



Wexford County

FINANCE & APPROPRIATIONS COMMITTEE

Brian Potter, Chair

NOTICE OF MEETING

The Finance and Appropriations Committee of the Wexford County Board of Commissioners will hold a regular meeting on Wednesday August 27, 2025, beginning at 4:00 p.m. in the Commissioners' Room, third floor of the Historic Courthouse, 437 E. Division St., Cadillac, Michigan.

TENTATIVE AGENDA

- A. CALL TO ORDER
- B. ROLL CALL
- C. ADDITIONS / DELETIONS TO THE AGENDA
- D. APPROVAL OF THE AGENDA
- E. APPROVAL OF AUGUST 14, 2025, REGULAR MEETING MINUTES..... 1
- F. PUBLIC COMMENTS
Designated for topics on the agenda only.
- G. AGENDA ITEMS
 - 1. Approval of the Claims *(Clerk's Office)*
 - 2. Revenue & Expense Reports 3
 - 3. Federal Drug Testing Contract FY26 – Community Corrections 11
 - 4. EOP Contract Renewal with CHS – Community Corrections 15
 - 5. Request to Increase LOC – Landfill..... 17
 - 6. Opioid Settlement Funding Agreement with CHS 18
 - 7. Opioid Settlement Funding Agreement with CWTA – Amendment No. 3 29
 - 8. Opioid Settlement Funding Agreement with DHD#10..... 32
- H. CORRESPONDENCE
- I. ADMINISTRATOR'S COMMENTS
- J. PUBLIC COMMENTS
- K. COMMITTEE COMMENTS
- L. CHAIR COMMENTS
- M. ADJOURN

WEXFORD COUNTY
FINANCE & APPROPRIATIONS COMMITTEE MEETING
REGULAR MEETING MINUTES
August 14, 2025

The regular meeting was called to order by Chairman Brian Potter at 4:00 p.m., in the Commissioners' Room, Third Floor, Historic Courthouse, 437 E. Division St. Cadillac, Michigan.

Members Present: Brian Potter, Mark Nyman, Gary Taylor, Sandy Bengelink
Members Absent: None
Also Present: Jami Bigger, Deputy Admin. & HR Director; Alaina Nyman, Clerk; Joe Porterfield, Equalization Director & Administrator; Megan Swanberg, Executive Assistant

ADDITIONS OR DELETIONS TO THE AGENDA

Added: G.4. Date Change for Finance Meeting

APPROVAL OF THE AGENDA

A motion was made by Comm. Taylor and supported by Comm. Nyman to approve the agenda, as amended. A vote was called, all in favor. Motion passed 4-0.

APPROVAL OF THE MINUTES

A motion was made by Comm. Talor and supported by Comm. Bengelink to approve the July 23, 2025, regular meeting minutes. A vote was called, all in favor. Motion passed 4-0.

PUBLIC COMMENTS

None.

AGENDA ITEMS

G.1. Approval of Claims

A motion was made by Comm. Bengelink and supported by Comm. Nyman to approve paying the claims in the amount of \$651,068.76. A vote was called, all in favor. Motion passed 4-0.

G.2. Community Development Block Grant Program for Emergency Repairs

A motion was made by Comm. Bengelink and supported by Comm. Nyman to forward a recommendation to the full board to hold a public hearing at the BOC meeting on August 20, 2025, for the closeout of the CDBG Program year 2023 and for the opening of CDBG Program year 2024.

Comm. Nyman asked what requirements were needed to get help with these grants. Mr. Porterfield stated there are several things they consider, such as yearly income.

A vote was called, all in favor. Motion passed 4-0.

G.3. PFN Service Order – Central Dispatch

A motion was made by Comm. Taylor and supported by Comm. Bengelink to forward a recommendation to the full board to approve the PFN Service Order for Central Dispatch. A vote was called, all in favor. Motion passed 4-0.

G.4. Date Change for Finance Meeting

A motion was made by Comm. Potter and supported by Comm. Taylor to approve the date change for the Finance Committee meeting on October 9, 2025, to October 3, 2025. A vote was called, all in favor. Motion passed 4-0.

CORRESPONDENCE

None.

ADMINISTRATOR'S COMMENTS

Mr. Porterfield, Administrator, informed the committee:

- He had Bendzinski Company to discuss the options for the new building.
- Departments are getting their budget completed and turned in.
- More opioids money was received this week.
- The Fair Board made a payment to the County this week toward the tractor in the amount of \$1,000.

Ms. Bigger said insurance rates are projected to increase by 15% next year. If this is accurate, other options may need to be explored.

PUBLIC COMMENTS

None

COMMITTEE COMMENTS

None.

CHAIR COMMENTS

None.

ADJOURN

A motion was made by Comm. Taylor and supported by Comm. Nyman to adjourn the meeting at 4:08 p.m. A vote was called, all in favor. Motion passed 4-0.

Brian Potter, Chair

Megan Swanberg, Recording Secretary

PERIOD ENDING 07/31/2025

% Fiscal Year Completed: 58.08

GL NUMBER	DESCRIPTION	2025		ACTIVITY FOR MONTH 07/31/2025	AVAILABLE		% BDGT USED
		AMENDED BUDGET	YTD BALANCE 07/31/2025 NORMAL (ABNORMAL)		NORMAL	(ABNORMAL)	
Fund 101 - GENERAL FUND							
Revenues							
UNCLASSIFIED	Unclassified	18,545,393.00	6,643,243.71	956,131.70	11,902,149.29		35.82
TOTAL REVENUES		18,545,393.00	6,643,243.71	956,131.70	11,902,149.29		35.82
Expenditures							
101	COMMISSIONERS	126,769.00	69,617.51	11,444.44	57,151.49		54.92
172	COUNTY ADMINISTRATION	141,229.00	67,094.89	9,223.64	74,134.11		47.51
174	GEN SERVICES ADMINISTRATION	1,164,008.00	880,155.08	160,631.11	283,852.92		75.61
193	ARPA Direct Payment	0.00	34,000.00	0.00	(34,000.00)		100.00
194	DEPT OF AGRICULTURE	120,000.00	44,946.39	0.00	75,053.61		37.46
215	COUNTY CLERK	434,731.00	226,298.92	35,542.62	208,432.08		52.05
245	STATE SURVEY & REMONUMENTATION	48,570.00	8,415.00	0.00	40,155.00		17.33
253	COUNTY TREASURER	445,233.00	243,142.37	33,798.09	202,090.63		54.61
257	EQUALIZATION	612,297.00	330,805.06	39,492.06	281,491.94		54.03
262	ELECTIONS	56,250.00	17,943.71	0.00	38,306.29		31.90
265	BUILDING AND GROUNDS	489,201.00	260,192.63	33,451.99	229,008.37		53.19
268	DISTRICT HEALTH DEPARTMENT	97,200.00	51,296.39	6,965.39	45,903.61		52.77
270	HUMAN RESOURCES	98,570.00	88,212.95	(5,807.85)	10,357.05		89.49
272	MAINT/STORAGE - BLDG/GRDS	7,850.00	3,962.80	564.87	3,887.20		50.48
276	HUMAN SERVICES BLDG	131,750.00	94,074.36	10,012.87	37,675.64		71.40
278	JAIL - BLDG/GRDS	265,000.00	164,325.25	21,646.78	100,674.75		62.01
279	PUBLIC DEFENDER	279,350.00	182,329.13	38,623.70	97,020.87		65.27
283	CIRCUIT COURT	348,069.00	176,230.88	31,475.65	171,838.12		50.63
286	DISTRICT COURT	802,393.00	437,398.51	62,990.75	364,994.49		54.51
289	FRIEND OF THE COURT	1,026,819.00	491,339.47	95,677.41	535,479.53		47.85
294	PROBATE COURT	716,575.00	330,859.30	49,390.52	385,715.70		46.17
295	PROBATION AND PAROLE	2,700.00	1,266.71	186.08	1,433.29		46.92
296	PROSECUTING ATTORNEY	876,167.00	386,008.45	57,091.94	490,158.55		44.06
297	JURY COMMISSION	5,250.00	3,871.21	46.54	1,378.79		73.74
298	CIRCUIT COURT FAMILY COUNS.	75,217.00	29,084.77	3,468.15	46,132.23		38.67
299	PROS ATTN CO-OP REIMB	75,527.00	43,155.39	7,595.90	32,371.61		57.14
301	SHERIFF	3,311,718.00	1,765,697.99	307,669.67	1,546,020.01		53.32
316	SECONDARY ROAD PATROL	104,979.00	41,362.95	7,133.04	63,616.05		39.40
331	MARINE	37,367.00	8,194.69	3,413.25	29,172.31		21.93
332	SNOWMOBILE	34,899.00	20,701.03	0.00	14,197.97		59.32
333	ORV GRANT	41,000.00	17,662.94	1,665.91	23,337.06		43.08
334	FEDERAL FOREST	4,000.00	2,957.62	2,957.62	1,042.38		73.94
351	JAIL	3,761,968.00	1,767,391.70	309,554.52	1,994,576.30		46.98
362	STATE GRANT PA 511	128,543.00	65,587.80	9,463.92	62,955.20		51.02
363	ENHANCEMENT	171,262.00	87,681.73	13,602.58	83,580.27		51.20
426	EMERGENCY MANAGEMENT	105,732.00	67,332.55	10,717.87	38,399.45		63.68
442	DRAIN COMMISSION	86,989.00	29,377.55	5,254.78	57,611.45		33.77
526	SANITARY LANDFILL	65,000.00	16,542.50	2,445.00	48,457.50		25.45
605	CONTAGIOUS DISEASES	0.00	23.60	0.00	(23.60)		100.00
648	MEDICAL EXAMINER	110,400.00	65,270.06	8,088.00	45,129.94		59.12
681	VETERANS BURIAL	10,000.00	3,000.00	300.00	7,000.00		30.00
711	REGISTER OF DEEDS	350,905.00	189,362.01	28,521.45	161,542.99		53.96
959	APPROPRIATIONS	471,543.00	335,482.46	15,545.17	136,060.54		71.15
966	APPROPRIATIONS	6,583.00	0.00	0.00	6,583.00		0.00
995	TRANSFERS	1,295,780.00	751,202.98	133,150.52	544,577.02		57.97
TOTAL EXPENDITURES		18,545,393.00	9,900,859.29	1,562,995.95	8,644,533.71		53.39

REVENUE AND EXPENDITURE REPORT FOR WEXFORD COUNTY

PERIOD ENDING 07/31/2025

% Fiscal Year Completed: 58.08

GL NUMBER	DESCRIPTION	2025	YTD BALANCE	ACTIVITY FOR	AVAILABLE	% BGD USED
		AMENDED BUDGET	07/31/2025 NORMAL (ABNORMAL)	MONTH 07/31/2025 INCREASE (DECREASE)	BALANCE NORMAL (ABNORMAL)	
Fund 101 - GENERAL FUND						
Fund 101 - GENERAL FUND:						
	TOTAL REVENUES	18,545,393.00	6,643,243.71	956,131.70	11,902,149.29	35.82
	TOTAL EXPENDITURES	18,545,393.00	9,900,859.29	1,562,995.95	8,644,533.71	53.39
	NET OF REVENUES & EXPENDITURES	0.00	(3,257,615.58)	(606,864.25)	3,257,615.58	100.00
	BEG. FUND BALANCE	12,543,582.96	12,543,582.96			
	END FUND BALANCE	12,543,582.96	9,285,967.38			

REVENUE AND EXPENDITURE REPORT FOR WEXFORD COUNTY
 PERIOD ENDING 07/31/2025
 % Fiscal Year Completed: 58.08

GL NUMBER	DESCRIPTION	2025	YTD BALANCE	ACTIVITY FOR	AVAILABLE	% BDGT USED
		AMENDED BUDGET	07/31/2025 NORMAL (ABNORMAL)	MONTH 07/31/2025 INCREASE (DECREASE)	BALANCE NORMAL (ABNORMAL)	
Fund 225 - ANIMAL CONTROL						
Revenues						
UNCLASSIFIED	Unclassified	298,303.00	268,380.08	1,052.83	29,922.92	89.97
TOTAL REVENUES		<u>298,303.00</u>	<u>268,380.08</u>	<u>1,052.83</u>	<u>29,922.92</u>	<u>89.97</u>
Expenditures						
000		298,303.00	132,469.57	22,917.43	165,833.43	44.41
TOTAL EXPENDITURES		<u>298,303.00</u>	<u>132,469.57</u>	<u>22,917.43</u>	<u>165,833.43</u>	<u>44.41</u>
Fund 225 - ANIMAL CONTROL:						
TOTAL REVENUES		298,303.00	268,380.08	1,052.83	29,922.92	89.97
TOTAL EXPENDITURES		<u>298,303.00</u>	<u>132,469.57</u>	<u>22,917.43</u>	<u>165,833.43</u>	<u>44.41</u>
NET OF REVENUES & EXPENDITURES		0.00	135,910.51	(21,864.60)	(135,910.51)	100.00
BEG. FUND BALANCE		259,610.13	259,610.13			
FUND BALANCE ADJUSTMENTS			100.00			
END FUND BALANCE		259,610.13	395,620.64			

REVENUE AND EXPENDITURE REPORT FOR WEXFORD COUNTY
 PERIOD ENDING 07/31/2025
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GL NUMBER	DESCRIPTION	2025	YTD BALANCE	ACTIVITY FOR	AVAILABLE	% BDGT USED
		AMENDED BUDGET	07/31/2025 NORMAL (ABNORMAL)	MONTH 07/31/2025 INCREASE (DECREASE)	BALANCE NORMAL (ABNORMAL)	
Fund 239 - COURT SECURITY FUND						
Revenues						
UNCLASSIFIED	Unclassified	196,211.00	136,647.68	21,452.15	59,563.32	69.64
TOTAL REVENUES		196,211.00	136,647.68	21,452.15	59,563.32	69.64
Expenditures						
000		196,211.00	58,117.09	12,824.43	138,093.91	29.62
TOTAL EXPENDITURES		196,211.00	58,117.09	12,824.43	138,093.91	29.62
Fund 239 - COURT SECURITY FUND:						
TOTAL REVENUES		196,211.00	136,647.68	21,452.15	59,563.32	69.64
TOTAL EXPENDITURES		196,211.00	58,117.09	12,824.43	138,093.91	29.62
NET OF REVENUES & EXPENDITURES		0.00	78,530.59	8,627.72	(78,530.59)	100.00
BEG. FUND BALANCE		128,235.14	128,235.14			
END FUND BALANCE		128,235.14	206,765.73			

REVENUE AND EXPENDITURE REPORT FOR WEXFORD COUNTY
 PERIOD ENDING 07/31/2025
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GL NUMBER	DESCRIPTION	2025 AMENDED BUDGET	YTD BALANCE	ACTIVITY FOR	AVAILABLE	% BDGT USED
			07/31/2025 NORMAL (ABNORMAL)	MONTH 07/31/2025 INCREASE (DECREASE)	BALANCE NORMAL (ABNORMAL)	
Fund 249 - BUILDING INSPECTIONS DEPT.						
Revenues						
UNCLASSIFIED	Unclassified	320,000.00	188,837.80	36,223.46	131,162.20	59.01
TOTAL REVENUES		320,000.00	188,837.80	36,223.46	131,162.20	59.01
Expenditures						
000		239,801.00	158,102.46	28,023.39	81,698.54	65.93
TOTAL EXPENDITURES		239,801.00	158,102.46	28,023.39	81,698.54	65.93
Fund 249 - BUILDING INSPECTIONS DEPT.:						
TOTAL REVENUES		320,000.00	188,837.80	36,223.46	131,162.20	59.01
TOTAL EXPENDITURES		239,801.00	158,102.46	28,023.39	81,698.54	65.93
NET OF REVENUES & EXPENDITURES		80,199.00	30,735.34	8,200.07	49,463.66	38.32
BEG. FUND BALANCE		384,505.19	384,505.19			
END FUND BALANCE		464,704.19	415,240.53			

REVENUE AND EXPENDITURE REPORT FOR WEXFORD COUNTY
 PERIOD ENDING 07/31/2025
 % Fiscal Year Completed: 58.08

GL NUMBER	DESCRIPTION	2025 AMENDED BUDGET	YTD BALANCE	ACTIVITY FOR	AVAILABLE		% BDGT USED
			07/31/2025 NORMAL (ABNORMAL)	MONTH 07/31/2025 INCREASE (DECREASE)	NORMAL	(ABNORMAL)	
Fund 260 - PUBLIC DEFENDER							
Revenues							
UNCLASSIFIED	Unclassified	1,974,202.00	695,942.35	22,247.21		1,278,259.65	35.25
TOTAL REVENUES		<u>1,974,202.00</u>	<u>695,942.35</u>	<u>22,247.21</u>		<u>1,278,259.65</u>	<u>35.25</u>
Expenditures							
000		1,974,202.00	945,429.45	141,441.10		1,028,772.55	47.89
TOTAL EXPENDITURES		<u>1,974,202.00</u>	<u>945,429.45</u>	<u>141,441.10</u>		<u>1,028,772.55</u>	<u>47.89</u>
Fund 260 - PUBLIC DEFENDER:							
TOTAL REVENUES		1,974,202.00	695,942.35	22,247.21		1,278,259.65	35.25
TOTAL EXPENDITURES		<u>1,974,202.00</u>	<u>945,429.45</u>	<u>141,441.10</u>		<u>1,028,772.55</u>	<u>47.89</u>
NET OF REVENUES & EXPENDITURES		0.00	(249,487.10)	(119,193.89)		249,487.10	100.00
BEG. FUND BALANCE		2,459.00	2,459.00				
END FUND BALANCE		2,459.00	(247,028.10)				

REVENUE AND EXPENDITURE REPORT FOR WEXFORD COUNTY
 PERIOD ENDING 07/31/2025
 % Fiscal Year Completed: 58.08

GL NUMBER	DESCRIPTION	2025	YTD BALANCE	ACTIVITY FOR	AVAILABLE	% BDGT USED
		AMENDED BUDGET	07/31/2025 NORMAL (ABNORMAL)	MONTH 07/31/2025 INCREASE (DECREASE)	BALANCE NORMAL (ABNORMAL)	
Fund 261 - 911-WIRELESS						
Revenues						
UNCLASSIFIED	Unclassified	1,400,000.00	403,687.97	86,394.27	996,312.03	28.83
TOTAL REVENUES		<u>1,400,000.00</u>	<u>403,687.97</u>	<u>86,394.27</u>	<u>996,312.03</u>	<u>28.83</u>
Expenditures						
000		155,000.00	27,757.00	4,323.89	127,243.00	17.91
325	COMMUNICATIONS/DISPATCH	1,103,334.00	641,319.16	93,069.20	462,014.84	58.13
TOTAL EXPENDITURES		<u>1,258,334.00</u>	<u>669,076.16</u>	<u>97,393.09</u>	<u>589,257.84</u>	<u>53.17</u>
<hr/>						
Fund 261 - 911-WIRELESS:						
TOTAL REVENUES		1,400,000.00	403,687.97	86,394.27	996,312.03	28.83
TOTAL EXPENDITURES		<u>1,258,334.00</u>	<u>669,076.16</u>	<u>97,393.09</u>	<u>589,257.84</u>	<u>53.17</u>
NET OF REVENUES & EXPENDITURES		141,666.00	(265,388.19)	(10,998.82)	407,054.19	187.33
BEG. FUND BALANCE		357,467.71	357,467.71			
END FUND BALANCE		499,133.71	92,079.52			

REVENUE AND EXPENDITURE REPORT FOR WEXFORD COUNTY

PERIOD ENDING 07/31/2025

% Fiscal Year Completed: 58.08

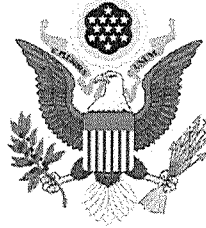
GL NUMBER	DESCRIPTION	2025	YTD BALANCE	ACTIVITY FOR	AVAILABLE	% BDGT USED
		AMENDED BUDGET	07/31/2025 NORMAL (ABNORMAL)	MONTH 07/31/2025 INCREASE (DECREASE)	BALANCE NORMAL (ABNORMAL)	
Fund 292 - CHILD CARE FUND						
Revenues						
UNCLASSIFIED	Unclassified	1,014,243.00	92,136.25	12,642.13	922,106.75	9.08
TOTAL REVENUES		<u>1,014,243.00</u>	<u>92,136.25</u>	<u>12,642.13</u>	<u>922,106.75</u>	<u>9.08</u>
Expenditures						
000		1,014,243.00	350,612.02	55,597.76	663,630.98	34.57
TOTAL EXPENDITURES		<u>1,014,243.00</u>	<u>350,612.02</u>	<u>55,597.76</u>	<u>663,630.98</u>	<u>34.57</u>
Fund 292 - CHILD CARE FUND:						
TOTAL REVENUES		1,014,243.00	92,136.25	12,642.13	922,106.75	9.08
TOTAL EXPENDITURES		<u>1,014,243.00</u>	<u>350,612.02</u>	<u>55,597.76</u>	<u>663,630.98</u>	<u>34.57</u>
NET OF REVENUES & EXPENDITURES		0.00	(258,475.77)	(42,955.63)	258,475.77	100.00
BEG. FUND BALANCE		77,528.70	77,528.70			
END FUND BALANCE		77,528.70	(180,947.07)			
TOTAL REVENUES - ALL FUNDS		5,202,959.00	1,785,632.13	180,012.05	3,417,326.87	34.32
TOTAL EXPENDITURES - ALL FUNDS		<u>4,981,094.00</u>	<u>2,313,806.75</u>	<u>358,197.20</u>	<u>2,667,287.25</u>	<u>46.45</u>
NET OF REVENUES & EXPENDITURES		221,865.00	(528,174.62)	(178,185.15)	750,039.62	238.06
BEG. FUND BALANCE - ALL FUNDS		1,209,805.87	1,209,805.87			
FUND BALANCE ADJ - ALL FUNDS			100.00			
END FUND BALANCE - ALL FUNDS		1,431,670.87	681,731.25			

UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF MICHIGAN
PROBATION AND PRETRIAL SERVICES OFFICE

252 Federal Building
315 W. Allegan St.
Lansing, MI 48933
TX: (517) 377-1825
Fax: (517) 377-1682

SEAN R. STAMPS
CHIEF U.S. PROBATION OFFICER

101 Federal Building
110 Michigan Ave., NW
Grand Rapids, MI 49503
TX: (616) 456-2384
Fax: (616) 456-2223



B-10 Federal Building
410 W. Michigan Ave.
Kalamazoo, MI 49007
TX: (269) 381-5341
Fax: (269) 381-1207

REPLY TO: Grand Rapids

July 31, 2025

100 N. Front St., Ste. 202
PO Box 906
Marquette, MI 49855
TX: (906) 228-7432
Fax: (906) 228-5514

The United States Probation and Pretrial Services Office for the Western District of Michigan is inquiring of your agency's interest in providing substance abuse testing services in Wexford County. Services provided would be for individuals on federal probation, supervised release, or parole, who are under supervision of the United States Probation Office, as well as persons on Pretrial status under the supervision of United States Pretrial Services Office, who have been ordered by the Court to participate in treatment.

The offeror is not required to maintain a call-in phone system for the urine collection, as this will be operated by the U.S. Probation and Pretrial Services Office. It should be noted the district utilizes a laboratory that will conduct testing of urine samples collected.

Included please find a Request for Proposal (RFP). The RFP contains the full text of all applicable Government regulations, and all offerors are subject to the provisions contained in the RFP. **Section "L" provides specific directions in completing the proposal.** The minimum standards for the services listed are contained in the Clauses and Terms of Agreement. Note if you intend to subcontract any services, instructions are included in Section "L."

The estimated monthly quantity listed in Section "B" of the RFP is the estimate of the services to be provided during the terms of this agreement. **It is only an estimate.**

A Non-Competitive Purchase Order (NCPO) cannot exceed \$10,000 per fiscal year. The term for this NCPO is twelve (12) months with a start date of October 1, 2025, and ending on September 30, 2026.

Proposals are due by Friday, August 22, 2025, at 4:00 p.m. Proposals shall be e-mailed in PDF format to treatmentservices@miwp.uscourts.gov. All e-mail submissions must reference in the subject line, the Solicitation number indicated in Section A, Block 1 of the Solicitation/Offer/Acceptance. Hard copies will not be accepted. All proposals must be signed by a representative authorized to commit the offeror to contractual obligations. Electronic signatures are accepted. A copy of the NCPO, Clauses and Terms of Agreement, should be retained by the offeror for their files.

If you have any questions regarding the RFP, please submit your questions via e-mail to Jessica_McConville@miwp.uscourts.gov.

Sincerely,

/s/ Jessica McConville
Jessica McConville
U.S. Probation Officer Specialist

SECTION A SOLICITATION / OFFER / ACCEPTANCE

1. Solicitation No. 0646-26-TS20	2. Date Issued 07/31/2025	3. Award No.
4. Issued By: Jessica McConville Cape jessica_mcconville@miwp.uscourts.gov	5. E-mail Address Offer To (if other than Item 4): Treatment Services Team Treatmentservices@miwp.uscourts.gov	

SOLICITATION

6. Proposals for furnishing the required services listed in Section B will be received electronically via the e-mail address(es) specified in Item 4 or 5

until 04:00 PM local time 08/22/2025
(hour) (date)

7. For Information call: a. Name Jessica McConville Cape	b. Telephone (616) 437-4814
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OFFER

8. In compliance with the above, the undersigned agrees, if this offer is accepted within _____ calendar days (365 calendar days unless a different period is inserted by the offeror) from the date for receipt of offers specified above, to furnish any or all items upon which prices are offered at the price set opposite each item, delivered at the designated point(s), within the time specified in the schedule.

9. DISCOUNT FOR PROMPT PAYMENT (See Section I, Clause No. 52-232-8)	10 CALENDAR DAYS %	20 CALENDAR DAYS %	30 CALENDAR DAYS %	CALENDAR DAYS %
10. ACKNOWLEDGEMENT OF AMENDMENTS (The offeror acknowledges receipt of amendments to the SOLICITATION for offerors and related documents numbered and dated:	AMENDMENT NO.	DATE	AMENDMENT NO.	DATE

11. NAME AND ADDRESS OF OFFEROR Wexford Community Corrections 437 E. DIVISION ST Cadillac, MI 49601	16. <input checked="" type="checkbox"/> AWARD Your offer on Solicitation Number 0646-26-TS20 , including the additions or changes made by you which additions or changes are set forth in full above, is hereby accepted as to the items listed above and on any continuation sheets.
12. Telephone No. (Include area code) 231-729-9472	
13. NAME AND TITLE OF PERSON AUTHORIZED TO SIGN OFFER (Type or print) Gary Taylor, Boc Chair	17A. NAME OF CONTRACTING OFFICER
14. Signature X	15. Offer Date
	17B. UNITED STATES OF AMERICA BY _____ (Signature Of Contracting Officer)
	17C. DATE SIGNED

DRUG TESTING:

	PROJECT CODE	REQUIRED SERVICES	ESTIMATED MONTHLY QUANTITY	UNIT PRICE
X	1010	Urine Collection	3	25.-
			Unit: Price: per specimen	

	PROJECT CODE	REQUIRED SERVICES	ESTIMATED MONTHLY QUANTITY	UNIT PRICE
X	1504	Breathalyzer	1	—
			Unit: per administration	
				PBT #10 ETG #20

SECTION B - SUPPLIES OR SERVICES AND OFFEROR'S PRICES

The United States District Court for the Western District of Michigan is soliciting a vendor to provide substance use, ~~mental health, and/or sex offender treatment services~~. A vendor must be capable of providing services within a geographic area encompassing Wexford County.

Section B is generic and used nationwide to procure the particular needs of each U. S. Probation/Pretrial Services Office. An asterisk * indicates a requirement line item which has been modified under "Local Services." Offerors shall submit pricing and proposal information related to only the required services. Offerors failing to provide offers on all required services marked will be considered technically unacceptable.

A Non-Competitive Purchase Order (NCPO) cannot exceed \$10,000 . The term for this NCPO is not to exceed twelve (12) months within the fiscal year. Note: the fiscal year for the federal Government begins on October 1 of one calendar year through September 30 of the next.

Note: Estimated Monthly Quantities (EMQs) represent the total monthly quantities to be ordered per service item. EMQs are estimates only and do not bind the government to meet these estimates.

Enhanced Outpatient Program
An Evidence-Based Intensive Outpatient Program

Proposed by Catholic Human Services
1000 Hastings Street
Traverse City, MI 49686

The Matrix Model Enhanced Outpatient Program (EOP) will consist of an intense form of treatment based on client need. It will involve up to two group sessions plus one individual session per week. The goal will be to provide an intensive, supportive structured program to assist with client stability.

The Matrix Model Intensive Outpatient program is designed to provide a structured treatment framework for engaging clients who have a substance use disorder through helping them achieve abstinence. Clients learn about issues critical to addiction and relapse, receive direction and support from a trained therapist, and become familiar with self-help programs.

The Matrix Model incorporates a wide variety of evidence based approaches including: Motivational interviewing, Skill building, Relapse prevention, Cognitive behavioral therapy, Trauma Focused Cognitive Behavioral Therapy and other therapies within an individualized, person centered treatment plan.

Criteria: Client is chemically dependent and needs intensive programming and support to maintain abstinence and stability in life.

Goal: To establish abstinence from alcohol and other drug use while creating a stable and healthy foundation to support early recovery.

Objectives:

1. Increase understanding of addiction and relapse through attendance and participation in weekly intensive outpatient treatment.
2. Gain knowledge of at least 3 relapse prevention and recovery tools and skills.
3. Identify at least 3 personal triggers and cues which lead to using
4. Develop at least 3 alternate strategies to deal with these triggers and cues.
5. Identify at least 5 daily behaviors which promote abstinence and improved health and wellbeing, and practice them.
6. Develop, practice and use at least 3 recovery pro-social behaviors
7. Be Introduced to 12-step and other support groups

Catholic Human Services
Program Description

Interventions: Using manualized Matrix materials, attending Relapse Prevention groups and Early Recovery Skills, using cognitive/behavioral references and motivational interviewing, reading and discussing a topic in each group


Catholic Human Services (CHS) will provide the Matrix Model EOP as an open enrollment group format. Each offender will be given an assessment by CHS for eligibility. After Community Corrections Manager approves eligibility, offenders will participate in one gender specific group session, one co-ed recovery group as well as attend one weekly individual session. All group and individual sessions will be held weekly at the Cadillac CHS office. Each group will last for 1 ½ hours and include three or more participants with a maximum of 15 offenders per group.

Block Grant and Medicaid funds will be used when a client meets the criteria and Community Corrections agrees to pay the offender's \$10 co-pay. The maximum billing for the fiscal year will not exceed \$7,500. However if the client does not meet Block grant or Medicaid requirements, the cost will be \$50 per person of which \$40 will be the offenders responsibility and Community Corrections will pay \$10 co-pay. It is expected that participants will attend approximately 16 group sessions to complete the program. Community Corrections will receive a copy of assessment, weekly attendance and progress reports. Offender's signatures must be on all attendance sheets. The participant and the agent will receive a letter of completion after successful completion of program.

Larry LaCross
President/ CEO
1000 Hastings St.
Traverse City, MI 49686
989-356-6385

Sarah Hegg, LLP, CAADC
Clinical Supervisor
421. S. Mitchell St.
Cadillac, MI 49601

CATHOLIC HUMAN SERVICES

Signature:  Date: 8/20/2025 _____

CCAB Chairman

Signature: _____ Date: _____



LETTER OF CREDIT AMENDMENT REQUEST

To: **FIFTH THIRD BANK, NATIONAL ASSOCIATION**
08/21/2025

Date:

The Applicant referred to below requests that Fifth Third Bank, National Association amend the letter of credit ("Letter of Credit" or "L/C") mentioned below as set forth in this Amendment Request. This Amendment Request is made under the Letter of Credit Reimbursement Agreement or equivalent agreement between the Applicant (or one or more of its affiliates or other persons or entities) and Fifth Third Bank, National Association (as amended, supplemented, and/or restated from time to time, the "Reimbursement Agreement"). Any amendment to the Letter of Credit will be subject to all the terms and conditions of the Reimbursement Agreement.

Applicant: Wexford County

Letter of Credit Number: S406631

Authorized Signature: _____
By: Kristi Nottingham
Its: Treasurer

Please amend the Letter of Credit as follows:

- Extend Expiration Date To:** New Expiry Date: _____
- Other:** (specify)
- Increase Amount By:** USD \$7,500.00 (Amount in Figures)
- Decrease* Amount By:** USD _____ (Amount in Figures)

For Commercial L/Cs Only

- Amend Transport Document Details:**
- Place of Receipt: _____
- Port of Loading/Airport of Departure: _____
- Port of Discharge/Airport of Destination: _____
- Place of Final Destination/For Transportation To: (for Multimodal Transport) _____
- Amend Shipment Dates:**
- Latest: (if applicable)
- Shipment Period: _____

***Amendment requests resulting in a detrimental condition change to the Beneficiary (e.g., decrease in value), as determined by Fifth Third Bank, National Association in its discretion, will not become effective until Fifth Third Bank, National Association receives written confirmation of acceptance of the amendment from the Beneficiary.**

All other terms and conditions remain unchanged.

Special Instructions to Fifth Third Bank, National Association (provided that nothing herein amends, supplements, or restates any provision of the Reimbursement Agreement): Increase letter of credit from \$318,300.00 to \$325,800.00

Return completed and signed request to your Fifth Third Relationship Manager, or to the Trade Services Operations Processing Center below:

**FIFTH THIRD BANK, NATIONAL ASSOCIATION
ATTN: TRADE SERVICES OPERATIONS
5050 KINGSLEY DRIVE, MD 1MOCBR
CINCINNATI, OH 45263
TEL: 513-358-5229
FAX: 513-358-5950**

BOARD OF COMMISSIONERS COMMITTEE AGENDA ITEM

TO: Finance Committee
FROM: Administration
FOR MEETING DATE: August 27, 2025
SUBJECT: Opioid Settlement Funding Agreement with Catholic Human Services

SUMMARY OF ITEM TO BE PRESENTED:

Following is a proposed one-year agreement with Catholic Human Services that will utilize \$70,000 of opioid funding to provide a peer recovery coach to work with jail staff and inmates to continue a better transition from incarceration. The peer recovery coach will help the inmate set up aftercare with substance use counseling, medical appointments, probation appointments and other linkage of needed services.

The peer recovery coach will work 37.5 hours per week, Monday through Friday. The person in this position provides evaluation, education, early intervention, and peer recovery coaching services to individuals to assist them in increasing the quality of individual functioning supporting recovery for opioid use and substance use disorders.

The person in this position also monitors services or recovery from a variety of resources on behalf of and in collaboration with clients who have a substance use disorder, specifically for opioid use disorder. The peer recovery coach will connect with Wexford County jail and or the local hospital onsite on a weekly basis working with clients who are part of an underserved population.

RECOMMENDATION:

The Opioid Committee recommends the Finance Committee approve the presented agreement in the total amount of \$70,000.

**OPIOID SETTLEMENT FUNDS
FUNDING AGREEMENT
BETWEEN
THE COUNTY OF WEXFORD
AND
CATHOLIC HUMAN SERVICES, INC.**

THIS AGREEMENT is made and entered by and between the **COUNTY OF WEXFORD**, a municipal corporation and political subdivision of the State of Michigan (, with offices at 437 E Division St. Cadillac, MI 49601 hereinafter referred to as the “County”) and **CATHOLIC HUMAN SERVICES, INC.**, with offices at 1000 Hastings, Traverse City, 49686 (hereinafter referred to as the “Recipient”).

RECITALS:

WHEREAS, the County has received and will continue to receive funding from defendants of the national opioid litigation (the “Opioid Litigation”) and the resulting settlement of which the County was participant. The County’s claims formed part of the basis of the national settlement and payments to plaintiffs from defendants, with some payments scheduled to continue until 2040 (“Settlement Payments”). The Opioid Litigation parties have agreed to the described Settlement Payments subject to the ongoing financial viability of each of the Opioid Litigation defendants. The Opioid Litigation settlement provides for the Settlement Payments to be expended for enumerated treatment and prevention programs and services; and

WHEREAS, the County developed and adopted a Plan of Implementation (the “Plan”) that prescribes how it will allocate the settlement funds for programs, services, targeted audience, intended outcomes and entities who will receive funding. Prior to adopting the Plan, the County received input and review of the Plan from outside third parties and concurrence on the Plan; and

WHEREAS, the County has determined to grant funding to the “Recipient” and the funding will be directed to provide Peer Recovery Coach to assist qualified individuals in increasing the quality of individual functioning supporting recovery for opioid use and substance use disorders. (“the Program”). Funding will be provided in amount not to exceed **SEVENTY THOUSAND and 00/100 Dollars (\$70,000.00)** (the “Award Amount”); and

WHEREAS, the County has determined that the Program is consistent with the abatement strategies set forth in the Opioid Litigation settlement List of Opioid Remediation Uses originally marked Exhibit “E” in the settlements.

WHEREAS, the Recipient is a qualified provider of the services herein staffed with personnel knowledgeable and experienced with the type of services required by the

County, and has agreed to provide the County with such services subject to the terms and conditions of this Agreement; and

WHEREAS, the Parties understand and acknowledge by executing this Agreement the County will not provide additional funding in excess of the Award Amount. Any costs of the Program, including any overruns or other expenses not expressly agreed to in writing prior to the expenses being incurred, will not be a liability on the part of the County, and will be the sole responsibility of the Recipient; and

NOW, THEREFORE, for and in consideration of the mutual covenants hereinafter contained, **IT IS HEREBY AGREED**, as follows:

1. **Agreement Term and Termination.** This Agreement is effective October 1, 2025 and continue until September 30, 2026.

Either Party may immediately, upon written notice to the other Party, terminate this Agreement for cause if the other Party is in breach of any provision hereof or is in breach of any provision of applicable Law, including the failure of the Recipient to provide all necessary assistance the County requires to comply with the provisions of its related regulations and any reporting of program and service data.

Notwithstanding any other provision in this Agreement to the contrary, the County may terminate this Agreement upon 30 days prior written notice to the Recipient. In the event of termination, all finished and unfinished records, data, studies, reports and other items prepared by Recipient shall become the property of the County and Recipient shall promptly deliver such items to the County. Recipient shall be compensated for all work completed as of the effective date of termination.

2. **Services to be Performed by the Recipient .** The services the Recipient shall provide shall be as set forth in the attached Exhibit A. The attached Exhibit A is incorporated by reference into this Agreement and made a part thereof. In the event there are conflicting terms and conditions between Exhibit A and this Agreement, the terms of this Agreement will prevail.
3. **Personnel.** It is expressly understood and agreed by the Recipient that all services required to be performed under this Agreement shall be performed by such personnel of the Recipient whom are qualified and experienced in performing the type of services required by this Agreement. The peer recovery coach will work at the County 37.5 hrs a week, Monday through Friday.
4. **Compensation.** It is expressly understood and agreed the total compensation the Recipient is to receive under this Agreement for the services performed shall not exceed the Award Amount. The Recipient shall submit monthly invoices to the County and additional supporting documentation sufficient in the opinion of the County to support the payment request. The County shall monthly remit the Recipient the gross sum of \$5,833.33 with fifteen (15) days of receipt of the invoice

and/or the sufficient supporting documentation/ Any costs of the Program and services in excess of the Award Amount shall be the sole responsibility of the Recipient.

5. **Future Funding.** County is not, as a result of entry into or performance by either party under this Agreement, obligated to provide future grants, program-related investments, or other financial or technical support to Recipient, or to extend the relationship with Recipient in any respect, or to engage in any other transaction or relationship with Recipient. Recipient acknowledges that County has not made to Recipient any representations, promises, or assurances about future funding or other support.

6. **Records.** The Recipient shall comply with the following records requirements:
 - A. Recipient shall keep complete and accurate records for the services performed pursuant to this Agreement and any records required by law or government regulation and shall make such records available to County and County upon request.

 - B. Recipient shall assure the confidentiality of any records that are required by law to be so maintained.

 - C. Recipient shall prepare and forward such additional or supplementary records as the County may reasonably request.

The County or its designee may audit the Recipient to verify compliance with this Agreement. The Recipient must retain and provide to the County or its designee and/or auditor general upon request, all financial and accounting records related to this Agreement through the Term of this Agreement and for three (3) years after the later of the date of submission of the final expenditure report for the Award Amount.

If an audit, litigation, or other action involving the records is initiated before the end of the Financial Audit Period, the Recipient must retain the records until all issues are resolved. This right of audit is limited to matters within the scope of this Agreement unless there is a separate constitutional or statutory basis for such audit.

7. **Reports.** The Recipient shall prepare and submit to the County such reports on services performed under this Agreement as the County may require. Such reports may include, but shall not be limited to, expenditures and receipt reports. The Recipient will comply with the County's policy for Recipient monitoring and provide all required documentation upon request of the County including (1) written responses for Recipient services provided, (2) all financial or non-financial reporting requested by the County related to the Award, (3) written responses to internal control questionnaires.

8. Title to Records and Documents Pertaining to Activities Performed Under this Agreement.

The County, with the exception of the Recipient's personnel and financial records, shall have the sole and exclusive right, title and ownership to any and all records, documents, papers, reports, charts, maps, graphics or manuscripts prepared for or pertaining specifically to the services to be performed under this Agreement. Upon completion or termination of this Agreement, all such materials shall be turned over to the County by the Recipient. The Recipient may retain reproducible copies of all such materials, but may not obtain any copyright, title or interest therein.

9. Compliance with the Law. The Recipient shall provide all the services to be performed under this Agreement in complete compliance with all applicable Federal, State and local laws, ordinances, rules and regulations. The laws of the State of Michigan will control in the construction and enforcement of this Agreement.

10. Compliance with Health Insurance Portability and Accountability Act of 1996. The Recipient, its personnel and anyone it may contract with for services to be provided under this Agreement who may have access to records protected by the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law 104-191, as amended, shall comply with all applicable requirements of HIPAA and rules and regulations promulgated pursuant thereto, 45 CFR Parts 160 and 164, as amended. Access shall be limited to the minimum necessary to provide the applicable services.

11. Nondiscrimination. The Recipient, as required by law and/or the County's Equal Opportunity Employment/Nondiscrimination Policy, shall not discriminate against an employee or applicant for employment with respect to hire, tenure, terms, conditions or privileges of employment, or a matter directly or indirectly related to employment because of race, color, religion, national origin, age, sex, sexual orientation, gender identity or expression, disability or genetic information that is unrelated to the individual's ability to perform the duties of a particular job or position, height, weight, marital status or political affiliation.

The Recipient shall adhere to all applicable Federal, State and local laws, ordinances, rules and regulations and policies prohibiting discrimination, including, but not limited to, the following:

- A. The Elliott-Larsen Civil Rights Act, 1976 PA 453, as amended.
- B. The Persons with Disabilities Civil Rights Act, 1976 PA 220, as amended.
- C. Section 504 of the Federal Rehabilitation Act of 1973, P.L. 93-112, 87 Stat. 355, as amended, and regulations promulgated thereunder.

- D. The Americans with Disabilities Act of 1990, P.L. 101-336, 104 Stat 327 (42 USC §12101 *et seq.*), as amended, and regulations promulgated thereunder.

Breach of this section shall be regarded as a material breach of this Agreement.

12. Independent Contractor. It is expressly understood and agreed that the Recipient is an independent contractor. The employees, servants or agents of the Recipient shall in no way be deemed to be and shall not hold themselves out as the employees, servants or agents of the County, and shall not be entitled to any fringe benefits of the County, such as, but not limited to, health and accident insurance, life insurance, longevity, or paid sick or vacation leave. The Recipient shall be responsible for paying all compensation due its personnel for services they have performed under this Agreement, and for withholding and payment of all applicable taxes, including, but not limited to, income and social security taxes to the proper Federal, State and local governments. The Recipient shall carry workers' compensation insurance coverage and pay unemployment compensation coverage for its personnel, as required by law.

13. Liability Insurance. The Recipient shall purchase and maintain insurance not less than the limits set forth below. All coverage shall be with insurance companies licensed and admitted to do business in State of Michigan and with insurance carriers acceptable to the County and have a minimum A.M. Best Company's Insurance Reports rating of A or A- (Excellent).

- A. Workers' Compensation Insurance. Workers' Compensation Insurance including Employers' Liability Coverage in accordance with all applicable statutes of the State of Michigan.
- B. Professional Liability Insurance. Professional Liability Insurance (Errors and Omissions) covering professionals providing services with limits of not less than \$500,000.00 per claim.
- C. Commercial General Liability Insurance. Commercial General Liability Insurance on an "occurrence basis" only with limits of liability of not less than ONE MILLION AND NO/100 DOLLARS (\$1,000,000.00) per occurrence and/or aggregate combined single limit, personal injury, bodily injury and property damage. Coverage shall include the following: (1) Broad Form General Liability Endorsement or equivalent if not in policy proper; (2) Product and Completed Operations Liability Coverage; (3) Contractual Liability; and (4) Independent Recipient s coverage.
- D. Motor Vehicle Liability. Motor Vehicle Liability Insurance, including Michigan No-Fault Coverage. Coverage shall include all owned, non-owned and hired vehicles.

- E. Additional Insured. The Commercial General Liability Insurance as described above shall include the following as “Additional Insured”; the County of Wexford, and all of the County of Wexford’s elected and appointed officials, and employees.
- F. Cancellation Notice. Workers’ Compensation Insurance, Professional Liability Insurance, Commercial General Liability Insurance and Motor Vehicle Liability Insurance as described above, shall include on their certificates of insurance, which are to be submitted to the County as required below, an endorsement stating the following: “It is understood and agreed that thirty (30) days advance written notice of cancellation, non-renewal, reduction and/or material change shall be sent to: Wexford Board of Commissioners, 437 E Division St., Cadillac, MI 49601.
- G. Proof of Insurance. The Recipient shall provide to the County at the time this Agreement is returned by it for execution, with two (2) copies of certificates of insurance for each of the policies mentioned above. If so requested, certified copies of policies shall be furnished.
14. Indemnification and Hold Harmless. The Recipient shall, at its own expense, protect, defend, indemnify, save and hold harmless the County, its elected and appointed officers, employees, and agents from all claims, damages, lawsuits, costs and expenses, including, but not limited to, all costs from administrative proceedings, court costs and attorney fees, that the County and its elected and appointed officers, employees, and agents may incur as a result of any breach of this Agreement, violation of any Federal or State of Michigan law or regulation, intentional torts, or negligent acts or omissions of the Recipient or any of its employees, agents or subcontractors that may arise out of this Agreement. The Recipient’s indemnification responsibilities under this section shall include the sum of damages, costs and expenses which are in excess of the sum paid out on behalf of or reimbursed to the County, its officers, employees and agents by the insurance coverage obtained and/or maintained by the Recipient pursuant to the requirements of this Agreement.

The Recipient ’s indemnification responsibilities under this section shall include the sum of damages, costs and expenses which are in excess of the sum of damages, costs and expenses which are paid out on behalf of or reimbursed to the County, its officers, employees, servants and agents by the insurance coverage obtained and/or maintained by the Recipient .

15. Waivers. No failure or delay on the part of either of the parties to this Agreement in exercising any right, power or privilege hereunder shall operate as a waiver thereof, nor shall a single or partial exercise of any right, power or privilege preclude any other or further exercise of any other right, power or privilege.

In no event shall the making by the County of any payment due to the Recipient constitute or be construed as a waiver by County of any breach of a provision of this Agreement, or any default which any then exist, on the part of the Recipient , and the making of any such payment by the County while any such breach or default shall exist, shall in no way impair or prejudice any right or remedy available to the County in respect to such breach or default.

16. **Force Majeure**. Any delay or failure in the performance by either Party hereunder shall be excused if and to the extent caused by the occurrence of a Force Majeure. For purposes of this Agreement, Force Majeure shall mean a cause or event that is not reasonably foreseeable or otherwise caused by or under the control of the Party claiming Force Majeure, including acts of God, fires, floods, epidemics, explosions, riots, wars, hurricane, sabotage terrorism, vandalism, accident, restraint of government, governmental acts, injunctions, labor strikes, that prevent the claiming Party from furnishing the materials or equipment, and other like events that are beyond the reasonable anticipation and control of the Party affected thereby, despite such Party's reasonable efforts to prevent, avoid, delay, or mitigate the effect of such acts, events or occurrences, and which events or the effects thereof are not attributable to a Party's failure to perform its obligations under this Agreement.
17. **Non-Beneficiary Contract**. Nothing expressed or referred to in this Agreement is intended or shall be construed to give any person other than the Parties to this Agreement or their respective successors or permitted assignees any legal or equitable right, remedy or claim under or in respect of this Agreement, it being the intention of the Parties that this Agreement and the transactions contemplated hereby shall be for the sole and exclusive benefit of such Parties or such successors and permitted assignees. The Recipient's suppliers or providers are not considered the Recipient's assignees and are not third-party beneficiaries.
18. **Amendment or Modification**. All modifications, amendments or waivers of any provision of this Agreement or the services to be performed hereunder, shall be made only by the written mutual consent of the parties hereto.
19. **Assignment or Subcontracting**. The Recipient shall not assign, subcontract or otherwise transfer its duties and/or obligations under this Agreement, without the prior written consent of the County.
20. **Applicable Law and Venue**. This Agreement shall be construed according to the laws of the State of Michigan. In the event any actions arising under this Agreement are brought by or against the County, or the County is made a party thereof, the County and the Recipient acknowledges and agrees that the venue for such actions shall be established in accordance with the

statutes of the State of Michigan and/or Michigan Court Rules. In the event an action is brought in a Federal Court, the venue for such action shall be the Federal Judicial District of Michigan, Western District, Southern Division.

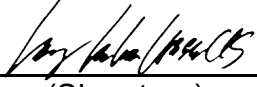
- 21. **Disregarding Titles.** The titles of the sections set forth in this Agreement are inserted for the convenience of reference only and shall be disregarded when construing or interpreting any of the provisions of this Agreement.
- 22. **Complete Agreement.** This Agreement, and the attached Exhibit A contain all the terms and conditions agreed upon by the parties hereto, and no other agreements, oral or otherwise, regarding the subject matter of this Agreement or any part thereof shall have any validity or bind any of the parties hereto.
- 23. **Invalid/Unenforceable Provisions.** If any clause or provision of this Agreement is rendered invalid or unenforceable because of any State or Federal statute or regulation or ruling by any tribunal of competent jurisdiction, that clause or provision shall be null and void, and any such invalidity or unenforceability shall not affect the validity or enforceability of the remainder of this Agreement. Where the deletion of the invalid or unenforceable clause or provision would result in the illegality and/or unenforceability of this Agreement, this Agreement shall be considered to have terminated as of the date in which the clause or provision was rendered invalid or unenforceable.
- 24. **Certification of Authority to Sign Agreement.** The persons signing on behalf of the parties to this Agreement certify by their signatures that they are duly authorized to sign this Agreement on behalf of said parties and that this Agreement has been authorized by said parties.

IN WITNESS WHEREOF, the authorized representatives of the parties hereto have fully signed and entered into this Agreement on the day and year written next to their signatures.

COUNTY OF WEXFORD

By: _____ Date _____
 Gary Taylor, Chairperson
 County Board of Commissioners

CATHOLIC HUMAN SERVICES, INC.

By:  Date _____
 (Signature)
 Name: Larry LaCross
 (Print or Type)

Title: President/CEO
(Print or Type)

EXHIBIT A

Opioid Recovery Funds
Request for Funds
Catholic Human Services

Opioid Recovery Funds Request for Funds: Catholic Human Services

Catholic Human Services is an outpatient treatment provider, serving Wexford County. We have established collaborative efforts with the court system, Harm Reduction, hospitals, police and EMS. Through the use of both clinicians and peer recovery coaches, we have had success in reducing recidivism with inmates being released from jail by providing valuable resources and opportunities for individuals to be supported while in recovery. Our current funding for this position will be ending. Through the use of funds, CHS is hoping to have our peer recovery coach work with jail staff and inmates to continue a better transition from incarceration. The peer recovery coach will help the inmate set up aftercare with substance use counseling, medical appointments, probation appointments and other linkage of needed services. This will help with compliance with treatment and probation, and the community will be able to see what we have already seen; decreased recidivism, decreased fatal overdoses and increase in compliance and follow through with establishing connections with recovery and social services supports.

The peer recovery coach will work **37.5 hrs a week**, Monday through Friday. The person in this position provides evaluation, educational, early intervention, and peer recovery coaching services to individuals to assist them in increasing the quality of individual functioning supporting recovery for opioid use and substance use disorders. The person in this position also monitors services or recovery from a variety of resources on behalf of and in collaboration with clients who have a substance use disorder, specifically for opioid use disorder. The peer recovery coach will connect with Wexford County jail and or the local hospital onsite on a weekly basis working with clients who are part of an underserved population, including persons on medication assisted treatment and who are incarcerated in county jails, women, and those who lack appropriate insurance or have insurance but these services are not part of their covered insurance plan.

The goal is to improve outcomes, improve access to services upon discharge, reduce wait times to access services upon discharge, and reduce risk of overdose death upon discharge from jail. The level and intensity of involvement of the peer recovery coaching services should depend on the client, as identified in the individualized assessment and/or treatment planning process.

BOARD OF COMMISSIONERS COMMITTEE AGENDA ITEM

TO: Finance Committee
FROM: Administration
FOR MEETING DATE: August 27, 2025
SUBJECT: Opioid Settlement Funding Agreement with Cadillac-Wexford Transit Authority - Amendment NO.3

SUMMARY OF ITEM TO BE PRESENTED:

Following is a proposed amendment to the Opioid Settlement Funding Agreement with the Cadillac Wexford Transit Authority (CWTA). Wexford County currently has an agreement with the CWTA in the amount of \$30,000 that provides rides to treatment for offenders. The proposed amendment would increase that amount to \$50,000.

RECOMMENDATION:

The Opioid Committee recommends the Finance Committee approve the presented amendment to the agreement in the total amount of \$50,000.

**AMENDMENT NO. 3
TO
COUNTY USE OF OPIOID SETTLEMENT FUNDS
PLAN OF IMPLEMENTATION FUNDING AGREEMENT
BETWEEN
THE COUNTY OF WEXFORD
AND
CADILLAC-WEXFORD TRANSIT AUTHORITY**

THIS AMENDMENT NO. 1, made and entered into by and between the **COUNTY OF WEXFORD**, a municipal corporation and political subdivision of the State of Michigan, hereinafter referred to as the “County”), and Cadillac – **Wexford County Transit Authority** (hereinafter referred to as the “Recipient”) amends the July 17, 2025 Plan of Implementation Funding Agreement made and entered into between said Parties as set forth herein.

WITNESS:

1. The Third “**WHEREAS**” provision of the July 17, 2025 Plan of Implementation Funding Agreement, page 1, which stipulates the Award Amount shall be amended as follows:

WHEREAS, the County has determined to grant funding to the “Recipient” and the funding will be directed to opioid use disorder transport program used to provide transportation services to treatment service providers for offenders with possible opioid use disorders (“the Program”). Funding will be provided in amount not to exceed FIFTY THOUSAND and 00/100 Dollars (\$50,000.00) (the “Award Amount”); and

2. Section 5(B) of the July 17, 2025 Plan of Implementation Funding Agreement entitled Term and Termination, page 2-3 shall be amended as follows:

“B. **Term and Expiration.** This Agreement shall commence on the Effective Date and continue until the earlier of the following:

i. the period of five years after the Effective Date. The Parties may extend this Agreement in writing for additional terms as outlined in an amendment to this Agreement; or

ii. the Award Amount sum has been fully expended.

3. All other terms and conditions contained in the above-stated Agreement shall remain in full force and effect except as modified herein. This Amendment shall be considered effective on on the date of the execution of this Amendment and retroactive to the Effective Date of the July 17, 2025 Plan of Implementation Funding Agreement.

4. The individuals signing this Amendment on behalf of the parties to the above-stated Agreement certify by their signatures that they are duly authorized to sign this Amendment to the Agreement on behalf of said parties and that this Amendment has been authorized by said parties.

IN WITNESS WHEREOF, the authorized representatives of the parties hereto have fully signed and entered into this Amendment on the day and year written next to their signatures.

COUNTY OF WEXFORD

**CADILLAC-WEXFORD TRANSIT
AUTHORITY**

By: _____
Gary Taylor, Chairperson
County Board of Commissioners

Date: _____ 2025

By: _____
(Signature)
Name: _____
(Print or Type)
Title: _____
(Print or Type)
Date: _____ 2025

BOARD OF COMMISSIONERS COMMITTEE AGENDA ITEM

TO: Finance Committee
FROM: Administration
FOR MEETING DATE: August 27, 2025
SUBJECT: Opioid Settlement Funding Agreement with DHD#10

SUMMARY OF ITEM TO BE PRESENTED:

Following is a proposed agreement with District Health Department #10 that will utilize \$50,000 of opioid funding to provide for the following:

- NaloxBoxes & Naloxone Distribution Boxes: not to exceed \$4,500
- Billboards & Radio PSA Messages: not to exceed \$23,000
- Support of the annual Harm Reduction conference & other Harm Reduction events: not to exceed \$10,000
- Staff time: \$12,500

RECOMMENDATION:

The Opioid Committee recommends the Finance Committee approve the presented agreement in the total amount of \$50,000.

**COUNTY USE OF OPIOID SETTLEMENT FUNDS
FUNDING AGREEMENT
BETWEEN
THE COUNTY OF WEXFORD
AND
DISTRICT HEALTH DEPARTMENT NUMBER 10**

THIS AGREEMENT, made and entered into by and between the **COUNTY OF WEXFORD**, a municipal corporation and political subdivision of the State of Michigan, hereinafter referred to as the “County”), and **DISTRICT HEALTH DEPARTMENT NUMBER 10** (hereinafter referred to as the “Recipient”). Collectively, the signatories are referred to as the Parties, and individually, as a Party.

RECITALS:

WHEREAS, the County has received and will continue to receive funding from defendants of the national opioid litigation (the “Opioid Litigation”) and the resulting settlement of which the County was participant. The County’s claims formed part of the basis of the national settlement and payments to plaintiffs from defendants, with some payments scheduled to continue until ca. 2040 (“Settlement Payments”). The Opioid Litigation parties have agreed to the described Settlement Payments subject to the ongoing financial viability of each of the Opioid Litigation defendants. The Opioid Litigation settlement provides for the Settlement Payments to be expended for enumerated treatment and prevention programs and services; and

WHEREAS, the County has determined to grant funding to the “Recipient” and the funding will be directed the Scope of Work, Exhibit A Opioid Remediation Uses (“the Program”). Funding will be provided in amount not to exceed FIFTY THOUSAND and 00/100 Dollars (\$50,000.00) (the “Award Amount”); and

WHEREAS, the County has determined that the Program is consistent with the abatement strategies set forth in the Opioid Litigation settlement List of Opioid Remediation Uses originally marked Exhibit “E” in the settlements.

WHEREAS, the Parties understand and acknowledge by executing this Agreement the County will not provide additional funding in excess of the Award Amount, and any costs of the Program or the incremental approved portions of the Program set forth in this Agreement, including any overruns or other expenses not expressly agreed to in writing prior to the expenses being incurred, will not be a liability on the part of the County, and will be the sole responsibility of the Recipient; and

WHEREAS, the Recipient, a qualified and experienced provider of the services herein.

NOW, THEREFORE, for and in consideration of the mutual covenants hereinafter contained, **IT IS HEREBY AGREED** as follows:

1. **Term and Termination**. This Agreement shall commence on its effective date and

continue until it expires or is terminated as provided for herein.

A. **Effective Date.** This Agreement shall become effective on the date (the “Effective Date”) that all of the following has occurred: (i) the approval of the Plan by the Board of Commissioners of the County; (ii) the approval by the governing body of the Recipient; (iii) the execution by an authorized officer of the County; and (iv) the execution by an authorized officer of the Recipient.

B. **Term and Expiration.** This Agreement shall commence on the Effective Date Term. This Agreement shall commence on the Effective Date and continue until the earlier of the following:

i. the period of 365 calendar days after the Effective Date. The Parties may extend this Agreement in writing for additional terms as outlined in an amendment to this Agreement; or

ii. the Award Amount sum has been fully expended.

C. **Termination without Cause.** The County or the Recipient may terminate this Agreement without cause by providing thirty (30) days written notice to the other Party.

D. **Termination for Cause.** Either Party may immediately, upon written notice to the other Party, terminate this Agreement for cause if the other Party is in breach of any provision hereof or is in breach of any provision of Applicable Law, including the failure of the Recipient to provide all necessary assistance the County requires to comply with the provisions of its related regulations and any reporting of program and service data.

2. **Scope of Services.** The services the Recipient shall provide shall be as set forth in the attached Exhibit A. The attached Exhibit A is incorporated by reference into this Agreement and made a part thereof. In the event there are conflicting terms and conditions between Exhibit A and this Agreement, the terms of this Agreement will prevail.

3. **Compensation.** It is expressly understood and agreed the total compensation the Recipient is to receive under this Agreement for the services performed shall not exceed the Award Amount. The Award Amount shall be expended exclusively on approved Program as set forth in the Scope of Services.

Further, the County shall compensate Recipient for those incremental authorized Program services UP TO BUT NOT TO EXCEED the following amounts:

NaloxBoxes & Naloxone Distribution Boxes: NOT TO EXCEED \$4,500

Billboards and Radio PSA Messages: NOT TO EXCEED \$23,000

Support Annual Harm Reduction Conference & Other Harm Reduction Events: NOT TO EXCEED \$10,000

Staff Time: NOT TO EXCEED \$12,500

Incremental and/or Aggregate Program costs and services in excess of the above amounts shall be the sole responsibility of the Recipient. The Recipient shall submit monthly or quarterly invoices, as determined by the County, which invoices shall include the date and sum billed for each authorized Program item, and such further and additional supporting documentation sufficient in the opinion of the County to support the payment request (which may include, but is not limited to, any documentation certifying that applicable suppliers/providers of the Recipient have been paid).

The County shall pay County-approved invoices within thirty (30) days of receipt thereof. If the County has requested additional supporting documentation for a portion of the costs of the Program in a specific invoice, but has not received such supporting documentation in sufficient time to make payment within the thirty (30) days required herein, it shall pay all properly supported and County-approved costs contained in that invoice within the requisite 30 day period and shall pay all remaining costs on the invoice at issue within fifteen (15) days of receipt of sufficient supporting documentation, if the County approves the costs.

Payment by the County to the Recipient is subject to the availability of funds as determined by and in the sole discretion of the County.

4. Future Funding. County is not, as a result of entry into or performance by either party under this Agreement, obligated to provide future grants, program-related investments, or other financial or technical support to Recipient, or to extend the relationship with Recipient in any respect, or to engage in any other transaction or relationship with Recipient. Recipient acknowledges that County has not made to Recipient any representations, promises, or assurances about future funding or other support.

5. Reports. Recipient shall provide the County timely and reasonable access to all data and information in the Recipient's possession or control related to the Plan, Program and/or necessary to comply with this Agreement. Recipient shall provide the County or its designated agent(s) information on Program services related to Award Amounts. Failure to do so in an accurate and timely manner may result in termination for cause.

6. Right of Audit. The County or its designee may audit the Recipient to verify compliance with this Agreement. The Recipient must retain and provide to the County or its designee and/or auditor general upon request, all financial and accounting records related to this Agreement through the Term of this Agreement and for three (3) years after the later of the date of submission of the final expenditure report for the Award Amount. If an audit, litigation, or other action involving the records is initiated before the end of the Financial Audit Period, the Recipient must retain the records until all issues are resolved. This right of audit is limited to matters within the scope of this Agreement unless there is a separate constitutional or statutory basis for such audit.

7. Right of Inspection. Within ten (10) calendar days of providing notice, the County and its authorized representatives or designees have the right to enter and inspect Recipient's premises or any other places where work is being performed under this Agreement or in any

location where records are kept related to the Project, and examine, copy, and audit all records related to this Agreement. The Recipient must cooperate and provide reasonable assistance. If financial errors are revealed, the amount in error must be reflected as a credit or debit on subsequent invoices until the amount is paid or refunded. Any remaining balance at the end of this Agreement must be paid or refunded within forty-five (45) calendar days.

8. Recipient Monitoring. The Recipient will comply with the County's policy for Recipient monitoring and provide all required documentation upon request of the County including (1) written responses for Recipient services provided, (2) all financial or non-financial reporting requested by the County related to the Award, (3) written responses to internal control questionnaires.

9. Compliance with the Law. The Recipient shall administer the program and provide all the services to be performed under this Agreement in complete compliance with all applicable Federal, State and local laws, ordinances, rules and regulations. The laws of the State of Michigan will control in the construction and enforcement of this Agreement.

10. Applicable Law and Venue. This Agreement shall be subject to and construed in accordance with the laws of the State of Michigan, without regard to any Michigan choice of law rules that would apply the substantive law of any other jurisdiction to the extent not inconsistent with, or pre-empted by Federal law.

In the event any disputes arise under this Agreement, it is understood and agreed that any legal or equitable action resulting from such disputes shall be in Michigan Courts whose jurisdiction and venue shall be established in accordance with the statutes and Court Rules of the State of Michigan. In the event any action is brought in or is moved to a federal court the venue for such action shall be the Federal Judicial District of Michigan, in the district and division in which the County is located.

11. Independent Contractor. It is expressly understood and agreed that the Recipient is an independent contractor. The employees, servants and agents of the Recipient shall in no way be deemed to be and shall not hold themselves out as the employees, servants or agents of the County. The Recipient's employees, servants and agents shall not be entitled to any fringe benefits of the County such as, but not limited to, health and accident insurance, life insurance, paid vacation leave, paid sick leave or longevity. The Recipient shall be responsible for paying any salaries, wages or other compensation due its employees for services performed pursuant to this Agreement and for the withholding and payment of all applicable taxes, including, but not limited to, income and social security taxes to the proper Federal, State and local governments. The Recipient shall carry workers' compensation insurance coverage for its employees, as required by law and shall provide the County with proof of said coverage.

12. Nondiscrimination. The Recipient, as required by law, shall not discriminate against a person to be served or an employee or applicant for employment with respect to hire, tenure, terms, conditions or privileges of employment, programs and services provided, or a matter directly or indirectly related to employment because of race, color, religion, national origin, age, sex, sexual orientation, gender identity, height, weight, marital status, physical or mental disability unrelated to the individual's ability to perform the duties of the particular job or position

or political affiliation. The Recipient shall include the language of this assurance in all subcontracts for services covered by this Agreement. Breach of any provisions of this section shall be regarded as a material breach of this Agreement.

13. Indemnification and Hold Harmless. The Recipient shall, at its own expense, protect, defend, indemnify and hold harmless the County, and its elected and appointed officers, employees and agents from all claims, damages, costs, law suits and expenses, including, but not limited to, all costs from administrative proceedings, court costs and attorney fees that they may incur as a result of any acts, omissions or negligence of the Recipient or any of its officers, employees, agents or subcontractors which may arise out of this Agreement. This includes any repayment which may be required in the event any portion of the Award Amount is not spent in conformance with this Agreement such that the County is required to return or forego any portion of the Settlement Payments.

The Recipient's indemnification responsibilities under this section shall include the sum of damages, costs and expenses which are in excess of the sum paid out on behalf of or reimbursed to the County, its officers, employees and agents by the insurance coverage obtained and/or maintained by the Recipient pursuant to the requirements of this Agreement.

14. Insurance. The Recipient shall purchase and maintain insurance not less than the limits set forth below. All coverage shall be with insurance companies licensed and admitted to do business in State of Michigan and with insurance carriers acceptable to the County and have a minimum A.M. Best Company's Insurance Reports rating of A or A- (Excellent).

A. Workers' Compensation Insurance. Workers' Compensation Insurance including Employers' Liability Coverage in accordance with all applicable statutes of the State of Michigan.

B. Commercial General Liability Insurance. Commercial General Liability Insurance on an "occurrence basis" only with limits of liability of not less than ONE MILLION AND NO/100 DOLLARS (\$1,000,000.00) per occurrence and/or aggregate combined single limit, personal injury, bodily injury and property damage. Coverage shall include the following: (1) Broad Form General Liability Endorsement or equivalent if not in policy proper; (2) Contractual Liability; (3) Products and Completed Operations; and (4) Independent Contractors coverage.

C. Motor Vehicle Liability. Motor Vehicle Liability Insurance, including Michigan No-Fault Coverage, with limits of liability of not less than FIVE HUNDRED THOUSAND AND NO/100 DOLLARS (\$500,000.00) per occurrence, and/or aggregate, combined single limit, bodily injury and property damage. Coverage shall include all owned, non-owned and hired vehicles.

D. Additional Insured. The Commercial General Liability Insurance as described above shall include the following as "Additional Insured"; the County, and all of the County's elected and appointed officials, employees and volunteers, all boards, commissions and/or authorities and board members including employees and volunteers

thereof. Said insurance shall be considered to be primary coverage to the Additional Insureds, and not contributing with any other insurance or similar protection available to the Additional Insureds whether said other available coverage be primary, contributing or excess.

E. Deductibles and SIRs. The Recipient shall be responsible for paying any deductibles and self-insured retentions (SIRs) in its insurance coverages.

F. Cancellation Notice. Workers' Compensation Insurance, Commercial General Liability Insurance and Motor Vehicle Liability Insurance as described above, shall include on their certificates of insurance, which are to be submitted to the County as required below, an endorsement stating the following: "It is understood and agreed that thirty (30) days advance written notice of cancellation, non-renewal, reduction and/or material change shall be sent to: both the Wexford County Administrator and In the event the Recipient's insurer refuses to provide such an endorsement the Recipient shall be responsible for providing the required notice.

G. Proof of Insurance. The Recipient shall provide to the County at the time this Agreement is returned by it for execution, with two (2) copies of certificates of insurance for each of the policies mentioned above. If so requested, certified copies of policies shall be furnished.

15. Waivers; Remedies. No delay on the part of any of either Party in exercising any right, power or privilege hereunder shall operate as a waiver thereof, nor shall any waiver on the part of the either Party of any right, power or privilege hereunder operate as a waiver of any other right, power or privilege hereunder, nor shall any single or partial exercise of any right, power or privilege hereunder preclude any other or further exercise of any other right, power or privilege hereunder. The rights and remedies herein provided are cumulative and are not exclusive of any rights or remedies which the parties hereto may otherwise have at law or in equity.

In the event the Recipient is in breach of any provision of Applicable Law, or misuses the Award Amount funding in any way, it shall immediately, upon written demand from the County, repay all of the funds previously received pursuant to this Agreement.

16. Modifications, Amendments or Waiver of Provisions of the Agreement. All modifications, amendments or waivers of any provision of this Agreement shall be made only by the written mutual consent of the parties hereto.

17. Assignment or Subcontracting. The Recipient shall not assign, subcontract or otherwise transfer its duties and/or obligations under this Agreement.

18. Purpose of Section Titles. The titles of the sections set forth in this Agreement are inserted for the convenience of reference only and shall be disregarded when construing or interpreting any of the provisions of this Agreement.

19. Complete Agreement. This Agreement, Exhibit A, and any additional or supplementary documents incorporated herein by specific reference contains all the terms and conditions agreed upon by the parties hereto, and no other agreements, oral or otherwise, regarding the subject matter of this Agreement or any part thereof shall have any validity or bind any of the parties hereto.

20. Survival Clause. All rights, duties and responsibilities of any party that either expressly or by their nature extend into the future, including warranties and indemnification, shall extend beyond and survive the end of the Agreement 's term or the termination of this Agreement.

21. Invalid/Unenforceable Provisions. If any clause or provision of this Agreement is rendered invalid or unenforceable because of any State or Federal statute or regulation or ruling by any tribunal of competent jurisdiction, that clause or provision shall be null and void, and any such invalidity or unenforceability shall not affect the validity or enforceability of the remainder of this Agreement. Where the deletion of the invalid or unenforceable clause or provision would result in the illegality and or unenforceability of this Agreement, this Agreement shall be considered to have terminated as of the date in which the clause or provision was rendered invalid or unenforceable.

22. Force Majeure. Any delay or failure in the performance by either Party hereunder shall be excused if and to the extent caused by the occurrence of a Force Majeure. For purposes of this Agreement, Force Majeure shall mean a cause or event that is not reasonably foreseeable or otherwise caused by or under the control of the Party claiming Force Majeure, including acts of God, fires, floods, epidemics, explosions, riots, wars, hurricane, sabotage terrorism, vandalism, accident, restraint of government, governmental acts, injunctions, labor strikes, that prevent the claiming Party from furnishing the materials or equipment, and other like events that are beyond the reasonable anticipation and control of the Party affected thereby, despite such Party's reasonable efforts to prevent, avoid, delay, or mitigate the effect of such acts, events or occurrences, and which events or the effects thereof are not attributable to a Party's failure to perform its obligations under this Agreement.

23. Non-Beneficiary Contract. Nothing expressed or referred to in this Agreement is intended or shall be construed to give any person other than the Parties to this Agreement or their respective successors or permitted assignees any legal or equitable right, remedy or claim under or in respect of this Agreement, it being the intention of the Parties that this Agreement and the transactions contemplated hereby shall be for the sole and exclusive benefit of such Parties or such successors and permitted assignees. The Recipient's suppliers or providers are not considered the Recipient's assignees and are not third-party beneficiaries.

24. Notice. Any and all correspondence or notices required, permitted, or provided for under this Agreement to be delivered to any Party shall be sent to that Party by either electronic mail with confirmation of receipt or by first class mail. All such written notices shall be addressed as provided below. All correspondence shall be considered delivered to a Party as of the date that the electronic confirmation of receipt is received (if notice is provided by electronic mail) or when notice is deposited with sufficient postage with the United State Postal Service. A notice of termination shall be sent via electronic mail with confirmation of receipt or

via certified mail to the address specified below. Notices shall be mailed to the following addresses:

If to County: 437 E. Division St, Cadillac MI 49601.

If to Recipient: 1049 E Newell St, White Cloud MI 49349.

25. Counterparts. This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original and all of which together shall constitute one and the same instrument. The exchange of copies of this Agreement and of signature pages by facsimile or PDF transmission shall constitute effective execution and delivery of this Agreement as to the parties hereto and may be used in lieu of the original Agreement for all purposes. Signatures of the Parties hereto transmitted by facsimile or PDF shall be deemed to be their original signatures for all purposes.

26. Entire Agreement. This Agreement sets forth the entire agreement between the Parties and supersedes any and all prior agreements or understandings between them in any related to the subject matter of this Agreement. It is further understood and agreed that the terms and conditions of this Agreement are contractual and are not a mere recital and that there are no other agreements, understandings, contracts, or representations between the Parties in any way related to the subject matter of this Agreement, except as expressly stated in this Agreement.

27. Certification of Authority to Sign Agreement. The people signing on behalf of the parties to this Agreement certify by their signatures that they are duly authorized to sign this Agreement on behalf of the party they represent and that this Agreement has been authorized by the party they represent.

THE AUTHORIZED REPRESENTATIVES OF THE PARTIES HERETO HAVE FULLY EXECUTED THIS AGREEMENT ON THE DATE AND YEAR FIRST ABOVE WRITTEN.

COUNTY OF WEXFORD

District Health Dept. Number 10

By: _____
Gary Taylor, Chairperson
County Board of Commissioners

Date: _____

By: _____
(Signature)
Name: _____
(Print or Type)
Title: _____
(Print or Type)
Date: _____

Exhibit A Scope of Work

As set forth in the proposal by Recipient, a copy of which is attached, Recipient shall perform the following Program Services:

Purchase and Placement of not less than seven (7) additional NaloxBoxes and five (5) Naloxone Distribution Boxes at locations in Wexford County. Not to Exceed Amount: \$4,500

Implementation and expansion of a year long media campaign to inform the community about harm reduction tools and resources available in Wexford County to prevent opioid overdoses and information on appropriate monitoring, securing, and disposal of opioid medications to prevent opioid misuse. This will include not fewer than two different billboards to be located at rotating locations throughout Wexford County. In addition, Recipient shall develop at least two different Radio PSA Messages to be broadcast within Wexford County. Not To Exceed Amount: \$23,000

Host a Harm Reduction Conference and Other Harm Reduction Events. One conference will be held on during the term of this Agreement at a location within Wexford County ? Not To Exceed Amount: \$10,000

Staff Time to Support Program and Scope of Work: Not To Exceed Amount: \$12,500

