 Bill Status: PAID Returned Mail: NA
 Interest Recalc Prorate Bill Print

Taxpayer Info

Owner Id	ID Number	Name	Mailing Address	Owner Order *
19130548	DRIVER LICENSE-*****73759	MURPHY BROWN LLC	PO BOX 896 WARSAW NC 28398-0856	PRIMARY

Property Info

Personal:	Value (\$)	Adj Value (\$)
Exempt:	78,630	0
Total Value:	0	0
	78,630	0
Lender:	VIN#: 1XKZDP9X3FJ450964	Plate#: YD3038
Description:	2015 KW CONSTRUCTION TR	
Situs:	1-599 COMMERCE ST CLINTON NC 28328	

Bill Info

Source Type/System:	RMV PROPERTY TAX
Abstract #:	0022946717-2016-2016-0000
Bill Date:	07/31/2016
Interest Begin Date:	11/16/2016
Bill Due Date:	11/15/2016
Created By:	CLPOTTER
Final Payment Date:	09/08/2016

Tax Amount

# Months	Description	Original Billed(\$)	Current Due (\$)
	Tax & Fees	1,081.16	0.00
	Interest		0.00
	Total	1,081.16	0.00

Additional Taxes

Payment History

Transaction Summary

Transaction Detail History

Notes

Change History

All Notes Notes Logs Documents Refresh

Submit Notes

Add Note

Temporary
 Permanent

Add

TYPE NOTE HERE...

NCVTS Vehicle Appeal Workflow Admin Options Help VNORRIS1 Search Abstract # [] Tax Year: 2018

NCVTS -> Vehicle Tax -> Bill Search Results -> Bill Detail

Bill #: 0022946717-2017-2017-0000-00 REG
 Bill Status: PAID Returned Mail: NA
 Interest Recalc Prorate Bill Print

Taxpayer Info

Owner Id	ID Number	Name	Mailing Address	Owner Order
23303402	DRIVER LICENSE-*****73759	MURPHY BROWN LLC	PO BOX 856 WARSAW NC 28398-0856	PRIMARY

Property Info

Personal:	Value (\$)	Adj Value (\$)
Exempt:	64,370	0
Total Value:	0	0
Total Value: 64,370		
Lender:	VIN#: 1XKZDP9X3FJ450964	Plate#: YD3038
Description:	2015 KW CONSTRUCTION TR	
Situs:	1-599 COMMERCE ST CLINTON NC 28328	

Bill Info

Source Type/System:	RMV PROPERTY TAX
Abstract #:	0022946717-2017-2017-0000
Bill Date:	07/30/2017
Interest Begin Date:	11/15/2017
Bill Due Date:	11/15/2017
Created By:	CLPOTTER
Final Payment Date:	08/23/2017

Tax Amount

# Months	Description	Original Billed(\$)	Current Due (\$)
	Tax & Fees	881.87	0.00
	Interest		0.00
	Total	881.87	0.00

Additional Taxes

Payment History

Transaction Summary

Transaction Detail History

Notes

Change History

All Notes
 Notes
 Logs
 Documents
 Refresh
 Submit Notes

Add Note Add

Temporary
 Permanent

TYPE NOTE HERE...

Taxed @ 96,967 value 2017
 Act# 95179
 PIP# 41239

Also paid
 thru VTS

STATE OF NORTH CAROLINA
 REGISTRATION CARD

NC LIC NUMBER YD3039	PLA EXP DATE 10/31/2018	INSPECTION DUE
VEHICLE ID # 1XKZDP9X5F0450965	GROSS WT 80,000	
MAKE/SERIES KW	TITLE # 338178142884011	EQUIP # 4479
SHIPPING WEIGHT 15922	STYLE-TR TR	YEAR 2015
	FUEL D	TOTAL FEE 804.00
CLASSIFICATION FARM VEHICLE	VEHICLE BRAND	
CUSTOMER ID # OWNER 1 000028073759	CUSTOMER ID # OWNER 2	COUNTY SAMPSON
MURPHY BROWN LLC		
2822 W NC 24 HWY WARSAW NC 28398-7952		

NC DIVISION OF MOTOR VEHICLES
 RECEIPT OF FEES PAID

MURPHY BROWN LLC
 License 804.00
 Prop. Tax 881.87

Appraised Value: \$64,370.00
 Appeal Deadline: 12/15/2017

Sampson County Tax Department
 910-592-8146

101
 CP

Taxing Unit	Tax Rate	Amount
SAMPSON COUNTY	0.825000	531.05
CLINTON	0.400000	257.48
CLINTON SD	0.145000	93.34

TOTAL 1685.87

Total Property Tax 881.87

D ACCT 500014223

011 08/22/2017 TIC0110
 ACCT

Please Fold Here

004 OLD REPUBLIC INSURANCE CO

INSURANCE COMPANY AUTHORIZED IN NC

MWTB301055

POLICY NUMBER



1XKZDP9X5F0450965



14525692

NCVTS Vehicle Appeal Workflow Admin Options Help VNORRIS1 Search Abstract # [v] Tax Year: 2018

NCVTS -> Vehicle Tax -> Bill Search Results -> Bill Detail

Bill #: 0022946721-2016-2016-0000-00 REG Interest Recalc Prorate Bill Print
 Bill Status: PAID Returned Mail: NA

Taxpayer Info

Owner Id	ID Number	Name	Mailing Address	Owner Order
19130548	DRIVER LICENSE-*****73759	MURPHY BROWN LLC	PO BOX 856 WARSAW NC 28398-0856	PRIMARY

Property Info

Personal:	Value (\$)	78,630	Adj Value (\$)	0
Exempt:		0		0
Total Value:		78,630		0
Lender:	VIN#:	1XKZDP9X5FJ450965	Plate#:	YD3039
Description:	2015 KW CONSTRUCTION TR			
Situs:	1-599 COMMERCE ST CLINTON NC 28328			

Bill Info

Source Type/System:	RMV PROPERTY TAX
Abstract #:	0022946721-2016-2016-0000
Bill Date:	07/31/2016
Interest Begin Date:	11/16/2016
Bill Due Date:	11/15/2016
Created By:	CLPOTTER
Final Payment Date:	09/08/2016

Tax Amount

# Months	Description	Original Billed(\$)	Current Due (\$)
	Tax & Fees	1,081.16	0.00
	Interest		0.00
	Total	1,081.16	0.00

Additional Taxes

Payment History

Transaction Summary

Transaction Detail History

Notes

Change History

All Notes
 Notes
 Logs
 Documents
 Refresh
 Submit Notes

Add Note

Temporary
 Permanent
 Add

TYPE NOTE HERE...

NCVTS Vehicle Appeal Workflow Admin Options Help VNORRIS1 Search Abstract # [] Tax Year: 2018

NCVTS -> Vehicle Tax -> Bill Search Results -> Bill Detail

Bill #: 0022946721-2017-2017-0000-00 REG
 Bill Status: PAID Returned Mail: NA

Taxpayer Info

Owner Id	ID Number	Name	Mailing Address	Owner Order *
23303402	DRIVER LICENSE-*****73759	MURPHY BROWN LLC	PO BOX 856 WARSAW NC 28398-0856	PRIMARY

Property Info

Personal:	Value (\$)	64,370	Adj Value (\$)	0
Exempt:		0		0
Total Value:		64,370		0
Lender:	VIN#:	1XKZDP9X5FJ450965	Plate#:	YD3039
Description:	2015 KW CONSTRUCTION TR			
Situs:	1-599 COMMERCE ST CLINTON NC 28328			

Property Details

Bill Info

Source Type/System:	RMV PROPERTY TAX
Abstract #:	0022946721-2017-2017-0000
Bill Date:	07/30/2017
Interest Begin Date:	11/16/2017
Bill Due Date:	11/15/2017
Created By:	CLPOTTER
Final Payment Date:	08/23/2017

Tax Amount

# Months	Description	Original Billed(\$)	Current Due (\$)
	Tax & Fees	881.87	0.00
	Interest		0.00
	Total	881.87	0.00

Additional Taxes

Payment History

Transaction Summary

Transaction Detail History

Notes

Change History

All Notes Notes Logs Documents Refresh

Submit Notes

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Temporary
 Permanent

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TYPE NOTE HERE...

Taxed @ 96,967 value 2017

Doc# 95179

PIP# 41239

Also pd
Mn V#

STATE OF NORTH CAROLINA
REGISTRATION CARD

NC DIVISION OF MOTOR VEHICLES
RECEIPT OF FEES PAID

NCLIC NUMBER YD3040	PLA EXP DATE 10/31/2018	INSPECTION DUE
VEHICLE ID # LXKZDP9X7FJ450966	GROSS WT. 80,000	
MAKE/SERIES KW	TITLE # 338179142883011	EQUIP # 4481
SHIPPING WEIGHT 15922	STYLE TR	YEAR 2015
	FUEL D	TOTAL FEE 804.00
CLASSIFICATION FARM VEHICLE	VEHICLE BRAND	
CUSTOMER ID # OWNER 1 000028073789	CUSTOMER ID # OWNER 2	COUNTY SAMPS
MURPHY BROWN LLC 2822 W NC 24 HWY WARSAW NC 28398-7952		

MURPHY BROWN LLC
License 804.00
Prop Tax 881.87

Appraised Value: \$64,370.00
Appeal Deadline: 12/15/2017

Sampson County Tax Department
910-592-8146

Taxing Unit	Tax Rate	Amount
SAMPSON COUNTY	0.825000	531.05
CLINTON	0.400000	287.48
CLINTON SD	0.145000	93.34

TOTAL 1685.87

Total Property Tax 881.87

D ACCT 500014223

011 08/22/2017 TIC0110
ACCT

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004 - OLD REPUBLIC INSURANCE CO.
INSURANCE COMPANY AUTHORIZED IN NC

MWTR301055
POLICY NUMBER



LXKZDP9X7FJ450966



14525693

NCVTS Vehicle Appeal Workflow Admin Options Help VNORRIS1 Search Abstract # [] Tax Year: 2018

NCVTS -> Vehicle Tax -> Bill Search Results -> Bill Detail

Bill #: 0022946727-2016-2016-0000-00 REG
Bill Status: PAID Returned Mail: NA Interest Recalc Prorate Bill Print

Taxpayer Info

Owner Id	ID Number	Name	Mailing Address	Owner Order *
19130548	DRIVER LICENSE-*****73759	MURPHY BROWN LLC	PO BOX 856 WARSAW NC 28398-0856	PRIMARY

Property Info

Personal:	Value (\$)	78,630	Adj Value (\$)	0
Exempt:		0		0
Total Value:		78,630		0
Lender:	VIN#:	1XKZDP9X7FJ450966	Plate#:	YD3040
Description:	2015 KW CONSTRUCTION TR			
Situs:	1-599 COMMERCE ST CLINTON NC 28328			

Bill Info

Source Type/System:	RMV PROPERTY TAX
Abstract #:	0022946727-2016-2016-0000
Bill Date:	07/31/2016 Created By: CLPOTTER
Interest Begin Date:	11/16/2016 Final Payment Date: 09/08/2016
Bill Due Date:	11/15/2016

Tax Amount

# Months	Description	Original Billed(\$)	Current Due (\$)
	Tax & Fees	1,081.16	0.00
	Interest		0.00
	Total	1,081.16	0.00

Additional Taxes

Payment History

Transaction Summary

Transaction Detail History

Notes

Change History

All Notes Notes Logs Documents Refresh

Submit Notes

Add Note

Temporary
 Permanent

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Handwritten notes:

- 1) 0961 YD3035 2015 TR
- 2) 0962 YD3036 2015 TR
- 3) 0963 YD3037 2015 TR
- 4) 0964 YD3038 2015 TR
- 5) 0965 YD3039 2015 TR
- 6) 0966 YD3040 2015 TR
- 7) 0967 YD3041 2015 TR

NCVTS Vehicle Appeal Workflow Admin Options Help VNORRIS1 Search Abstract # [v] Tax Year: 2018

NCVTS -> Vehicle Tax -> Bill Search Results -> Bill Detail

Bill #: 0022946727-2017-2017-0000-00 REG
 Bill Status: PAID Returned Mail: NA
 Interest Recalc Prorate Bill Print

Taxpayer Info

Owner Id	ID Number	Name	Mailing Address	Owner Order
23303402	DRIVER LICENSE-*****73759	MURPHY BROWN LLC	PO BOX 856 WARSAW NC 28398-0856	PRIMARY

Property Info

Personal:	Value (\$)	64,370	Adj Value (\$)	0
Exempt:		0		0
Total Value:		64,370		0
Lender:	VIN#:	1XKZDP9X7FJ450966	Plate#:	YD3040
Description:	2015 KW CONSTRUCTION TR			
Situs:	1-599 COMMERCE ST CLINTON NC 28328			

Bill Info

Source Type/System:	RMV PROPERTY TAX
Abstract #:	0022946727-2017-2017-0000
Bill Date:	07/30/2017
Interest Begin Date:	11/16/2017
Bill Due Date:	11/15/2017
Created By:	CLPOTTER
Final Payment Date:	08/23/2017

Tax Amount

# Months	Description	Original Billed(\$)	Current Due (\$)
	Tax & Fees	881.87	0.00
	Interest		0.00
	Total	881.87	0.00

Additional Taxes

Payment History

Transaction Summary

Transaction Detail History

Notes

Change History

All Notes Notes Logs Documents Refresh

Submit Notes

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Temporary
 Permanent

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TYPE NOTE HERE...



- Original Bill
- Reprint
- Garnish
- Preferences
- Diagnostics

Bill Information

Year	Category	Number
2018	PP-R	3715

Notes/Alerts

JAN 1 Owner: MHC TRUCK LEASING, I

Special Conditions/Notes

view prior unpaid bills

Effective Date

Due 10/25/2018

Billed Item Information

Year_Property	2018_41239	View Source
Property ID	41239	

Customer Information

Customer ID: 95179 [View Bills](#)

MHC TRUCK LEASING, INC
 11120 TOMAHAWK CREEK PKWY
 LEAWOOD, KS 66211

Property Information

Parcel ID		
Prop ID	41239	View Bills
Prop Loc		

- Installments
- Charges
- History
- Events
- Audits

Installment	Due Date	Billed	Abt/Adj	Pmt/Crd	Unpaid	Interest Paid	Interest Due	Total Due
1	09/01/2018	1,247.12	0.00	1,247.12	0.00	0.00	0.00	0.00
Totals:		1,247.12	0.00	1,247.12	0.00	0.00	0.00	0.00



Property ID Version Sequence
 Tax year AR category Bill number
 Owner MHC TRUCK LEASING, INC

Property type Class code MOTOR VEHICLE

Value Information Personal Property Information

Item
 Serial Tag/Certificate
 Schedule
 Parcel

Park/Location
 Space number
 Year Make Model
 Width Length
 Horsepower Propulsion

2 of 2

Values Detail

My File Edit Tools Help

Property ID 41239 Version 1 - Tax Sequence 2

Tax year 2018 AR category 25 Bill number 3715

Owner 95179 MHC TRUCK LEASING, INC

Value Charges PP Detail

Property type Personal Class code MV MOTOR VEHICLE

Value Information Personal Property Information

Count	1.0	Deferment code	
<input type="checkbox"/> Residence		Deferment date	
Assessed	58,601	Deferred value	0
Appraised	0	Reduced deferred amount	0
Square feet	0		

2 of 2

QVR

Description	VIN	BR	Acquired	Cost	Dom ADD Line 1	DOM City	DOM St.	DOM Zip	DOM County
2015 KW T880	1XKZDP9X9FJ450967 ✓	2	10/3/2014	\$ 112,695.22	419 E Railroad St	Clinton	NC	28328	Sampson
2014 KW T370	2XKHAJ7X2EM398366	11	5/16/2013	\$ 83,155.49	1504 Sunset Ave	Clinton	NC	28328	Sampson

Not taxed for 2017
W/ SC TO

PU thru
VTR

STATE OF NORTH CAROLINA
REGISTRATION CARD

NC LIC NUMBER YD3041	PLAT. EXP. DATE 10/31/2018	INSPECTION DUE
VEHICLE ID # 1XXZDP9X9F9450967	GROSS WT 80,000	
MAKE/SERIES KW	TITLE # 338180142880011	EQUIP # 4482
SHIPPING WEIGHT 15922	STYLE TR	YEAR 2015
CLASSIFICATION FARM VEHICLE	FUEL D	TOTAL FEE 804.00
CUSTOMER ID # OWNER 1 000028073759	CUSTOMER ID # OWNER 2	COUNTY SAMPS
MURPHY BROWN LLC 2822 W. NC 24 HWY WARSAW, NC 28398-7952		

NC DIVISION OF MOTOR VEHICLES
RECEIPT OF FEES PAID

MURPHY BROWN LLC
License: 804.00
Prop. Tax: 881.87

Appraised Value: 364,370.00
Appeal Deadline: 12/16/2017
Sampson County Tax Department
910-592-8146

Taxing Unit	Tax Rate	Amount
SAMPSON COUNTY	0.825000	531.05
CLINTON	0.400000	257.48
CLINTON SD	0.145000	93.34

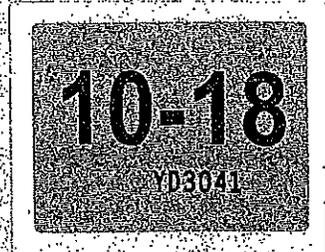
TOTAL: 1685.87
D ACCT 600014223

Total Property Tax: 881.87
011 08/22/2017 TIC0110
ACCT

004 - OLD REPUBLIC INSURANCE CO
INSURANCE COMPANY AUTHORIZED IN NC
MWR301055
POLICY NUMBER



1XXZDP9X9F9450967



14525694

taxed @ Value \$58,601 for 2018

Acct# 95179
PID# 41239

58,601
x .040

58,601
x .025

58,601
x .145

234.40 ✓

483.46

84.97

80283

NCVTS Vehicle Appeal Workflow Admin Options Help VNORRIS1 Search Abstract # [] Tax Year: 2018

NCVTS -> Vehicle Tax -> Bill Search Results -> Bill Detail

Bill #: 0022946735-2017-2017-0000-00 REG Interest Recalc Prorate Bill Print
 Bill Status: PAID Returned Mail: NA

Taxpayer Info

Owner Id	ID Number	Name	Mailing Address	Owner Order *
23303402	DRIVER LICENSE-*****73759	MURPHY BROWN LLC	PO BOX 856 WARSAW NC 28398-0856	PRIMARY

Property Info

Personal:	Value (\$)	Adj Value (\$)
Exempt:	64,370	0
Total Value:	0	0
	64,370	0

Bill Info

Source Type/System:	RMV PROPERTY TAX		
Abstract #:	0022946735-2017-2017-0000		
Bill Date:	07/30/2017	Created By:	CLPOTTER
Interest Begin Date:	11/16/2017	Final Payment Date:	08/23/2017
Bill Due Date:	11/15/2017		

Lender: VIN#: 1XKZDP9X9FJ450967 Plate#: YD3041
 Description: 2015 KW CONSTRUCTION TR
 Situs: 1-599 COMMERCE ST CLINTON NC 28328
Property Details

Tax Amount

# Months	Description	Original Billed(\$)	Current Due (\$)
	Tax & Fees	881.87	0.00
	Interest		0.00
	Total	881.87	0.00

Additional Taxes

Payment History

Transaction Summary

Transaction Detail History

Notes

Change History

All Notes Notes Logs Documents Refresh

Submit Notes

Add Note

Temporary
 Permanent

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TYPE NOTE HERE...

NCVTS Vehicle Appeal Workflow Admin Options Help VNORRIS1 Search Abstract # [v] Tax Year: 2018

NCVTS -> Vehicle Tax -> Bill Search Results -> Bill Detail

Bill #: 0022946735-2016-2016-0000-00 REG
 Bill Status: PAID Returned Mail: NA
 Interest Recalc Prorate Bill Print

Taxpayer Info

Owner Id	ID Number	Name	Mailing Address	Owner Order *
19130548	DRIVER LICENSE-*****73759	MURPHY BROWN LLC	PO BOX 856 WARSAW NC 28398-0856	PRIMARY

Property Info

Personal:	Value (\$)	78,630	Adj Value (\$)	0
Exempt:		0		0
Total Value:		78,630		0
Lender:	VIN#: 1XKZDP9X9FJ450967	Plate#: YD3041		
Description:	2015 KW CONSTRUCTION TR			
Situs:	1-599 COMMERCE ST CLINTON NC 28328			
Property Details				

Bill Info

Source Type/System:	RMV PROPERTY TAX		
Abstract #:	0022946735-2016-2016-0000		
Bill Date:	07/31/2016	Created By:	CLPOTTER
Interest Begin Date:	11/16/2016	Final Payment Date:	09/08/2016
Bill Due Date:	11/15/2016		

Tax Amount

# Months	Description	Original Billed(\$)	Current Due (\$)
	Tax & Fees	1,081.16	0.00
	Interest		0.00
	Total	1,081.16	0.00

Additional Taxes

Payment History

Transaction Summary

Transaction Detail History

Notes

Change History

All Notes Notes Logs Documents Refresh

Submit Not

Add Note

- Temporary
- Permanent

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TYPE NOTE HERE...

Year For: 2017

7/10/2017 12:09:48 PM	Doc Type:	Printing Method: Export	Document #: 147023	Status: DOWNLOADED	Delete
Updated By: amitchell6	Entity: BILL				Mark Secur

Year For: 2016

OFFICE OF THE SAMPSON COUNTY TAX ADMINISTRATOR

P. O. BOX 1082 - CLINTON, NORTH CAROLINA 28329-1082

8792

JIM JOHNSON
Tax Administrator

Telephone 910-592-8146
910-592-8147

SAMPSON COUNTY BOARD OF COMMISSIONERS
406 COUNTY COMPLEX ROAD, BUILDING C
CLINTON, NORTH CAROLINA 28328

Members:

Pursuant to North Carolina G. S. 105-381, I hereby demand refund and remission of taxes assessed and collected by Sampson County against the property owned by Mattie Pearl Rogers in _____ Township, Sampson County, for the year(s) and in the amount(s) of:

YEAR	
2017	\$ 132.32
	\$
	\$
	\$
	\$

TOTAL REFUND \$ 132.32

These taxes were assessed through clerical error as follows.

Bill # 0033845-694
YPF 8259

Tag Turn in (Turn vehicle back in)
2013 Chry

602	County Tax	79.68
501	School Tax	14.01
	Fire Tax	
702	City Tax	38.63
	TOTAL \$	132.32

Mailing Address.

110 Eastover Ave
Clinton Nc 28328

Yours very truly

Mattie P Rogers
Taxpayer

Social Security # _____

RECOMMEND APPROVAL

Jim Johnson
Sampson County Tax Administrator

Board Approved _____
Date _____ Initials _____

OFFICE OF THE SAMPSON COUNTY TAX ADMINISTRATOR

P. O. BOX 1082 - CLINTON, NORTH CAROLINA 28329-1082

8784

JIM JOHNSON
Tax Administrator

Telephone 910-592-8146
910-592-8147

SAMPSON COUNTY BOARD OF COMMISSIONERS
406 COUNTY COMPLEX ROAD, BUILDING C
CLINTON, NORTH CAROLINA 28328

Members:

Pursuant to North Carolina G. S. 105-381, I hereby demand refund and remission of taxes assessed and collected by Sampson County against the property owned by Justin Wade Garner in _____ Township, Sampson County, for the year(s) and in the amount(s) of:

YEAR	
2017	\$ 226.46
{	\$
{	\$
{	\$
{	\$
{	\$
TOTAL REFUND	\$ 226.46

These taxes were assessed through clerical error as follows.

Bill# 0043708340
YL6644
Tag Turned in (sold)
2017 Ford

602 County Tax 226.46
 School Tax _____
 Fire Tax _____
 City Tax _____
 TOTAL \$ 226.46

Mailing Address.

X 341 Williams Rd
Newton Grove NC 28366

Yours very truly

X Justin Wade Garner
Taxpayer

Social Security # _____

RECOMMEND APPROVAL:

Jim Johnson
Sampson County Tax Administrator

Board Approved _____
Date _____ Initials _____

OFFICE OF THE SAMPSON COUNTY TAX ADMINISTRATOR

P. O. BOX 1082 - CLINTON, NORTH CAROLINA 28329-1082

8799

JIM JOHNSON
Tax Administrator

Telephone 910-592-8146
910-592-8147

SAMPSON COUNTY BOARD OF COMMISSIONERS
406 COUNTY COMPLEX ROAD, BUILDING C
CLINTON, NORTH CAROLINA 28328

Members:

Pursuant to North Carolina G. S. 105-381, I hereby demand refund and remission of taxes assessed and collected by Sampson County against the property owned by George Harold Wilson, Jr.
in Plain View Township, Sampson County, for the year(s) and in the amount(s) of:

YEAR	
<u>2014</u>	\$ <u>275.20</u>
<u>2015</u>	\$ <u>275.20</u>
<u>2016</u>	\$ <u>275.20</u>
<u>2017</u>	\$ <u>273.72</u>
	\$ _____
TOTAL REFUND	\$ <u>1,099.32</u>

These taxes were assessed through clerical error as follows.

OL to land Parcel # 14018301301
LIN Parcel # 14017763201

County Tax \$980.96
 School Tax _____
 Fire Tax \$118.36
 City Tax _____
 TOTAL \$ 1,099.32

Mailing Address.

George A. Wilson, Jr.
76 Hollerin Rd.
Dunn NC 28334

Yours very truly

George Harold Wilson Jr

 Taxpayer

Social Security # _____

RECOMMEND APPROVAL:

Jim Johnson

 Sampson County Tax Administrator

Board Approved _____
 Date _____ Initials _____

OFFICE OF THE SAMPSON COUNTY TAX ADMINISTRATOR

Members:

Pursuant to North Carolina G. S. 105-381, I hereby demand a release and adjustment of taxes assessed by Sampson County against the property owned by David G. Jones, Sr in Westbrook Township, Sampson County, for the year(s) and in the amount(s) of:

Year		
<u>2016</u>	\$	<u>446.55</u>
<u>2017</u>	\$	<u>444.15</u>
<u>2018</u>	\$	<u>444.15</u>
	\$	
	\$	
Total Release/Adjustment	\$	<u>1334.85</u>

<u>601</u>	County Tax	\$	<u>1190.79</u>
	School Tax	\$	
<u>F07</u>	Fire Tax	\$	<u>144.06</u>
	City Tax	\$	
	Total	\$	<u>1334.85</u>

The taxes were assessed through clerical error or an illegal tax as follows:

Parcel 19-0107907-01 - LHDW moved w/out a moving permit - Accd to DMV records, DW was sold 10-13-15

Taxpayer: David G. Jones

Tax Administrator: [Signature]

Board Approved: _____
Date Initials

Oct 26, 2018 8:48:30 AM
VQ17 |750

TITLE HISTORY

10/26/18 08:48:12

CMD 13907558AB FUEL
1998 REDM MH

— MARTY WRIGHT HOME SALES INC

TITLE 779416152826909 TRF DT 091015 PRNT DT 101315Y OWNERS 1 LEASE N
STATUS CANCELLED TO SC DEALER

— DAVID G JONES

JANET M SMITH

TITLE 779623990331909 TRF DT 111498 PRNT DT 020499Y OWNERS 2 LEASE N
STATUS CANCELLED - VEHICLE SOLD DEALER

—

TITLE	TRF DT	PRNT DT	OWNERS	LEASE
STATUS			DEALER	

SYS0007 - END OF DATA

PF1/HELP	PF2/IMAGE	PF3/RETURN	PF4/	PF5/	PF6/HOLD CD
PF7/BACKWARD	PF8/FORWARD	PF9/PRINT	PF10/	PF11/	PF12/MENU

Oct 26, 2018 8:48:40 AM

VQ12 |750

GENERAL VEHICLE DETAIL

10/26/18 08:48:36

STATUS CANCELLED TO SC

OD 000000000

TITLE 779416152826909

1998 REDM

MH

13907558AB

DEALER

FUEL

ACT DT 013116 TITLE DT 111498 TRF DT 091015 APPL DT 100915 PRNT DT 101315Y

OWNER ID 000042101925 OWNERS 1 LIENS 0 EQUIP

TAX CNTY

N MARTY WRIGHT HOME SALES INC

937 COTTINGHAM BLVD N

BENNETTSVILLE SC 295122862

LESSEE ID LESSEES CONTROL

PLATE NO

ISS DT

EXP DT

WEIGHT

FHVUT DT

CAT

USE

DRAFT

P#

STATUS

CERT DT

CERT TYPE

INQ0020 - VEHICLE HAS NO REGISTRATION

PF1/HELP

PF2/IMAGE

PF3/RETURN

PF4/

PF5/LESSEES

PF6/OWNERS

PF7/HOLD CD

PF8/

PF9/PRINT

PF10/DRAFTS

PF11/ADDINFO

PF12/MENU

My File Edit Tools Help



Preferences

Account Information

Parcel: 19-0107907-01
 Location: ** MULTIPLE **
 Name: JONES, DAVID GERALD SR

Notes/Alerts

Special Conditions/Notes

Special conditions exist for one or more account bills.

Effective Date

Due 10/25/2018

Account Bills

Year	Type	Bill	NSC Reference	Due Date	Billed	Abt/Adj	Pmt/Crd	Unpaid	Interest Paid	Interest Due	Total Due
2002	RE-R	42169	0 0 LH 3505 EASY	09/01/2002	575.47	0.00	575.47	0.00	15.83	0.00	0.00
2003	RE-R	20568	0 0 LH	09/01/2003	489.89	0.00	489.89	0.00	13.47	0.00	0.00
2004	RE-R	43257	0 0 LH	09/10/2004	489.89	0.00	489.89	0.00	9.80	0.00	0.00
2005	RE-R	21086	0 0 LH	09/01/2005	550.72	0.00	550.72	0.00	11.01	0.00	0.00
2006	RE-R	21375	0 0 LH	09/01/2006	576.34	0.00	576.34	0.00	0.00	0.00	0.00
2007	RE-R	44760	0 0 LH	09/01/2007	576.34	0.00	576.34	0.00	0.00	0.00	0.00
2008	RE-R	45177	0 0 LH	09/01/2008	598.75	0.00	598.75	0.00	20.96	0.00	0.00
2009	RE-R	45465	0 0 LH	09/01/2009	598.75	2.00	600.75	0.00	57.55	0.00	0.00
2010	RE-R	45678	0 LH 3505 EASY ST	09/01/2010	302.58	0.00	302.58	0.00	10.59	0.00	0.00
2011	RE-R	22375	0 LH 3505 EASY ST	09/01/2011	203.70	2.00	205.70	0.00	14.86	0.00	0.00
2012	RE-R	22550	0 LH 3505 EASY ST	09/01/2012	203.70	0.00	203.70	0.00	0.00	0.00	0.00
2013	RE-R	23059	0 LH 3505 EASY ST	09/01/2013	203.70	0.00	203.70	0.00	0.00	0.00	0.00
2014	RE-R	25262	1 LH 3505 EASY ST	09/01/2014	446.55	3.00	0.00	449.55	0.00	150.61	610.16
2015	RE-R	23420	1 3505 EASY ST	09/01/2015	446.55	3.00	0.00	449.55	0.00	120.14	569.69
2016	RE-R	25537	1 3505 EASY ST	09/01/2016	446.55	3.00	0.00	449.55	0.00	79.79	529.34
2017	RE-R	23633	1 3505 EASY ST	09/01/2017	444.15	3.00	0.00	447.15	0.00	39.12	486.27
2018	RE-R	48685	0 3505 EASY ST	09/01/2018	444.15	0.00	0.00	444.15	0.00	0.00	444.15
Totals:					\$,156.12	16.00	5,932.17	2,239.95	165.23	399.66	2,639.61

OFFICE OF THE SAMPSON COUNTY TAX ADMINISTRATOR

Members:

Pursuant to North Carolina G. S. 105-381, I hereby demand a release and adjustment of taxes assessed by Sampson County against the property owned by William Casper Martin Jr. in _____ Township, Sampson County, for the year(s) and in the amount(s) of:

Year	<u>2018</u>	\$ _____
_____		\$ _____
_____		\$ _____
_____		\$ _____
_____		\$ _____
Total Release/Adjustment		\$ <u>21,914.45</u>

County Tax G01	\$ <u>19545.32</u>
School Tax	\$ _____
Fire Tax F07	\$ <u>2369.13</u>
City Tax	\$ _____
Total	\$ <u>21,914.45</u>

The taxes were assessed through clerical error or an illegal tax as follows: Clerk keyed in two boat values as one on same line.
 Tax payer owes \$23.93 F07 - \$221.36 correct total
 \$197,43601

Value Keyed
2,393,060
Correct Value
23,930

Taxpayer: William Casper Martin Jr.
 Tax Administrator: [Signature]
 Board Approved: _____
 Date: _____ Initials: _____

My File Edit Tools Help



- Original Bill
- Reprint
- Garnish
- Preferences
- Diagnostics

Bill Information

Year	Category	Number
2018	PP-R	4084

Notes/Alerts

JAN 1 Owner: MARTIN, WILLIAM CASP

Special Conditions/Notes

View prior unpaid bills

Effective Date

Due 11/09/2018

Billed Item Information

Year_Property 2018_42106 [View Source](#)
 Property ID 42106

Customer Information

Customer ID 138810 [View Bills](#)
 MARTIN, WILLIAM CASPER JR
 8161 NEWTON GROVE HWY
 DUNN, NC 28334

Property Information

Parcel ID
 Prop ID 42106 [View Bills](#)
 Prop Loc

Installments Charges History Events Audits

Due Date	Billed	Abt/Adj	Pmt/Crd	Unpaid	Interest Paid	Interest Due	Total Due
09/01/2018	22,135.81	0.00	0.00	22,135.81	0.00	0.00	22,135.81
Totals:	22,135.81	0.00	0.00	22,135.81	0.00	0.00	22,135.81



Chgs/Taxes

Values

Pers prop ID: 42106 Tax year(s): 2018

Parcel: Street: Unit: Current owner names: Add'l names? MARTIN, WILLIAM CASPER JR

Juris: 19 Class: PP Status: A DBA: Own:

Subdiv: Bus-cd: List: L Field audit: By: Exempt:

List yr: 0 Filed?: N Desk audit: By:

Created: 09/15/2017 Old ID:

Class	Assessmnt	Description	Tax/exem	Rate	Amount	Totals
MV	2,393,060.00	MOTOR VEHICLE	F07	.100000	2,393.06	Taxes
			G01	.825000	19,742.75	22,135.81
						Exempt/abated
						.00
						Net taxes
Total	2,393,060.00					22,135.81

Display charges and taxes for the current record.

QVR

OFFICE OF THE SAMPSON COUNTY TAX ADMINISTRATOR

Members:

Pursuant to North Carolina G. S. 105-381, I hereby demand a release and adjustment of taxes assessed by Sampson County against the property owned by Thomas Ray McPhail in Dismal Township, Sampson County, for the year(s) and in the amount(s) of:

Year		
<u>2018</u>	\$	<u>39.41</u>
<u>2017</u>	\$	<u>62.08</u>
<u>2016</u>	\$	<u>91.90</u>
<u>2015</u>	\$	<u>121.40</u>
<u>2014</u>	\$	<u>152.07</u>
<u>2013</u>	\$	<u>176.61</u>
Total Release/Adjustment		<u>\$ 176.61</u>
(G-0) County Tax	\$	<u>411.44 / LL 168.13</u>
School Tax	\$	<u> </u>
F20 Fire Tax	\$	<u>45.29 / LL 18.61</u>
City Tax	\$	<u> </u>
Total	\$	<u>643.47</u>

The taxes were assessed through clerical error or an illegal tax as follows:

Taxpayer listed backhoe, CTSI included/discovered in audit as well.

Taxpayer: Thomas Ray McPhail

Tax Administrator: [Signature]

Board Approved: _____

Date: _____ Initials: _____

**COUNTY OF SAMPSON
BUDGET AMENDMENT**

MEMO:

FROM: David K. Clack, Finance Officer
 TO: Sampson County Board of Commissioners
 VIA: County Manager & Finance Officer
 SUBJECT: Budget Amendment for fiscal year 2018-2019

1. It is requested that the budget for the Finance Department be amended as follows:

<u>Expenditure Account Code</u>	<u>Description (Object of Expenditure)</u>	<u>Increase</u>	<u>Decrease</u>
11141300-599900	Disaster relief	850,000.00	

<u>Revenue Account Code</u>	<u>Source of Revenue</u>	<u>Increase</u>	<u>Decrease</u>
11033010-402605	FEMA funds	850,000.00	

2. Reason(s) for the above request is/are as follows:
 To allocate funds to pay for the costs related to Hurricane Florence.



 (Signature of Department Head)

ENDORSEMENT

1. Forwarded, recommending approval/disapproval.

_____, 2018
 11/27



 (County Finance Officer)

ENDORSEMENT

1. Forwarded, recommending approval/disapproval.

_____, 20____



 (County Manager & Budget Officer)

 Date of approval/disapproval by B.O.C.

**COUNTY OF SAMPSON
BUDGET AMENDMENT**

MEMO:

FROM: David K. Clack, Finance Officer
 TO: Sampson County Board of Commissioners
 VIA: County Manager & Finance Officer
 SUBJECT: Budget Amendment for fiscal year 2018-2019

1. It is requested that the budget for the City Schools Capital Outlay be amended as follows:

<u>Expenditure Account Code</u>	<u>Description (Object of Expenditure)</u>	<u>Increase</u>	<u>Decrease</u>
11659110-555030	Category 1 capital outlay	233,630.00	
11659110-555031	Category 2 capital outlay	125,000.00	
11659110-555032	Category 3 capital outlay	30,000.00	
11659110-550000	Unallocated capital outlay		303,633.00
19959110-582096	Trans to general fund	84,997.00	

<u>Revenue Account Code</u>	<u>Source of Revenue</u>	<u>Increase</u>	<u>Decrease</u>
19932320-409900	Fund balance appropriated	84,997.00	
11035911-409612	Transfer from school cap reserve	84,997.00	

2. Reason(s) for the above request is/are as follows:

To allocate capital outlay funds and bring forward unexpended funds from prior year.

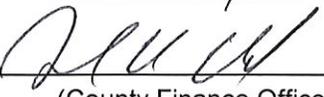


 (Signature of Department Head)

ENDORSEMENT

1. Forwarded, recommending approval/disapproval.

_____, 11/26, 2018

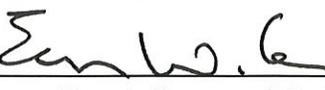


 (County Finance Officer)

ENDORSEMENT

1. Forwarded, recommending approval/disapproval.

_____, 20____



 (County Manager & Budget Officer)

 Date of approval/disapproval by B.O.C.

**COUNTY OF SAMPSON
BUDGET AMENDMENT**

MEMO:

October 29, 2018

FROM: Lorie Sutton, Director of Aging

Date

TO: Sampson County Board of Commissioners

VIA: County Manager & Finance Officer

SUBJECT: Budget Amendment for fiscal year 2018-2019

1. It is requested that the budget for the AGING Department be amended as follows:

<u>Expenditure Account</u>	<u>Expenditure Account Description</u>	<u>Increase</u>	<u>Decrease</u>
02558680-526200	Senior Center - Departmental Supplies	\$ 200.00	

<u>Revenue Account</u>	<u>Revenue Account Description</u>	<u>Increase</u>	<u>Decrease</u>
02035868-408401	Senior Center - Donations	\$ 200.00	

2. Reason(s) for the above request is/are as follows:

To budget donation that was given to the Garland Senior Center from a local business.

Lorie B Sutton
(Signature of Department Head)

ENDORSEMENT

1. Forwarded, recommending approval/disapproval.

11/27, 2018

M. C. C.
(County Finance Officer)

ENDORSEMENT

1. Forwarded, recommending approval/disapproval.

_____, 20____

Earl W. Lee
(County Manager & Budget Officer)

Date of approval/disapproval by B.O.C.

OCT 29 PM 02:55

**COUNTY OF SAMPSON
BUDGET AMENDMENT**

MEMO:

11/19/2018

FROM: SAMPSON COUNTY HEALTH DEPARTMENT

Date

TO: Sampson County Board of Commissioners

VIA: County Manager & Finance Officer

SUBJECT: Budget Amendment for fiscal year 2018-2019

1. It is requested that the budget for the Environmental Health Department be amended as follows:

<u>Expenditure Account</u>	<u>Expenditure Account Description</u>	<u>Increase</u>	<u>Decrease</u>
12551810-526200	DEPARTMENT SUPPLIES	8,745.00	
12551810-551000	CAPITAL OUTLAY FURN & EQUIPMENT	15,000.00	
12551810-531100	TRAVEL	1,200.00	
12551810-544000	CONTRACT SERVICES	23,567.00	

<u>Revenue Account</u>	<u>Revenue Account Description</u>	<u>Increase</u>	<u>Decrease</u>
12535181-404000	STATE ASSISTANCE	48,512.00	

2. Reason(s) for the above request is/are as follows:

ALLOCATE ADDITIONAL NEW STATE FUNDS FOR MOSQUITO ABATEMENT

Wanda Robinson
(Signature of Department Head)

ENDORSEMENT

1. Forwarded, recommending approval/disapproval.

11/27, 2018

[Signature]
(County Finance Officer)

ENDORSEMENT

1. Forwarded, recommending approval/disapproval.

_____, 20____

[Signature]
(County Manager & Budget Officer)

Date of approval/disapproval by B.O.C.

**COUNTY OF SAMPSON
BUDGET AMENDMENT**

MEMO:

11/19/2018

FROM: SAMPSON COUNTY HEALTH DEPARTMENT

Date

TO: Sampson County Board of Commissioners

VIA: County Manager & Finance Officer

SUBJECT: Budget Amendment for fiscal year 2018-2019

1. It is requested that the budget for the CHILD HEALTH Department be amended as follows:

<u>Expenditure Account</u>	<u>Expenditure Account Description</u>	<u>Increase</u>	<u>Decrease</u>
12551690-531100	TRAVEL	1,963.00	

<u>Revenue Account</u>	<u>Revenue Account Description</u>	<u>Increase</u>	<u>Decrease</u>
12535169-404000	STATE ASSISTANCE	1,963.00	

2. Reason(s) for the above request is/are as follows:

ALLOCATE NEW STATE FUNDS FOR CHILD HEALTH TO USE TO TRAIN NEW CHILD HEALTH NURSE

Walter R. Ralston
(Signature of Department Head)

ENDORSEMENT

1. Forwarded, recommending approval/disapproval.

11/27, 2018
[Signature]
(County Finance Officer)

ENDORSEMENT

1. Forwarded, recommending approval/disapproval.

_____, 20____
[Signature]
(County Manager & Budget Officer)

Date of approval/disapproval by B.O.C.

**COUNTY OF SAMPSON
BUDGET AMENDMENT**

MEMO:

11/19/2018

FROM: SAMPSON COUNTY HEALTH DEPARTMENT

Date

TO: Sampson County Board of Commissioners

VIA: County Manager & Finance Officer

SUBJECT: Budget Amendment for fiscal year 2018-2019

1. It is requested that the budget for the COMMUNICABLE DISEASE Department be amended as follows:

<u>Expenditure Account</u>	<u>Expenditure Account Description</u>	<u>Increase</u>	<u>Decrease</u>
12551250-526200	DEPARTMENT SUPPLIES	830.00	
12551250-523900	MEDICAL SUPPLIES	1,661.00	
12551250-531100	TRAVEL	830.00	

<u>Revenue Account</u>	<u>Revenue Account Description</u>	<u>Increase</u>	<u>Decrease</u>
12535125-404000	STATE ASSISTANCE	3,321.00	

2. Reason(s) for the above request is/are as follows:

ALLOCATE NEW STATE FUNDS FOR TB CONTROL NEEDS

Wanda Palmer
(Signature of Department Head)

ENDORSEMENT

1. Forwarded, recommending approval/disapproval.

11/27, 2018
M. A. C.
(County Finance Officer)

ENDORSEMENT

1. Forwarded, recommending approval/disapproval.

_____, 20____
Sam B. G.
(County Manager & Budget Officer)

Date of approval/disapproval by B.O.C.

**SAMPSON COUNTY
BOARD OF COMMISSIONERS**

ITEM ABSTRACT

ITEM NO. 6

Meeting Date: December 3, 2018

<input checked="" type="checkbox"/>	Information Only	<input type="checkbox"/>	Public Comment
<input type="checkbox"/>	Report/Presentation	<input type="checkbox"/>	Closed Session
<input type="checkbox"/>	Action Item	<input type="checkbox"/>	Planning/Zoning
<input type="checkbox"/>	Consent Agenda	<input type="checkbox"/>	Water District Issue

INFORMATION ONLY - BOARD OF HEALTH ITEMS

For all Board Information items, please contact the County Manager's Office if you wish to have additional information on any of the following.

- a. Health Advisory Committee Operating Procedures, as revised
- b. Health Advisory Board Minutes, October 15, 2018

**SAMPSON COUNTY HEALTH DEPARTMENT ADVISORY COMMITTEE
OPERATING PROCEDURES**

I. Name and Principal Office.

The name of the organization is the Sampson County Health Department Advisory Committee (the “Committee”). The principal office of the Committee is located at 360 County Complex Road, Suite 200, Clinton, North Carolina 28328.

II. Membership and Training.

A. Membership.

The Committee shall consist of eleven (11) members, whose composition will comply with N.C. Gen. Stat. § 130A-35, as required by N.C. Gen. Stat. § 153A-77(a). With the exception of the member who is also a member of the Sampson County Board of Commissioners, members of the Committee shall serve three (3) year terms and may not serve more than three (3) consecutive terms. The county commissioner serving on the Committee shall serve only so long as he or she is also a member of the Sampson County Board of Commissioners.

B. Orientation.

The local health director shall assure that new Committee members receive orientation within one (1) year of their appointment to the Committee. This orientation shall consist of training regarding new members’ service on the Committee, including their role on the Committee, the authorities and responsibilities of local boards of health and advisory bodies to local boards of health, and public health functions. Re-appointed Committee members shall not be required to complete repeat orientation unless the content of the orientation has changed since their orientation.

C. On-Going Training.

The local health director shall assure that Committee members receive on-going training each calendar year regarding their authorities and responsibilities as they relate to relevant and/or emerging public health topics. The local health director, in consultation with the Committee, shall establish a schedule of on-going training sessions.

III. Officers and Committees.

A. Chair and Vice-Chair.

The Committee members shall elect a Chair and a Vice-Chair by majority vote each year at the Committee's January regular meeting.

B. Secretary.

The local health director shall serve as Secretary to the Committee but is not a member of the Committee. The local health director may delegate the duties of the Secretary that are set forth in these operating procedures to an appropriate local health department employee or other designee.

C. Standing Sub-Committees.

The Committee shall have such standing sub-committees as it shall from time to time constitute. There is currently one (1) standing sub-committee: the Executive Sub-Committee, which is comprised of the Chair, the Vice-Chair, and two (2) other Committee members selected by majority vote of the Committee. All standing sub-committees are subject to North Carolina open meetings laws and shall comply with the provisions thereof.

D. Temporary Sub-Committees.

The Committee may establish and appoint members for temporary sub-committees as needed to carry out the Committee's work. All temporary sub-committees are subject to North Carolina open meetings laws and shall comply with the provisions thereof.

IV. Meetings.

A. Regular Meetings.

The Committee shall hold a regular meeting at least quarterly on the third Monday of the month. The meeting shall be held at a predetermined designated location at 7:00 p.m.

B. Special Meetings.

The Chair or a majority of the members of the Committee may at any time call a special meeting of the Committee by signing a notice stating the time and place of the meeting and the subjects to be considered. The person(s) who call the meeting shall cause the notice to be posted on the door of the regular meeting place and delivered to the Chair and all other Committee members or left at the usual dwelling place of each member at least 48 hours before the meeting. In addition, notice shall

be provided to individual persons and news media organizations who have requested such notice. Only those items of business specified in the notice may be transacted at a special meeting, unless all members are present or those who are not present have signed a written waiver.

C. Emergency Meetings.

If a special meeting is called to deal with an unexpected circumstance that requires immediate consideration by the Committee, the notice requirements for regular and special meetings do not apply. However, the person or persons who call an emergency meeting shall take reasonable action to inform the other members and the public of the meeting. Local news organizations who have requested notice of special meetings shall be notified of such emergency meeting by the same method used to notify Committee members. Only business connected with the emergency may be discussed at the meeting.

D. Agenda.

The Secretary to the Committee shall prepare an agenda for each meeting. Any Committee member who wishes to place an item of business on the agenda shall submit a request to the Secretary at least two (2) working days before the meeting. For regular meetings, the Board may add items to the agenda or subtract items from the agenda by a majority vote. The agenda for a special or emergency meeting may be altered only if permitted by and in accordance with the North Carolina open meetings laws.

Any person may request that an item be placed on the Board's agenda by submitting a written request to the Secretary at least ten working days before the meeting.

E. Presiding Officer.

The Chair of the Committee shall preside at Committee meetings if he or she is present. If the Chair is absent, the Vice-Chair shall preside. If the Chair and Vice-Chair are both absent, another member designated by a majority vote of members present at the meeting shall preside.

F. Quorum.

A majority of the actual membership of the Committee, excluding vacant seats, shall constitute a quorum. A member who has withdrawn from a meeting without being excused by a majority vote of the remaining members shall be counted as present for purposes of determining whether or not a quorum is present.

G. Voting.

A member must abstain from voting in cases involving conflicts of interest as defined by North Carolina law. If a member has withdrawn from a meeting without being excused by a majority vote of the remaining members, the member's vote shall be recorded as an abstention. A quorum must be present to vote. Electronic voting is allowed in between board meeting, if deem necessary by the Chair and the Secretary.

H. Minutes.

The Secretary shall prepare minutes of each Committee meeting. Copies of the minutes shall be made available to each Committee member before the next regular Committee meeting. At each regular meeting, the Committee shall review the minutes of the previous regular meeting as well as any special or emergency meetings that have occurred since the previous regular meeting, make any necessary revisions, and approve the minutes as originally drafted or as revised. The public may obtain copies of Committee meeting minutes at Sampson County Health Department.

V. Rule-Making Procedures and Other Procedural Matters.

The Committee is advisory in nature and shall have no rule-making authority. Although the Committee may recommend proposed rules to the Board of Health as part of its advisory function, the Board of Health shall be the sole body with the authority to adopt rules. The Committee shall refer to the current edition of *Robert's Rules of Order Newly Revised* ("RONR") to answer procedural questions not addressed in these Operating Procedures so long as the procedures prescribed in *RONR* do not conflict with North Carolina law.

VI. Amendments to Operating Procedures.

These Operating Procedures may be amended at any regular meeting or at any properly called special meeting that includes amendment of the Operating Procedures as one of the stated purposes of the meeting. A quorum must be present at the meeting at which amendments to the Operating Procedures are discussed and approved, and any amendments to the Operating Procedures must be approved by a majority of the members present at the meeting.

VII. Compliance with North Carolina Law.

In conducting its business, the Committee shall comply with all applicable North Carolina law, including, but not limited to, open meetings laws and public records laws. To assist the Committee in compliance, the Secretary shall maintain a current copy of relevant North Carolina General Statutes and make them available to Committee members upon request.

APPROVED AND ADOPTED, by the Sampson County Health Department Advisory Committee, this the _____ day of November, 2018.

JACQUELINE HOWARD, Chair,
Sampson County Health Department Advisory
Committee

WANDA ROBINSON, Secretary,
Sampson County Health Department Advisory
Committee

**Sampson Count Health Department Advisory Committee Minutes
October 15, 2018**

Member Attendance: Dr. Jeffrey Bell, Paul Bradshaw, Dr. Beth Bryan, Robert Butler, charlotte Harrell, Linda Heath, Jacqueline Howard, Chair, Allie Ray McCullen Commissioner Harry Parker, Linda Peterson.

Not in Attendance: Dr. Beth Turner.

SCHD staff attendance: Wanda Robinson, Sally DeMay, Tamra Jones, Perry Solice.

Administration staff attendance: Edward Causey, Joel Starling.

I. Call to Order:

Jacqueline Howard, Chair call the Advisory Committee meeting to order.

II. Invocation:

Commissioner Harry Parker gave the invocation.

III. Approval of Minutes:

- a. August 20, 2018 minutes - motion made by Robert Butler to approve August 20, 2018 minutes as presented and second made by Commissioner Harry Parker. All in favor. Motion carried.

IV. Policy Review:

a. Health Department Advisory Committee Operating Procedures

Wanda Robinson reviewed Health Department Advisory Committee Operating Procedure. Procedure has been revised to reflect the new name of Sampson County Health Department Advisory Committee. Joel Starling has reviewed procedures and made suggestions in section E Membership; the County Commissioner serving on the Advisory Committee would be ex-officio; non-voting member. He or She would serve on Committee as long as he or she is also member of the Sampson Board of County Commissioners.

Wanda noted that a change needs to be made to section III. A. Regular Meetings; change second Monday of the month to meet third Monday of the month.

Discussion- Wanda Robinson asked Joel Starling in the event of a tied vote, what the process would be for the Committee. Who would break the tie? We had 11 voting members before-with the change of the ex-officio non-voting, would have 10 voting members. Joel Starling stated would need to add another member to the Advisory Committee; cannot have an evenly divided board. Joel explained from an Accreditation standpoint, do not want is having someone who is a voting member of the Health Advisory Committee and a voting member of the County Commissioners when acting as the Board of Health. Wanda Robinson stated that would need to look at the General Statutes to decide where we would like to add another disciple. Discussion regarding the General Statues that specify the disciplines that should be on the Board. Joel is not sure if that General Statue would apply to the Advisory Committee, he will check on the matter and bring information back to next meeting.

Motion to accept the SCHED Advisory Committee Operating Procedures with the change in meeting the third Monday of the month to be sent to Board of County Commissioners for approval made by Robert Butler and seconded by Allie Ray McCullen. All in favor. Motion carried.

b. Health Department Advisory Committee Conflict of Interest Policy

Wanda Robinson stated no change to this policy except with the name to SCHED Advisory Committee.

Motion made by Allie Ray McCullen to accept SCHED Advisory Committee Conflict of Interest Policy and forward to Board of County Commissioners. Motion seconded by Paul Bradshaw. All in favor. Motion carried.

c. Fiscal Policy

Tamra Jones presented the Fiscal Policy. Discussed the strike through items are being deleted; and the yellow color if the old information and green color is the new information being added to the policy. One change is that we can charge patient that have Medicaid if Medicaid does not pay. Has to be a Medicaid that does not cover that service received. Example given: Patient with Family Planning Waiver Medicaid comes in and gets an immunization. That is something that is not covered under Family Planning Waiver Medicaid, we can charge the patient. The patient signs a form stating that they understand those charges that can be applied to them and when they receive a bill, they are liable for those charges.

Motion made by Linda Peterson to accept Fiscal Policy and forward to Board of County Commissioners. Motion seconded by Commissioner Harry Parker. All in favor. Motion carried.

V. **State of the County Health Report (SCOTCH):**

Kelly Parrish gave background report. Health Department and Healthy Carolinians conduct a comprehensive Community Health Assessment (CHA) every 3 years. During the interim years the Health Department issues the SCOTCH report. Purpose of the reports is to track priority issues identified in the Community Health Assessment; identify emerging issues and identify new initiatives. Kelly reviewed page 2, the county profile of Sampson County. The leading cause of death in Sampson County was cancer in 2016. As a result of the 2017 CHA members of the Health Carolinians served the CHA team and selected Substance Abuse, STD's and Pregnancy Prevention in Chronic Disease as the top three health priorities. Kelly gave the meaning of Substance Abuse as the excessive use of substances, such as alcohol, tobacco, opioids and other addictive substances. Adult smoking Sampson County was a little above the state average; excessive drinking we were a little below the state average.

The North Carolina Youth Risk Behavior Survey is a survey of the high school students in North Carolina. Kelly pointed out that these numbers have significantly decreased since 2016.

Kelly discussed the Action Plan. Health Department submitted 5 articles to the Sampson Independent and Sampson Weekly on the Opioid Epidemic; Naloxone and Tobacco. Clinton Police Department and Sampson County Substance Abuse Coalition held two Take Back

events in March and collected 70 pounds of unused or expired pills. Coop Extension promoted a Prom Pledge and did a Red Ribbon Week reaching over 700 students. Kelly pointed out Eastpointe's list of events in their handout.

Kelly reviewed the STD's information; Sampson County had an increase in the Chlamydia and Gonorrhea cases between 2015 and 2016. There was a decrease in the number of cases between 2016 and 2017.

Pregnancy Prevention pointed out the graph showing the pregnancy rate among females between 15 and 19 years of age. Sampson County rate is significantly higher than the state rate. Wanda Robinson added that Sampson County is ranked number 3 in the state for teen pregnancies. Action Plan for Pregnancy Prevention, Kelly spoke of the Academic Abundance that reaches out to the high school students. Health Department partnered with the Healthy Carolinians Task Force for the 4th annual Teen Health Fair in March that reached approximately 500 middle and high school students. Health Department now offers long term contraceptives such as IUD's, and Nexplanon implant.

Chronic Disease was the third priority. Kelly discussed the rates and that Sampson County is still higher than the state averages for heart disease, diabetes and cancer. Obesity we were higher than the state average, but our percentage has decreased about 2% every year. Sampson County is still higher than the state in obesity in children.

Action Plan for Chronic Disease was newspaper articles; annual Breast Cancer Rally and Health Fair; Sampson County Breast, Cervical Cancer Control Program Advisory Board, distribute cancer ribbons. Also have the Diabetes Self-Management education program that reached 72 participates in 2017; partner with Sampson Regional Medical Center diabetes support group called Sugar Buddies, that had about 161 participates January through October. Health Department promotes the Eat Smart Move More; Maintain Don't Gain Holiday Challenge at the Health Department. Promoted the Fitness Renaissance Physical Fitness awards program during the 2017-2018 school year that reached approximately 4,000 students in grades Kindergarten through Third grade.

Discussed the new initiatives listed on page 10 of the handout. The Substance Coalition launched a new website. The Health Department adopted the State recommending Naloxone and implemented the distribution program to increase access to Naloxone. The BCCCP advisory board will apply for the 2019 United Way Sampson County funding application for cancer prevention and awareness. Increase Health Education programs to include Diabetes Education, BMI Counseling for Overweight and Underweight. Maternal Health and Child Health initiative to reduce Infant Mortality. Health Department will be hosting the 5th Annual Teen Fair.

Emerging Issues: Medicaid Changes, Increase in Opiates and Opioid usages; Education and awareness on the opioid epidemic; Teen Pregnancy Rate and Adult Obesity continues to be higher than the state averages.

VI. LabCorp Fee Schedule Update:

Tamra Jones reviewed the LabCorp Fees that need to be added to our Fee Schedule. Fees to be added are:

86703-90 Antibody, HIV-1 and HIV-2 single charge
81511-90 Quad Screen Panel
87340-90 Hepatitis B surface antigen
80074-90 Acute Hepatitis Panel A and B
86695-90 Herpes simplex test
86696-90 Herpes simplex type 2
86762-90 Rubella antibody

Motion made by Linda Peterson to accept the proposed LabCorp Fees and forward to Board of Commissioners. Seconded by Dr. Jeffery Bell. All in favor. Motion carried.

VII. Mosquito Abatement-Florence:

Wanda Robinson reported that Mosquito Abatement funding was allocated to counties that were declared Disaster areas. Funding was to be used to reduce the human-mosquito interaction. Allocations were based on counties with residents per square miles. Governor chose to use 4 million dollars to divide among the counties declared disaster areas. Sampson County was allocated \$95,660. This was sent directly to County Commissioners for approval the first of October. Some larger county health departments have a Vector Control program. Sampson County does not have a Vector Control program. Abatement actives- had to document the need for mosquito abatement. Environmental Health conducted Mosquito Landing Rate count tests. We also documented the increase of citizens' complaints and address to determine the areas affected. We had multiple phone call complaints. Perry Solice reported on average had about 12 to 15 phone calls complaints per day. Perry Solice explained the procedures used to conduct the Mosquito Landing Rate. They conducted an after test today and had significant decline in the mosquito count. These are your flood plain mosquitos. Some areas are bad, like Ivanhoe where there was a lot of standing water.

Ground truck spraying started on Saturday night with plans to spray 100 miles per night in alternating areas. This will take approximately 8 to 12 nights to complete. Mosquito dunks have also been ordered and are being given out by the Environmental Health Department. Approximately 300 dunks were given to an individual from the Ivanhoe area and some were given to the Plainview Fire Department. Dunks kill the larva in the standing water, not to be used in ponds. Spray kills the adult mosquitos. Discussion followed regarding truck spraying instead of aerial spraying. Comment was made would like to see a Vector Control Program put in place for the county. Commissioner Parker commented that Ivanhoe area was one of the hardest hit areas in the county. Wanda remarked that we have had complaints from the Newton Grove area as well.

Wanda Robinson gave a handout of a map of Sampson County that noted the positions of Bee Keepers that we must notify before spraying in order to protect their bees. Sampson also has several organic farms that must be notified as well.

VIII. Financial Report:

Tamra Jones presented the activity summary which all numbers were down. Our offices were closed for what amounted to 6 days. This did take a toll on our activities and our revenues.

Discussed Financial reports. Several factors attributed to the decrease in revenues; the days office was closed; Dsnap program was administered in our building, which created long lines to get into building and large amount of people in the building. This may have contributed to an increase in our no-show rate during this time. Tamra reviewed our average of patients seen during this timeframe and last year we averaged 40 patients a day compared to average of 28 patients a day during the 8 days of administration of the Dsnap program. DSS did ask clients as they approached if they were there for Health or DSS and quickly routed the Health Department clients up to our area. Other contributing factors were discussed.

IX. Health Directors Report:

a. Personnel Changes/vacancies

Wanda Robinson announced that her second Practitioner has decided to retire and her last day will be November 20th. Wand is working on plans to handle the loss of another practitioner by possibly contracting for coverage. One issue is providing Child Health services, if not able to provide in the health department would have to contract with another provider to see Child Health appointments. Health Department would have to pay the provider for rendering those services at the Medicaid reimbursement rate. We would rather contract with someone to come into our Health Department to provide the Child Health services instead of sending clients out to a private provider. We do have a part-time provider, Laura Gray, that works three days a week. Potential of having another practitioner to work on Friday's. Kelly and Wanda have interviewed a practitioner that will not graduate until December. Maternal Health Program has a new OBGYN Provider, Dr. Ferrell, from the hospital has started seeing our OB clients and would like to see more clients, plan to work with them to see more OB clients that are 35 weeks and above.

Wanda and Kelly have conducted interviews for the nursing positions open and looking at hiring two nurses.

Wanda has interviewed a Nutritionist, waiting on approval from Office of State Personnel paperwork that was sent off week to week and half ago.

b. Accreditation Update

Accreditation information is due to be submitted by November 1st. Site visit will be in February 6th and 7th. Wanda is working on setting up interviews for the Site visit team.

X. Public Comment:

No public comment.

XI. Adjournment:

Motion made by Robert Butler to adjourn meeting, seconded by Jeffrey Bell. All in favor. Motion carried.

Chairman

Date

Secretary

Date

Date: 11/1/18

Mr. Thomas Ray McPhail
8511 Dunn Rd.
Salisbury, NC 28385

Account # 18736⁰³

Sampson County Board of Commissioners,

A compliance review was recently completed on my business personal property account with the Sampson County Tax Office. I respectfully request an adjustment of the penalties applied to my account for failure to timely list my assets. I fully understand that I must appear before the Sampson County Board of Commissioners at a date to be determined to be considered for a relief or adjustment of any penalties.

Thomas R. McPhail
Signature

Please see attached request for the following account:

Thomas Ray Melvin
(tax) 3639.97 (penalty)1018.03

Sampson County
Office of Tax Assessor
PO Box 1082
Clinton, NC 28329

Phone 910-592-8146

Fax 910-592-1227

Date: November 5, 2018

Thomas Stanford & Mary Beasley Melvin
300 Reeves Rd
Garland, NC 28441

Account # 187335, 20516 & 109668

Sampson County Board of Commissioners,

A compliance review was recently completed on my business personal property account with the Sampson County Tax Office. I respectfully request an adjustment of the penalties applied to my account for failure to timely list my assets. I fully understand that I must appear before the Sampson County Board of Commissioners at a date to be determined to be considered for a relief or adjustment of any penalties.

April M Turner

Signature

Please see attached request for the following account

1. Thomas Stanford & Mary Beasley Melvin
(Tax) \$7494.33 (Penalty) \$2594.59
Half of penalty \$1297.30



Installments

Property ID 47497 Version 7 - Subsequent

Recalc Charges

Tax year 2018 AR category 25 Bill number 1802410

Owner 187335 MELVIN, THOMAS STANFORD

Sequence	Year	Charge	Description	Activit	Calc Code	Taxable Value	Percent	Count	Rate	Tax Amount
1	2018	G01	CNTY TAX	PRIN	3	135,834	100.000000	0	0.825000	1,120.63
2	2017	G01	CNTY TAX	PRIN	3	135,834	100.000000	0	0.825000	1,120.63
3	2016	G01	CNTY TAX	PRIN	3	135,834	100.000000	0	0.830000	1,127.42
4	2015	G01	CNTY TAX	PRIN	3	135,834	100.000000	0	0.830000	1,127.42
5	2014	G01	CNTY TAX	PRIN	3	150,080	100.000000	0	0.830000	1,245.66
6	2013	G01	CNTY TAX	PRIN	3	119,680	100.000000	0	0.785000	939.49
7	2018	F22	GARLFD	PRIN	3	135,834	100.000000	0	0.100000	135.83
8	2017	F22	GARLFD	PRIN	3	135,834	100.000000	0	0.100000	135.83
9	2016	F22	GARLFD	PRIN	3	135,834	100.000000	0	0.100000	135.83
10	2015	F22	GARLFD	PRIN	3	135,834	100.000000	0	0.100000	135.83
11	2014	F22	GARLFD	PRIN	3	150,080	100.000000	0	0.100000	150.08
12	2013	F22	GARLFD	PRIN	3	119,680	100.000000	0	0.100000	119.68
13	2018	G01L	COUNTY LAT	LL	1	0	100.000000	0	10.000000	112.06
14	2017	G01L	COUNTY LAT	LL	1	0	100.000000	0	20.000000	224.13
15	2016	G01L	COUNTY LAT	LL	1	0	100.000000	0	30.000000	338.23
16	2015	G01L	COUNTY LAT	LL	1	0	100.000000	0	40.000000	450.97
17	2014	G01L	COUNTY LAT	LL	1	0	100.000000	0	50.000000	622.83
18	2013	G01L	COUNTY LAT	LL	1	0	100.000000	0	60.000000	563.69
19	2018	F22L	GARLAND FI	LL	1	0	100.000000	0	10.000000	13.58
20	2017	F22L	GARLAND FI	LL	1	0	100.000000	0	20.000000	27.17
21	2016	F22L	GARLAND FI	LL	1	0	100.000000	0	30.000000	40.75
22	2015	F22L	GARLAND FI	LL	1	0	100.000000	0	40.000000	54.33
23	2014	F22L	GARLAND FI	LL	1	0	100.000000	0	50.000000	75.04
24	2013	F22L	GARLAND FI	LL	1	0	100.000000	0	60.000000	71.81

Total rate 5.525000 Total tax 10,088.92

Sampson County
Office of Tax Assessor
PO Box 1082
Clinton, NC 28329

Phone 910-592-8146

Fax 910-592-1227

Date: 11/7/2018

R. Gerald Warren Secretary / Treasurer
Ms. Jacey J. Bass / Sampson GIN Co, INC
P.O. Box 526
Newton Grove, NC 28366-0526

Account # 23851

Sampson County Board of Commissioners,

A compliance review was recently completed on my business personal property account with the Sampson County Tax Office. I respectfully request an adjustment of the penalties applied to my account for failure to timely list my assets. I fully understand that I must appear before the Sampson County Board of Commissioners at a date to be determined to be considered for a relief or adjustment of any penalties.

R. Gerald Warren
Signature

Please see attached request for the following account:

R. Gerald Warren

Sampson Gin Company Inc.

(Tax) \$10108.50 (penalty) \$2152.82

Half penalty release \$1076.41

PUBLIC COMMENT POLICIES AND PROCEDURES
Revised June, 2018

In accordance with NCGS 153A-52.1, a period reserved for comments from the public on topics not otherwise included on that evening's agenda will be included as an item of business on all agendas of regularly-scheduled Board of Commissioners meetings and shall be deemed the "Public Comment" segment of the agenda. The Public Comment segment of the agenda will be placed at the end of the agenda, following the conclusion of all other open session business. Because subjects of Special and Emergency Meetings are often regulated by General Statutes, there will be no Public Comments segment reserved on agendas of these meetings; however, Special and Emergency Meetings are open for public attendance.

As with public hearings, the Chair (or presiding officer) will determine and announce limits on speakers at the start of the Public Comment period. Each speaker will be allocated no more than five (5) minutes. The Chairman (or presiding officer) may, at their discretion, decrease this time allocation if the number of persons wishing to speak would unduly prolong the meeting. A staff member will be designated as official timekeeper, and the timekeeper will inform the speaker when they have one minute remaining of their allotted time. When the allotted time is exhausted, the speaker will conclude their remarks promptly and leave the lectern. Speakers may not yield their time to another speaker, and they may not sign up to speak more than once during the same Public Comment period.

An individual wishing to address the Board during the Public Comment period shall register with the Clerk/Deputy Clerk to the Board prior to the opening of the meeting by signing his or her name, and providing an address and short description of his or her topic on a sign-up sheet stationed at the entrance of the meeting room. Any related documents, printed comments, or materials the speaker wishes distributed to the Commissioners shall be delivered to the Clerk/Deputy Clerk in sufficient amounts (10 copies) at least fifteen minutes prior to the start of the meeting. Speakers will be acknowledged to speak in the order in which their names appear on the sign-up sheet. Speakers will address the Commissioners from the lectern, not from the audience, and begin their remarks by stating their name and address.

To ensure the safety of board members, staff and meeting attendees, speakers are not allowed to approach the Board on the seating platform, unless invited by the Board to approach.

Speakers who require accommodation for a disabling condition should contact the office of the County Clerk or County Manager not less than twenty-four (24) hours prior to the meeting.

If time allows, those who fail to register before the meeting may be allowed speak during the Public Comment period. These individuals will be offered the opportunity to speak following those who registered in advance. At this time in the agenda, an individual should raise his or her hand and ask to be recognized by the Board Chair (or presiding officer) and then state his or her name, address and introduce the topic to be addressed.

A total of thirty (30) minutes shall be set aside for public comment. At the end of this time, those who signed up to speak but have not yet been recognized may be requested to hold their comments until the next meeting's public comment period, at which time they will be given priority for expression. Alternatively, the Board, in its discretion, may extend the time allotted for public comment.

Items of discussion during the Public Comment segment of the meeting will be only those appropriate to Open Meetings. Closed Meeting topics include, but are not limited to, such subjects as personnel, acquisition of real property, and information protected by the client-attorney privilege. Closed Meeting subjects will not be entertained. Speakers will not discuss matters regarding the candidacy of any person seeking public office, including the candidacy of the person addressing the Board.

Speakers will be courteous in their language and presentation, shall not use profanity or racial slurs and shall not engage in personal attacks that by irrelevance, duration or tone may threaten or perceive to threaten the orderly and fair progress of the discussion. Failure to abide by this requirement may result in forfeiture of the speaker's right to speak.

The Public Comments segment of the agenda is intended to provide a forum for the Board of Community to listen to citizens; there shall be no expectation that the Board will answer impromptu questions. However, Board members, through the presiding officer, may ask the speaker questions for clarification purposes. Any action on items brought up during the Public Comment period will be at the discretion of the Board. When appropriate, items will be referred to the Manager or the proper Department Head for further review.

A copy of the Public Comments Policy will be included in the agenda of each regular meeting agenda and will be made available at the speaker registration table. The policy is also available on the County's website.