



CITY OF MERRILL
HEALTH AND SAFETY COMMITTEE
AGENDA • MONDAY MARCH 27, 2017

Regular Meeting

City Hall Council Chambers

5:00 PM

- I. Call to Order
- II. Nuisance Complaints and Vouchers:
 1. Nuisance Complaints
 2. Vouchers
- III. Picnic and/or Liquor License Applications:
 1. Application from the Lincoln County Rodeo Association Inc. for a temporary Class "B" (picnic) license to sell fermented malt beverages at the Merrill Festival Grounds during the Wisconsin Pro Rodeo, June 9 - June 11, 2017.
 2. Application from the Merrill Firefighters Charities for a temporary Class "B" (picnic) license to sell fermented malt beverages at Ott's Park in conjunction with the Merrill Firefighters Charities Softball Tournament, August 4 - August 6, 2017.
 3. Any other license application(s).
- IV. Other agenda items to consider:
 1. Continued discussion to consider authorization to implement a Community Paramedic Pilot Program between the City of Merrill Fire Department and Ministry Good Samaritan Health Care.
- V. Agenda items related to Mobile Food Vendors:
 1. Ordinance Amending Chapter 8, Article XII, Section 8-330 to add Mobile Food Vendors.
 2. Ordinance Amending Chapter 16, Section 1 to add licensing fees for Mobile Food Vendors.
 3. Ordinance Amending Chapter 28, Article 1, Section 28-1(c) (25), related to Mobile Food Vendor operations in City parks.
 4. Mobile Food Vendor permit application form.
- VI. Monthly Reports:
 1. Fire Chief Savone
 2. Police Chief Bennett
 3. Lincoln County Humane Society
 4. Consider placing monthly reports on file

- VII. Establish date, time and location of next regular meeting
- VIII. Public Comment Period
- IX. PUBLIC HEARING (6:00 P.M.)
 - 1. Public Hearing on application from Eric Maluegge, 900A S Foster Street, to allow one household to have more than four (but six or less) dogs.
- X. Adjournment

NUISANCE COMPLAINT SUMMARY				
<u>TYPE</u>	<u>TOTAL ACTIVE</u>	<u>1-30 DAYS</u>	<u>31-60 DAYS</u>	<u>over 60 DAYS</u>
Dog Waste	0			
Exterior Appearance	0			
Garage-Deteriorating	0			
Garbage - Junk	0			
Lack of Heat	0			
Misc. (Multiple Issues)	2			2
Rats	0			
Noise	0			
Unsafe Conditions	0			
Barking/Vicious Dog	0			
Mowing	0			
Plumbing Problems	0			
Junk Vehicle	0			
Unsanitary Conditions	0			
<i>Total on attached reports</i>	2	0	0	2
Status of Nuisance Complaints Over 60 Days				
<u>Address</u>	<u>Type</u>	<u>Detail</u>		
211 Cleveland St	Misc	due 3/23/17		
1201 N Memorial Dr	Misc	will be checked 4/1/17		

Attachment: Nuisance Complaints - up to March 15 (2311 : Nuisance Complaints)

D E T A I L

INCIDENT#/DESCRIPTION PROPERTY STATUS ORIG DATE DUE DATE P CREATED BY CONTACT NAME

TASK#/DESCRIPTION	PROPERTY	STATUS	ORIG DATE	DUE DATE	P	ASG GRP	ASG USR	RES CODE	RES DATE
1566 INSPECT	505 2ND ST E	Active	6/22/07	6/23/07	1	INS	No Inspect		

1858-MISC 211 CLEVELAND ST ACTIVE 10/20/16 10/21/16 1 brenda-g MOSH LLC

***** NOTES *****

10/19/16 DENNIS WHITING, 211 CLEVELAND ST APT C, FILED A COMPLAINT ON SCOTT MOSHER, 211 CLEVELAND ST. REFUSED TO PAY ELECTRIC BILL - NO ELECTRIC OR HEAT APT A. CEILING TILE FALLING DOWN, LEAKS WHEN RAINING. FOOD LOSS DUE TO NO ELECTRIC. NO LIGHTS - FALL RISK. FRONT STEPS FALLING APART - FALL RISK - BROKE BACK ON 3/4/16. EMAILED TO BLDG INSP 10/20/16

11/18/16 per Darin, Heat & elect back on, renter out, owner working on other issues-reporting to Darin.

1/17/17 due 1/23/17 per Shari

2/21/17 PER SHARI DUE 3/23/17

due today
3/23/17

TASK#/DESCRIPTION	PROPERTY	STATUS	ORIG DATE	DUE DATE	P	ASG GRP	ASG USR	RES CODE	RES DATE
1937 INSPECT	211 CLEVELAND S	Active	10/20/16	10/21/16	1	CODE			

1859-MISC 1201 N MEMORIAL DR ACTIVE 11/22/16 11/23/16 1 brenda-g LEITZKE, DONA V

***** NOTES *****

11/21/16 DONA LEITZKE (1111 N MEMORIAL DR/715-539-3259 HOME/715-539-4599 WORK) FILED A COMPLAINT ON NORTHSIDE ESTATES APARTMENT HOMES 1201 N MEMORIAL DR. WATER RUNOFF. SEE ATTACHMENT TO EMAIL. GIVEN TO BLDG INSP 11/22/16

1/17/17 Darin and Rod will check property on 4/1/17 and contact Swiderski as to what should be done.

to be checked
4/1/17

TASK#/DESCRIPTION	PROPERTY	STATUS	ORIG DATE	DUE DATE	P	ASG GRP	ASG USR	RES CODE	RES DATE
1938 INSPECT	1201 N MEMORIAL	Active	11/22/16	11/23/16	1	CODE			

TOTALS

INC CODE:
STATUS:

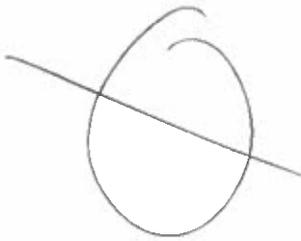
USER:
GROUP:
PRIORITY:
TYPE:

ORIGINATION: 0000000000 THRU 0000000000
DUE: 0000000000 THRU 0000000000
RESOLUTION: 0000000000 THRU 0000000000



		-----PRIORITY-----										
		0	1	2	3	4	5	6	7	8	9	TOTAL
STATUS	ACTIVE											
	CLOSED											
	VOIDED											
	SUSPENDED											
TOTALS												

-----SEQUENCES-----	
INCIDENT	COUNT
TOTAL INCIDENTS	



ST:
 OR SL: v. City of Merrill
 ENCE : ALPHABETIC
 TO/FROM ACCOUNTS SUPPRESSED

Attachment: Vouchers (2312 : Vouchers)

2.2.a

Packet Pg. 6

-----ID-----			GROSS	P.O. #			
POST DATE	BANK CODE	-----DESCRIPTION-----	DISCOUNT	G/L ACCOUNT	-----ACCOUNT NAME-----		DISTRIBUTION
01-000010 5 ALARM FIRE & SAFETY EQUIPMEN							
I-163839-2		CHARGING STATION	515.00				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N			
		CHARGING STATION		10 52200-03-40000	Operating Supplies		515.00

I-164002-1		CONVERSION KIT RESCUEAIRE	2,765.34				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N			
		CONVERSION KIT RESCUEAIRE		26 52200-03-40000	2% Fire Dues Expenses		2,765.34
=== VENDOR TOTALS ===			3,280.34				

01-002555 AMERICAN WELDING & GAS INC.							
I-460412B		OXYGEN	78.97				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N			
		OXYGEN		10 52300-03-40000	Operating Supplies		78.97
=== VENDOR TOTALS ===			78.97				

01-003672 APEX FIRE PROTECTION LLC							
I-90000-60		ANNUAL SPRINKLER INSPECT-FD	200.00				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N			
		ANNUAL SPRINKLER INSPECT-FD		10 52200-03-40000	Operating Supplies		200.00
=== VENDOR TOTALS ===			200.00				

01-002088 BOB'S WEST 64							
I-33092		OIL CHANGE	45.04				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N			
		OIL CHANGE		10 52100-03-51000	Vehicle Repair/Maintenan		45.04

I-33098		OIL CHANGE	45.04				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N			
		OIL CHANGE		10 52100-03-51000	Vehicle Repair/Maintenan		45.04
=== VENDOR TOTALS ===			90.08				

01-003611 CHOICE 1 HEALTH CARE SERVICES,							
I-6931		TEST STRIPS	74.85				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N			
		TEST STRIPS		10 52300-03-40000	Operating Supplies		74.85
=== VENDOR TOTALS ===			74.85				

NET:
OR SE...
ENCE : ALPHABETIC
TO/FROM ACCOUNTS SUPPRESSED

Attachment: Vouchers (2312 : Vouchers)

2.2.a

Packet Pg. 7

-----ID-----			GROSS	P.O. #		
POST DATE	BANK CODE	-----DESCRIPTION-----	DISCOUNT	G/L ACCOUNT	-----ACCOUNT NAME-----	DISTRIBUTION
01-000098 CLASSIC CLEANERS						
I-072707		2 UNIF 2 PCS - POLICE	27.81			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N		
		2 UNIF 2 PCS - POLICE		10 52100-03-50000	Equipment Repair	27.81
=== VENDOR TOTALS ===			27.81			
01-002051 CREATIVE PRODUCT SOURCING, INC						
I-101344		POP UP DESK NAME CARDS	28.00			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N		
		POP UP DESK NAME CARDS		26 52100-03-40500	DARE-Program Expense	28.00
=== VENDOR TOTALS ===			28.00			
01-004129 DEPARTMENT OF ADMINISTRATION						
I-505-0000016401		EXAM CENTER TESTING 8	241.00			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N		
		EXAM CENTER TESTING 8		10 52100-03-25000	Job Recruitment	241.00
=== VENDOR TOTALS ===			241.00			
01-001916 DNR ACCOUNTS RECEIVABLE						
I-370-0000004694		FACE MASK FILTERS & HOT SHIELD	155.24			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N		
		FACE MASK FILTERS & HOT SHIELD		10 52200-03-40000	Operating Supplies	155.24
=== VENDOR TOTALS ===			155.24			
01-000130 EMERGENCY MEDICAL PRODUCTS INC						
I-1887318		SOD CHLOR, PNEUMOTHORAX,	1,953.91			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N		
		SOD CHLOR, PNEUMOTHORAX,		10 52300-03-40000	Operating Supplies	1,953.91
I-1888561		MASKS, SYRINGE, EPINEPHRINE	443.60			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N		
		MASKS, SYRINGE, EPINEPHRINE		10 52300-03-40000	Operating Supplies	443.60
I-1888695		SAFETY GLASS	23.75			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N		
		SAFETY GLASS		10 52300-03-40000	Operating Supplies	23.75
I-1890049		SAFETY GLASS	4.75			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N		
		SAFETY GLASS		10 52300-03-40000	Operating Supplies	4.75
=== VENDOR TOTALS ===			2,426.01			

2.2.a

Attachment: Vouchers (2312 : Vouchers)

Packet Pg. 8

PRINT:
OR SERIAL CITY OF MERRILL
SEQUENCE : ALPHABETIC
TO/FROM ACCOUNTS SUPPRESSED

-----ID-----			GROSS	P.O. #		
POST DATE	BANK CODE	-----DESCRIPTION-----	DISCOUNT	G/L ACCOUNT	-----ACCOUNT NAME-----	DISTRIBUTION
<hr/>						
01-004127 EMS eSchedule INC						
I-3263		12 MONTHLY APPLICATION PLUS	2,870.00			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N		
		12 MONTHLY APPLICATION PLUS		26 52200-03-40000	2% Fire Dues Expenses	950.00
		12 MONTHLY APPLICATION PLUS		10 52200-03-40000	Operating Supplies	960.00
		12 MONTHLY APPLICATION PLUS		10 52300-03-40000	Operating Supplies	960.00
		=== VENDOR TOTALS ===	2,870.00			
<hr/>						
01-004122 EVERBANK COMMERCIAL FINANCE IN						
I-4269505		KYOCERA RENTAL	279.50			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N		
		KYOCERA RENTAL		10 52200-03-40000	Operating Supplies	139.75
		KYOCERA RENTAL		10 52300-03-40000	Operating Supplies	139.75
		=== VENDOR TOTALS ===	279.50			
<hr/>						
01-003595 FIRE PRO INC						
I-SD10888		ANNUAL MAINT/CERT FIRE EXTING	84.50			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N		
		ANNUAL MAINT/CERT FIRE EXTINGU		10 52200-03-40000	Operating Supplies	84.50
		=== VENDOR TOTALS ===	84.50			
<hr/>						
01-004131 FIRELINE TRAINING & CONSULTING						
I-1753		2 FULL DAYS WRITING SEMINAR	3,497.59			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N		
		2 FULL DAYS WRITING SEMINAR		10 52200-03-32000	Education & Conference	1,000.00
		2 FULL DAYS WRITING SEMINAR		10 52300-03-32000	Education & Conference	1,000.00
		2 FULL DAYS WRITING SEMINAR		26 52200-03-40000	2% Fire Dues Expenses	1,497.59
		=== VENDOR TOTALS ===	3,497.59			
<hr/>						
01-000285 GARY'S TIRE SHOP						
I-270303007		LEFT REAR PATCH, SEAL RIMS	55.00			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N		
		LEFT REAR PATCH, SEAL RIMS		10 52100-03-51000	Vehicle Repair/Maintenan	55.00
		=== VENDOR TOTALS ===	55.00			

2.2.a

Attachment: Vouchers (2312 : Vouchers)

Packet Pg. 9

BT:
OR SE: CA City of Merrill
INCE : ALPHABETIC
TO/FROM ACCOUNTS SUPPRESSED

-----ID-----				GROSS	P.O. #		
POST DATE	BANK CODE	-----DESCRIPTION-----	DISCOUNT	G/L ACCOUNT	-----ACCOUNT NAME-----		DISTRIBUTION
01-001111 HARGRAVE APPLIANCES, INC.							
I-11998		WHEEL, CHOPPER, BEARING		143.35			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N		
		WHEEL, CHOPPER, BEARING			10 52200-03-40000	Operating Supplies	143.35
=== VENDOR TOTALS ===				143.35			
01-003164 HEARTLAND COOPERATIVE SERVICES							
I-232450		TOW HIGH PRAIRIE		35.52			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N		
		TOW HIGH PRAIRIE			26 52100-03-41575	Dog Unit Expenses	35.52
=== VENDOR TOTALS ===				35.52			
01-003315 IMAGE TREND							
I-105538		ELITE RESCUE SUPPORT,SCHEDULE		652.35			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N		
		ELITE RESCUE SUPPORT,SCHEDULER			10 52200-15-92500	CAD-Software Linking	326.18
		ELITE RESCUE SUPPORT,SCHEDULER			10 52300-15-92500	CAD-Linking Software	326.17
=== VENDOR TOTALS ===				652.35			
01-003727 KWIK TRIP							
I-1608959		GAS		8.37			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N		
		GAS			10 52200-03-53000	Gas & Oil - Vehicles	8.37
I-1623197		GAS		28.97			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N		
		GAS			10 52200-03-53000	Gas & Oil - Vehicles	28.97
=== VENDOR TOTALS ===				37.34			
01-002161 MED ALLIANCE GROUP, INC							
I-112614		MASK W/ PORTS		320.21			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N		
		MASK W/ PORTS			10 52300-03-40000	Operating Supplies	320.21
I-113058		LARGE ADULT DELUXE MASK		320.21			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N		
		LARGE ADULT DELUXE MASK			10 52300-03-40000	Operating Supplies	320.21
=== VENDOR TOTALS ===				640.42			

2.2.a

Attachment: Vouchers (2312 : Vouchers)

Packet Pg. 10

ST:
OR SE: City of Merrill
ENCE : ALPHABETIC
TO/FROM ACCOUNTS SUPPRESSED

-----ID-----				GROSS	P.O. #		
POST DATE	BANK CODE	-----DESCRIPTION-----	DISCOUNT	G/L ACCOUNT	-----ACCOUNT NAME-----		DISTRIBUTION
01-000041 MERRILL ACE HARDWARE							
I-159659		FASTENERS		1.24			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N		
		FASTENERS			10 52200-03-40000	Operating Supplies	1.24

I-159730		FASTENERS		1.08			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N		
		FASTENERS			10 52200-03-40000	Operating Supplies	1.08

I-159942		ANCHOR		1.99			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N		
		ANCHOR			10 52200-03-40000	Operating Supplies	1.99
		=== VENDOR TOTALS ===		4.31			

01-002656 MINISTRY GOOD SAMARITAN HEALTH							
I-1526		JAN 2017 LAB FEES		190.80			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N		
		JAN 2017 LAB FEES			10 52100-02-94000	Jail/Evidence	190.80
		=== VENDOR TOTALS ===		190.80			

01-000540 NAPA AUTO PARTS							
I-642172		WIRE BRUSH KIT, ELECT CLEANER		20.40			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N		
		WIRE BRUSH KIT, ELECT CLEANER			10 52200-03-51000	Vehicle Repair/Maintenan	20.40
		=== VENDOR TOTALS ===		20.40			

01-001487 NORTH CENTRAL TECHNICAL COLLEG							
I-MSC-003249		HEARTSAVER, FIRST AID CARDS		78.00			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N		
		HEARTSAVER, FIRST AID CARDS			10 52200-03-40000	Operating Supplies	78.00

I-MSC-003284		RENTAL PD-K9 TRAINING		110.00			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N		
		RENTAL PD-K9 TRAINING			10 52100-03-32000	Education & Conference	110.00
		=== VENDOR TOTALS ===		188.00			

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Packet Pg. 11

ST:
 OR SE: of City of Merrill
 NENCE : ALPHABETIC
 TO/FROM ACCOUNTS SUPPRESSED

-----ID-----			GROSS	P.O. #			
POST DATE	BANK CODE	-----DESCRIPTION-----	DISCOUNT	G/L ACCOUNT	-----ACCOUNT NAME-----		DISTRIBUTION
01-000551 NORTHWAY COMMUNICATIONS							
I-103587		REMOVE OLD LIGHT SEGMENTS	560.00				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N			
		REMOVE OLD LIGHT SEGMENTS		26	52100-03-47725	Police Vehicle/Equip Exp	560.00
=== VENDOR TOTALS ===			560.00				
01-002179 OFFICE ENTERPRISES INCORPORATE							
I-397463		OFFICE ENTERPRISES INCORPORAT	2.76				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N			
		OFFICE ENTERPRISES INCORPORATE		10	52100-03-40000	Operating Supplies	2.76
=== VENDOR TOTALS ===			2.76				
01-000377 REINDL PRINTING INC							
I-141005		REFUSAL OF TREATMENT FORMS	215.00				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N			
		REFUSAL OF TREATMENT FORMS		10	52300-03-40000	Operating Supplies	215.00
=== VENDOR TOTALS ===			215.00				
I-141191		YELLOW PARKING PASS	204.00				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N			
		YELLOW PARKING PASS		10	52100-03-40000	Operating Supplies	204.00
=== VENDOR TOTALS ===			419.00				
01-000537 ROTOGRAPHIC PRINTING							
I-450		FIRE DEPT BUS CARDS	180.00				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N			
		FIRE DEPT BUS CARDS		10	52200-03-40000	Operating Supplies	90.00
		FIRE DEPT BUS CARDS		10	52300-03-40000	Operating Supplies	90.00
=== VENDOR TOTALS ===			180.00				
01-000023 RTL ELECTRIC LLP							
I-61416		TRUCK CHARGE, TWISTER, TAIL,	151.95				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N			
		TRUCK CHARGE, TWISTER, TAIL,		10	52200-03-40000	Operating Supplies	151.95
I-61417		LINE VOLTAGE FOR DEH AC	1,130.00				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N			
		LINE VOLTAGE FOR DEH AC		10	52200-03-40000	Operating Supplies	1,130.00
I-61494		WP LIFT CVR PLATE	40.76				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N			
		WP LIFT CVR PLATE		10	52200-03-40000	Operating Supplies	40.76
=== VENDOR TOTALS ===			1,322.71				

2.2.a

Attachment: Vouchers (2312 : Vouchers)

Packet Pg. 12

BT:
 OR SLIP: via City of Merrill
 SEQUENCE : ALPHABETIC
 TO/FROM ACCOUNTS SUPPRESSED

-----ID-----				GROSS	P.O. #			
POST DATE	BANK CODE	-----DESCRIPTION-----	DISCOUNT	G/L ACCOUNT	-----ACCOUNT NAME-----			DISTRIBUTION
01-003098 SAFECARE DIV. MAGIC MEDIA INC								
I-2469		LG/XL GLOVES		311.94				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N			
		LG/XL GLOVES			10 52300-03-40000	Operating Supplies		311.94
=== VENDOR TOTALS ===				311.94				
01-003517 TRANSUNION RISK AND ALTERNATIV								
I-ACCT ID172022		SEARCH/REPORT		25.00				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N			
		SEARCH/REPORT			10 52100-02-94000	Jail/Evidence		25.00
=== VENDOR TOTALS ===				25.00				
01-000650 VICTORY JANITORIAL, INC.								
I-93292		TP ROLL, KITCHEN ROLL, DETRGN		119.13				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N			
		TP ROLL, KITCHEN ROLL, DETRGNT			10 52200-03-40000	Operating Supplies		119.13
=== VENDOR TOTALS ===				119.13				
01-000284 VIP ALL-VALUE								
I-100018-001		FOLDER, MARKERS		24.44				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N			
		FOLDER, MARKERS			10 52300-03-10000	Office Supplies		24.44
I-100019-001		TONER		84.99				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N			
		TONER			10 52300-03-10000	Office Supplies		84.99
I-99817-001		TAPE, FILE		36.96				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N			
		TAPE, FILE			10 52300-03-10000	Office Supplies		36.96
I-99828-001		TONER		84.99				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N			
		TONER			10 52300-03-10000	Office Supplies		84.99
I-99859-001		PADS		29.98				
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017			1099: N			
		PADS			10 52300-03-10000	Office Supplies		29.98
=== VENDOR TOTALS ===				261.36				

Attachment: Vouchers (2312 : Vouchers)

2.2.a
ET:
OR SET: 01 City of Merrill
ENCE : ALPHABETIC
TO/FROM ACCOUNTS SUPPRESSED

Packet Pg. 13

-----ID-----			GROSS	P.O. #		
POST DATE	BANK CODE	-----DESCRIPTION-----	DISCOUNT	G/L ACCOUNT	-----ACCOUNT NAME-----	DISTRIBUTION
01-000727 ZIEBELL'S DOOR COMPANY						
I-6801		ADJ RESCUE SQUAD DOOR	85.00			
3/15/2017	1	DUE: 3/15/2017 DISC: 3/15/2017		1099: N		
		ADJ RESCUE SQUAD DOOR		10 52200-03-40000	Operating Supplies	85.00
		=== VENDOR TOTALS ===	85.00			
		=== PACKET TOTALS ===	18,588.28			

2.2.a

Attachment: Vouchers (2312 : Vouchers)

Packet Pg. 14

PRINT:
 ORDER SET: BY City of Merill
 SORT: ALPHABETIC
 PRINT: FROM ACCOUNTS SUPPRESSED

** T O T A L S **

INVOICE TOTALS 18,588.28
 DEBIT MEMO TOTALS 0.00
 CREDIT MEMO TOTALS 0.00

BATCH TOTALS 18,588.28

** G/L ACCOUNT TOTALS **

BANK	YEAR	ACCOUNT	NAME	AMOUNT	*****LINE ITEM*****		*****GROUP BUDGET*****	
					ANNUAL BUDGET	BUDGET OVER AVAILABLE BUDG	ANNUAL BUDGET	BUDGET OVER AVAILABLE BUDG
2017	10	-21-0000	Accounts Payable Control	12,751.83-*				
	10	-52100-02-94000	Jail/Evidence	215.80	6,750	6,168.12	2,175,840	1,743,667.07
	10	-52100-03-25000	Job Recruitment	241.00	1,500	1,259.00	2,175,840	1,743,641.87
	10	-52100-03-32000	Education & Conference	110.00	7,000	5,506.00	2,175,840	1,743,772.87
	10	-52100-03-40000	Operating Supplies	206.76	9,000	6,493.37	2,175,840	1,743,676.11
	10	-52100-03-50000	Equipment Repair	27.81	3,000	2,972.19	2,175,840	1,743,855.06
	10	-52100-03-51000	Vehicle Repair/Maintenan	145.08	13,000	12,627.97	2,175,840	1,743,737.79
	10	-52200-03-32000	Eduation & Conference	1,000.00	3,000	800.00	1,298,146	1,028,744.79
	10	-52200-03-40000	Operating Supplies	3,896.99	34,000	28,662.80	1,298,146	1,025,847.80
	10	-52200-03-51000	Vehicle Repair/Maintenan	20.40	6,000	5,919.15	1,298,146	1,029,724.39
	10	-52200-03-53000	Gas & Oil - Vehicles	37.34	5,750	5,175.79	1,298,146	1,029,707.45
	10	-52200-15-92500	CAD-Software Linking	326.18	0	2,674.44- Y	1,298,146	1,029,418.61
	10	-52300-03-10000	Office Supplies	261.36	1,000	691.44	853,362	648,567.92
	10	-52300-03-32000	Education & Conference	1,000.00	6,000	3,780.17	853,362	647,829.28
	10	-52300-03-40000	Operating Supplies	4,936.94	38,000	23,782.77	853,362	643,892.34
	10	-52300-15-92500	CAD-Linking Software	326.17	0	1,256.62- Y	853,362	648,503.11
	26	-21-0000	Accounts Payable Control	5,836.45-*				
	26	-52100-03-40500	DARE-Program Expense	28.00	0	93.78- Y	0	10,843.03- Y
	26	-52100-03-41575	Dog Unit Expenses	35.52	0	189.73- Y	0	10,850.55- Y
	26	-52100-03-47725	Police Vehicle/Equip Exp	560.00	0	2,870.04- Y	0	11,375.03- Y
	26	-52200-03-40000	2% Fire Dues Expenses	5,212.93	0	15,294.17- Y	0	16,136.46- Y
	99	-14-0010	Due from General Fund	12,751.83 *				
	99	-14-0026	Due From Non-Lapsing	5,836.45 *				
			** 2017 YEAR TOTALS	18,588.28				

Application for Temporary Class "B" / "Class B" Retailer's License

See Additional Information on reverse side. Contact the municipal clerk if you have questions.

FEE \$ 30.00 pd

Application Date: 3-10-17

Town Village City of Merrill

County of Lincoln

The named organization applies for: (check appropriate box(es).)

- A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s. 125.26(6), Wis. Stats.
- A Temporary "Class B" license to sell wine at picnics or similar gatherings under s. 125.51(10), Wis. Stats.

at the premises described below during a special event beginning JUNE 9-17 and ending JUNE 11-17 and agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and/or wine if the license is granted.

1. Organization (check appropriate box) →
- Bona fide Club Church Lodge/Society
 - Chamber of Commerce or similar Civic or Trade Organization
 - Veteran's Organization Fair Association

(a) Name LINCOLN COUNTY RODEO ASSOC. INC.

(b) Address 906 NORTH CENTRE AVE MERRILL WI
(Street) Town Village City

(c) Date organized _____

(d) If corporation, give date of incorporation 1998

(e) If the named organization is not required to hold a Wisconsin seller's permit pursuant to s. 77.54 (7m), Wis. Stats., check this box:

(f) Names and addresses of all officers:

President BRYAN L. BLOCH

Vice President BRYAN MOODIE

Secretary GAIL BLOCH

Treasurer _____

(g) Name and address of manager or person in charge of affair: BRYAN L. BLOCH

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number MERRILL FESTIVAL GROUNDS 301 N. SALES.

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? YES

(d) If part of building, describe fully all premises covered under this application, which floor or floors, or room or rooms, license is to cover: GRAND STAIRS ALL OF FESTIVAL GROUNDS.

3. Name of Event

(a) List name of the event WIS RIVER PRO RODEO

(b) Dates of event JUNE 9, 10, 11 2017

DECLARATION

The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.

Officer Bryan L Bloch
(Signature/date)

LINCOLN COUNTY RODEO ASSOC. INC.
(Name of Organization)

Officer _____
(Signature/date)

Officer _____
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk 3/10/17

Date Reported to Council or Board _____

Date Granted by Council _____

License No. _____

See Additional Information on reverse side. Contact the municipal clerk if you have questions.

FEE \$ 30-

Application Date: 03-08-2017
County of Lincoln

Town Village City of Merrill

The named organization applies for: (check appropriate box(es))

- A Temporary Class "B" license to sell fermented malt beverages at picnics or similar gatherings under s. 125.26(6), Wis. Stats.
- A Temporary "Class B" license to sell wine at picnics or similar gatherings under s. 125.51(10), Wis. Stats.

at the premises described below during a special event beginning 08/04/2017 and ending 08/06/2017 and agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages and/or wine if the license is granted.

1. Organization (check appropriate box) →
- Bona fide Club
 - Church
 - Lodge/Society
 - Chamber of Commerce or similar Civic or Trade Organization
 - Veteran's Organization
 - Fair Association

(a) Name Merrill Firefighters Charities

(b) Address 406 County Rd X Merrill WI 54452
(Street) Town Village City

(c) Date organized _____

(d) If corporation, give date of incorporation _____

(e) If the named organization is not required to hold a Wisconsin seller's permit pursuant to s. 77.54 (7m), Wis. Stats., check this box:

(f) Names and addresses of all officers:

President John Kraegenbrink 406 Cty Rd X Merrill WI

Vice President Corey Nowak 910 Pier St. Merrill

Secretary Paul Graven

Treasurer _____

(g) Name and address of manager or person in charge of affair: Corey Nowak 910 Pier St

2. Location of Premises Where Beer and/or Wine Will Be Sold, Served, Consumed, or Stored, and Areas Where Alcohol Beverage Records Will be Stored:

(a) Street number 075 Park

(b) Lot _____ Block _____

(c) Do premises occupy all or part of building? _____

(d) If part of building, describe fully all premises covered under this application, which floor or floors, or room or rooms, license is to cover: _____

3. Name of Event

(a) List name of the event Merrill Firefighter Charities Softball Tournament

(b) Dates of event 08/04/2017 - 08/06/2017

DECLARATION

The Officer(s) of the organization, individually and together, declare under penalties of law that the information provided in this application is true and correct to the best of their knowledge and belief.

Officer John P Kraegenbrink II
(Signature/date)

Merrill Firefighter Charities
(Name of Organization)

Officer Corey S.P. Nowak
(Signature/date)

Officer _____
(Signature/date)

Date Filed with Clerk 3/13/17

Officer _____
(Signature/date)

Date Reported to Council or Board _____

Date Granted by Council _____

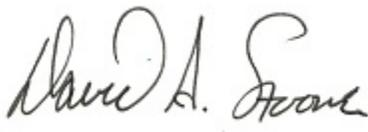
License No. _____

REQUEST TO INCLUDE ITEM ON AGENDA

Board or Committee: Health and Safety
 Date of Meeting: February 7, 2017
 Requested By: Fire Chief Dave Savone

Describe below the item(s) you wish to have put on the agenda:
 (Please attach any pertinent information)

Consider authorization to implement a Community Paramedic Pilot Program between the City of Merrill Fire Department and Ministry Good Samaritan Health Care..

Signed:  Date: February 7, 2017

Please return this completed form to the City Clerk's Office. Every effort will be made to include your item on the next possible meeting agenda. If you have any questions or concerns, please contact City Clerk Bill Heidemen. Thank you.

Received by Clerk's Office by: _____ Received Date: _____

Attachment: Request to Add Community Paramedic Pilot Program to the Health and Safety Committee Agenda (2339 : Consider Community

Community Paramedic Proposal



MINISTRY

Good Samaritan Health Center



Version: February 7, 2017

Attachment: Merrill Community Care Paramedic Proposal 2-2-2017 (3) (2339 : Consider Community Paramedic Pilot Program)

INTRODUCTION:

The Community Paramedic Program (CPP) will provide a new, innovative and transformational model of healthcare in our community. This program will connect at-risk community members to appropriate resources, including patients who frequently use emergency services.

Through grant funding from the Good Samaritan Health Center (GSHC) Foundation, this innovative program will use the city's current firefighter/paramedic staff to evaluate patients that are using the 911 emergency system for non-emergency healthcare needs, allowing the city's emergency crews to be available for more critical calls from our residents. This new and evolving model of community-based healthcare will enhance the patient care experience and will bridge gaps in the current healthcare system.

The program also, allows emergency medical technicians (EMT), and paramedics to provide care in non-emergency and non-life threatening situations for citizens that are participating in a program. The care provided by the EMS teams does not exceed their training and certification standards.

BACKGROUND:

Community Paramedic is the term being used to describe Integrated-Community Health programs now in development across the Wisconsin and the United States. Several fire based-EMS departments in the State of Wisconsin have taken the lead and have well established programs already, they include Steven Point, Wausau, West Ellis, Green Bay, Milwaukee and Madison Fire Departments.

In Late 2014, key leadership from the Merrill Fire Department approached Dr. Robyn Schertz, Emergency Medical Services (EMS) Director from Ministry Good Samaritan Health Care to consider the implementation of a Community Paramedic program in the community of City of Merrill for patients served by Ministry Good Samaritan Health Care. Leaders from the fire department and the hospital are convinced that such a program would benefit the community of the City of Merrill and agreed to continue to explore the concept.

The Merrill Fire Department intends to partner with Good Samaritan Health Center to explore and develop similar programs which would serve our citizens in the Merrill FD Response District in the most appropriate ways.

Since this time, a core group of committed team members from both the City of Merrill Fire Department and Ministry Good Samaritan Health Care have been meeting routinely to create a project charter, define the population of citizens that would likely benefit from such a program, and lay the ground work for program development.

ISSUES:

The question that the team asked itself is “how can we create a community healthcare follow-up service for patients who are either at high risk for readmission or are high Emergency Department and EMS utilizers?” The desired outcomes of a community paramedic program include:

- Reduce hospital readmissions
- Reduce inappropriate utilization of Emergency Department and EMS services
- Improve the patient’s overall wellness and the wellness of our community
- Reduce healthcare costs for patients and payers
- Increase efficiency with Emergency Department patient flow
- Improve patient satisfaction
- Avoid unnecessary costs for both Ministry Good Samaritan Health Care and City of Merrill Fire Department

GOALS:

- The goal of the Community Paramedic Pilot Project is to determine whether Paramedics working in an expanded role will help improve overall health systems integration, efficiency and/or fill identified healthcare needs.
- Identify frequent callers of the 911 system and assist them in accessing primary care and social services.
- Provide follow-up-care for citizens recently discharged from the hospital and at increased risk of a return to the emergency department or readmission to the hospital.
- Provide a successful home follow-up service to bridge the gap between hospital discharge and physician follow through.
- During initial visit, provide home safety check, which will be a comprehensive review of the patient’s home and surrounding structures. Identifying and suggesting remediation of slip, trips and fall hazards.
- Develop a trust in the community by having firefighter/paramedics help citizens navigate the current healthcare system.
- Reduce readmission rates for patients in the program
- Expand revenue and growth opportunities within the City of Merrill

The team determined that the following items were not appropriate to be included in their scope of work:

- Providing services to patients outside of the Merrill Fire Department Response District.
- Changing Merrill Fire Department paramedic scope of practice
- Changing the process flow of 911 call
- Addressing lack of public transportation, homeless shelter, mental health care which often leads to increased utilization of EMS and the Emergency Department
- Increasing the city budget or taxes

DISCUSSION:

The Merrill Fire Department is proposing to conduct a one year study of a Community Paramedic Pilot Program beginning April 1, 2017. The purpose of the study is to determine if a proactive approach to healthcare/emergency medical services will better serve the community.

The Merrill Fire Department and Good Samaritan Health Center have been evaluating proactive approaches to healthcare that reduce high-risk patients' hospital readmissions, reduce reliance on the 9-1-1 EMS system, engage social services partners to help discharged patients with needed services, and thus improve overall community health and safety. The program is designed to be "Merrill Specific" and tailored to meet the demographic needs of our community and ultimately each user.

Activities to be included in Community Paramedic Program**Medical Assessment & In-Home Care**

A systematic approach to evaluating a patient's current or chronic medical conditions that is used to communicate with the Medical Home and/or primary care physician. Services could include ECG, blood draw, basic vital signs, blood glucose levels, and carbon monoxide monitoring.

Activities of Daily Living Assessment

Assess patient's capacity for bathing, dressing, toileting, transferring, continence, and feeding. Provide referral to home healthcare as needed.

Home Safety Assessment

Assess patient's environment for safety related to the exterior and interior of the home, stairs, kitchen, bathroom, bedroom, and assistive medical devices.

Medication Reconciliation

Support patient, family and/or caregiver in the proper usage of home medications. Ensure thorough documentation of all prescription and non-prescription medications. Encourage the use of one, single pharmacy for medication oversight and consistency.

Community Resource Referral

When identified, provide assistance in referring patient to Senior Disability Services, Mental Health, Public Health, home health providers, non-emergent transport agencies, and other social service providers.

Hospital Discharge Planning Advocate

Provide in-home services to patient not meeting home health standard to provide coordination and patient, family, and/or caregiver understanding of hospital discharge plan. Services may include pharmacy assistance, follow-up with primary care physician, and coordination with discharge management services.

Collaboration with Primary Care Physician

Support patient, family, and/or caregiver in the proper usage of home medications and management of chronic illness. Report any signs or symptoms that might require an office visit.

INITIAL EVALUATION

As a measure of efficiency and financial resourcefulness, Merrill Fire Department has partnered with Good Samaritan Health Center to explore this subject through a pilot project focusing on training, development and response study which expected to last approximately one year.

In late 2014, Fire Chief Savone and Dr. Robyn Schertz met to discuss the possibly to develop this program. Over the last two years many meeting have been conducted with members of the GSHC staff along with Merrill Administrative staff and Merrill Local 847 members.

A one-year period should generate enough data to appropriately identify whether or not the program should be continued as a viable/sustainable healthcare response model for our community. The data from the study will be compiled into a shared research document with Good Samaritan Health Center. The results from the research effort will be shared with the Merrill City Council and the healthcare industry.

BUDGET IMPACT:

The Merrill Fire Department is committed to investing in our public safety services to keep our residents healthy and safe. Through innovative programming and strategic capital investments in personnel, we are working to ensure that Fire Department members are sufficiently prepared to keep up with the city's continuous growth and evolving needs.

There is no budgetary impact of this pilot project because it has been funded by the Good Samaritan Health Center Foundation. There is no funding commitment or expectation by the City of Merrill.

NEXT STEP PROPOSAL:

The Merrill Fire Department has reached a tentative agreement with Good Samaritan Health Center to facilitate a more detailed study of this service delivery model. The time frame for the proposed study is one year, beginning April 1, 2017.

CONCLUSION:

It is the belief of the team that a sizeable number of City of Merrill citizens would benefit from the development and implementation of a Community Paramedic program. Such a program would also assist Ministry Good Samaritan Health Care in meeting its mission and vision; more fully utilize the skill set of the MFD staff, improve the overall health of the community, and better utilize our human and financial resources through synergy between the two entities.

RECOMMENDATION:

The safety of our residents is of paramount importance to the MFD, mayor and Council. I am confident that this program and investments will serve our community well. The Fire Chief recommends that the city council adopt the program. The Fire Chief respectfully request approval to implement a Community Paramedic Pilot Program between the City of Merrill Fire Department and Ministry Good Samaritan Health Care.

MINISTRY HEALTH CARE

Community Paramedic Program

A Joint Venture between Ministry Good
Samaritan Health Center and the Merrill Fire
Department

Robyn Schertz
10/26/2016

Executive Summary

Ministry Good Samaritan Health Center serves a predominantly rural and older community and cares for a significant number of patients with diagnoses of congestive heart failure (CHF), chronic obstructive pulmonary disease (COPD) and pneumonia. These are three of the diagnoses targeted by the Centers of Medicare and Medicaid Services (CMS) for penalties should a patient be re-admitted to the hospital within 30 days of discharge.

While home health skilled nursing services are an excellent option for home-bound patients, many patients with chronic illnesses do not meet the criteria to have such care covered under their health insurance plans. Community Paramedicine is an emerging health profession that serves to close this gap by using existing providers such as paramedics in expanding roles to improve the health and wellness of the community. The Merrill Fire Department Paramedics are very well respected in our community; expanding the role of the paramedic to preventative health care services is a natural transition that can help fill this void.

The Community Paramedic Program will be a joint effort between Ministry Good Samaritan Health Center and the Merrill Fire Department. Referrals for the program will originate with Ministry Good Samaritan Health Center's emergency department and inpatient unit. Patients discharged from the inpatient or outpatient settings and who are identified as having a primary diagnosis of COPD, pneumonia or CHF will be identified as candidates for home visits. Once the patient agrees to participate in the program, they will receive two visits from community paramedics in their home. The first of these visits will occur within 48 hours of hospital or ED discharge in order to identify and correct any barriers to optimal medical treatment of their medical conditions and to prevent a need for a second ED visit or hospitalization. The community paramedics will also facilitate optimal communication and outpatient follow-up with the patient's primary care provider. The second visit will occur one week later and ensure that the patient is following their recommended treatments. If successful, the community paramedic program will help our community members dealing with chronic illnesses to optimize their treatments at home and to maintain a level of health that prevents repeat hospitalizations.

Aside from reducing hospital readmissions, the community paramedic program is also about improving the overall wellbeing of the communities we serve. It has been widely recognized that ground level falls account for the most common cause of trauma in our area, especially among the chronically ill or elderly populations. Therefore, the community paramedic program will also offer home safety checks, a comprehensive review of our patient's home and surrounding structures that identifies and offers suggestions to remediate trip or fall hazards before an accident happens. Patients will be referred to this benefit of the community paramedic program through referral from the emergency department and inpatient units as well.

Ministry Good Samaritan Health Center's Foundation has graciously approved funding to pilot this community improvement initiative for one year. If demonstrated to be successful, the program will be expanded to include patients discharged back to our community from other area hospitals, and in the future, other health diagnoses as well.

Project Objectives

- Develop a community outreach program, through the use of Community Care Paramedicine home visits, that will enhance the lives and health outcomes of patients with chronic health conditions
- Identify individuals at high risk of hospitalization or readmission to the hospital for a principle diagnosis of congestive heart failure (CHF), pneumonia or chronic obstructive pulmonary disease (COPD)
- Create supporting paramedic protocols to support paramedic-based home visits
- Develop patient-friendly reference guides for understanding the symptoms related to their chronic condition in order to facilitate patient identification of times in which an intervention is needed to maintain health status
- Use community paramedic visits as a way to monitor patient understanding of medication prescriptions and symptoms requiring intervention
- Collaboration of information between the field paramedic and the primary care providers in real-time to help intervene when needed to prevent hospitalization and emergency department visits
- If this program is proven to be successful in managing patients with COPD, pneumonia and CHF, protocols can later be expanded to other areas which may include diabetes, acute myocardial infarction, and patients with recent cardiothoracic surgery.

Project Deliverables

- **Deliverable A:** Selection criteria for patient referral to program
- **Deliverable B:** Templates and tracking forms for visit documentation
- **Deliverable C:** Introductory meetings with primary care providers to discuss program
- **Deliverable D:** Data flow from paramedics to primary care providers including: fax and telephone communication, urgent call process, and testing
- **Deliverable E:** EMS and Hospital Policies/Procedures to support program
- **Deliverable F:** Supplies Needed for Program
- **Deliverable G:** Training and clinical rotations for EMS providers
- **Deliverable H:** Viability and value of program

Known Exclusions

1. Identification of high risk patients discharged from hospitals outside of Merrill and back to our community
2. Community Paramedicine visits targeting diagnoses other than the three initial targets of CHF, COPD, and home safety checks.
3. Performing interventions on patients other than what is dictated in protocols
4. Implementation of a Paramedic based computerized medical record that would communicate data to Ministry's computerized medical record

Project Objectives

- **Financial Objectives**
 - Overhead costs not to exceed \$4,803

Updated 10/11/2016

- Supply costs not to exceed \$358
- Total project cost not to exceed \$14,652
- **Schedule Objectives**
 - Kickoff meeting will be held 12/5/2016
 - All paper forms for program will be completed by 12/16/2016
 - EMS Protocols will be submitted to the state by 1/16/2017
 - Paramedic training will be completed by 4/2/2017
 - Paramedic shadowing will be completed by 4/28/2017
 - Program will go live 5/1/2017
 - Pilot period will go from 5/1/2017-4/30/2018
 - Final reports and program data will be reviewed with project sponsors by 5/5/2018
- **Other Objectives**
 - Reduce 30 day COPD readmission rate from 27.9% to less than or equal to goal of 11%
 - Reduce/maintain 30 day CHF readmission rate to less than or equal to 11% (currently 4%)
 - Reduce 30 day pneumonia readmission rate to less than or equal to goal of 11%
 - Track visits in which a need for expedited follow up is needed sooner than scheduled primary care visit.
 - If need for follow up is identified by paramedic, what percent of patients are seen by PCP within 72 hours (goal 90%)
 - Patient Satisfaction with Community Paramedic Program (patient found visit helpful, patient would recommend service to others) is at a minimum 75% positive with goal of 90% positive

Project Organization

Clinical Project Manager:	Robyn Schertz, MD FACEP President, Medical Staff Ministry Good Samaritan Health Center Medical Director, Emergency Department MGS HC Medical Director, Lincoln County EMS, Merrill Division
Business Project Manager:	Kyle Carr, RN Director of Patient Services Ministry Good Samaritan Health Center
EMS Partner:	Chief Dave Savone, Merrill Fire Department, Lincoln County EMS, Merrill Division
Case Management Liaison:	Colleen Schuett, RN CPHM, Quality Improvement, Risk Management Specialist, Case Management Leader, Ministry Good Samaritan Health Center
Sponsor:	Ryan Andrews, MD Chief Medical Officer-Ministry St. Michael's Hospital, Interim Chief Medical Officer- Ministry St. Clare's Hospital, Interim Chief Medical Officer- Ministry Good Samaritan Health Center, Interim Chief Medical Officer- Diagnostic and Treatment Center

Updated 10/11/2016

Sponsor: Rachel Yaron, RN, Vice President Quality & Safety St. Clare's Hospital,
Executive Director Diagnostic and Treatment Center, Chief
Administrative Officer for Ministry Good Samaritan Health Center

Other Information In order for project to move forward, funding must be secured for cost of supplies and home visits. A grant proposal will be submitted to the Federal Office of Rural Health Policy for the Rural Health Network Development Program. Award date for this grant is May 1, 2017. Should the organization fail to be awarded this particular grant, the Ministry Good Samaritan Health Center Foundation has expressed a commitment to support grant funding to pilot this project.

Updated 10/11/2016

Risk Log

Project Name/ID: Community Paramedic Program

Document	Information
Date:	10/12/2016
Contact:	Kyle Carr
Project Manager:	Robyn Schertz

Potential	Description of Risk	Project Impact	Response	Responsibility
3	City Council may not approve program	1	Educate City Council about short and long term community benefits to citizens of Merrill and surrounding areas	Dave
3	Fire Fighter Union may not agree to the financial terms on behalf of members	1	Union will be engaged in discussions ongoing and will be able to provide input as needed	Dave
3	State of Wisconsin: May change rules/laws that require a higher level of certification to perform community paramedicine	1	Very unlikely that this will occur next year, but it may be a risk long-term (2-5 year range). State EMS proceedings will be monitored to evaluate for risk. Alternative sources of funding will be sought to pay for increased education requirements if this comes to pass.	Dave
3	Staffing levels of paramedics may not allow for home visits on certain dates	2	Advance notice and building flexibility in scheduling with alternate visits dates will mitigate this restriction.	Dave
3	Primary Care Physicians from area clinics refuse to participate in program	3	Very unlikely all clinics would refuse, other clinics likely to continue to be involved. Will get investment from each clinic to ensure they have input into program and explain the benefits they will reap from the program as well.	Robyn, Colleen
2	Funding for program	1	GSHC will apply for federal grant funding to pay for cost of pilot program. Funding is available for 3 years for grant. If no grant, cost will need to be budgeting in for facility for next fiscal year, delaying implementation.	Kyle, Colleen

Potential Level		Project Impact	
1 =	High	1 =	High
2 =	Medium	2 =	Medium
3 =	Low	3 =	Low

Stakeholder Analysis Template

Primary Stakeholders	Role on the Project or Role within the Organization	Contribution to the Project	Project Influence (Low, Medium or High)	Communication Plan (Frequency and Method)	Person Responsible to Communicate
Ryan Andrews	CMO, Ministry Good Samaritan Health Center	Project Sponsor	High	Monthly Meetings, Weekly emails, calls as needed	Robyn Schertz
Rachel Yaron	VP Patient Care, Ministry Good Samaritan Health Center	Project Sponsor	High	Monthly Meetings, Weekly emails, calls as needed	Kyle Carr
Robert Sedlacek	MMG Physician and PCP Liaison to project	Input on training, education for EMS, patient care goals and patient documentation	High	Weekly emails, calls and meetings as needed	Robyn Schertz
Merrill Primary Care Physicians	Consulting, process flow	Support program, develop communication methods with paramedics	High	Monthly Meetings, phone calls, emails as needed	Robyn Schertz
Patients	Participants in program	Engagement and feedback	High	Follow up phone calls, satisfaction surveys	Colleen Schuett
EMS Personnel	Will complete training and perform home visits	Perform home visits	High	Emails as needed	Dave Savone
Secondary Stakeholders					
Linda Graveen	Administrative	Scheduling,	Medium	Monthly Meetings,	Kyle Carr

Attachment: Dr. Schertz Report CPP (3) (2339 : Consider Community Paramedic Pilot Program)

	Assistant	Paperwork		Weekly emails, calls as needed	
City Council of Merrill	Approval of EMS staff to engage in community paramedic program	Approve pursuit of venture	High	Monthly Meetings, emails and calls as needed	Dave Savone
Case Management Staff	Patient Identification and follow up	Ongoing patient referrals, fine-tuning of program	High	Monthly meetings as needed, emails and phone calls as needed	Kyle Carr
Local Firefighter Union Leaders	Approve EMS participation in program	Approval	High	Emails, meetings as needed	Dave Savone
Jana Johnson	Administrative Assistant	Scheduling, paperwork	Medium	Phone calls, emails as needed	Dave Savone
Phil Skoug	Paramedic	EMS Protocols	Medium	Emails, phone calls as needed	Dave Savone
Ross Witucki	Paramedic Training Coordinator	Visit Checklists and Paramedic Training	Medium	Phone Calls, emails as needed	Dave Savone
Scott Krause	EMS Lead	Paramedic Training	Low	Phone Calls, emails as needed	Dave Savone

**Community Paramedic Program
Work Breakdown Structure**

		Duration (in days)
Deliverable 1 (1.1)	Selection criteria for patient referral to program	
1.1.1	Identify Inpatient Referral Process	2
1.1.2	Identify Outpatient Referral Process (ED)	2
1.1.3	Develop method to notify EMS of patient referral	1
Deliverable 2 (1.2)	Templates and tracking forms for visit documentation	
1.2.1	Create visit Checklists	5
1.2.2	Create Medication Discrepancy Tool	2
1.2.3	Create Patient Education Materials	7
1.2.4	Create Home Safety Checklist	1
1.2.5	Create Patient Referral Tracking Log	1
Deliverable 3 (1.3)	Introductory meetings with primary care providers to discuss program	
1.3.1	Meet with Ministry Medical Group (MMG)	14
1.3.2	Meet with Marshfield Clinic (MCMC)	14
1.3.3	Meet with Aspirus Primary Care Clinic	14
1.3.4	Meet with Bridge Community Clinic (BCC)	14
Deliverable 4 (1.4)	Data flow from paramedics to primary care providers, including: fax and telephone communication, urgent call process, and testing	
1.4.1	Troubleshoot process with MMG	10
1.4.2	Troubleshoot process with MCMC	10
1.4.3	Troubleshoot process with Aspirus Clinic	10
1.4.4	Troubleshoot process with BCC	10
Deliverable 5 (1.5)	EMS and Hospital Policies/Procedures to support program	
1.5.1	Write Hospital Policies and Procedures	30
1.5.2	Write EMS Policies and Procedures	60
1.5.3	Create Patient Satisfaction Materials	7
Deliverable 6 (1.6)	Supplies Needed for Program	
1.6.1	Identify Clinical Supply needs	1
1.6.2	Identify Office Supply needs	2
1.6.3	Purchase all supplies	20
Deliverable 7 (1.7)	Training and clinical rotations for EMS providers	
1.7.1	Develop training based on policies and visit checklists	14
1.7.2	Arrange shadowing opportunities at local facilities	30
1.7.3	Complete paramedic training for program	2
Deliverable 8 (1.8)	Viability and value of program	
1.8.1	Evaluate patient feedback regarding program	365
1.8.2	Determine effectiveness in lowering readmission rates	365
1.8.3	Determine effectiveness of fall/injury prevention	365
1.8.4	End pilot and determine viability	5

Updated 10/13/2016

Quality Management Plan

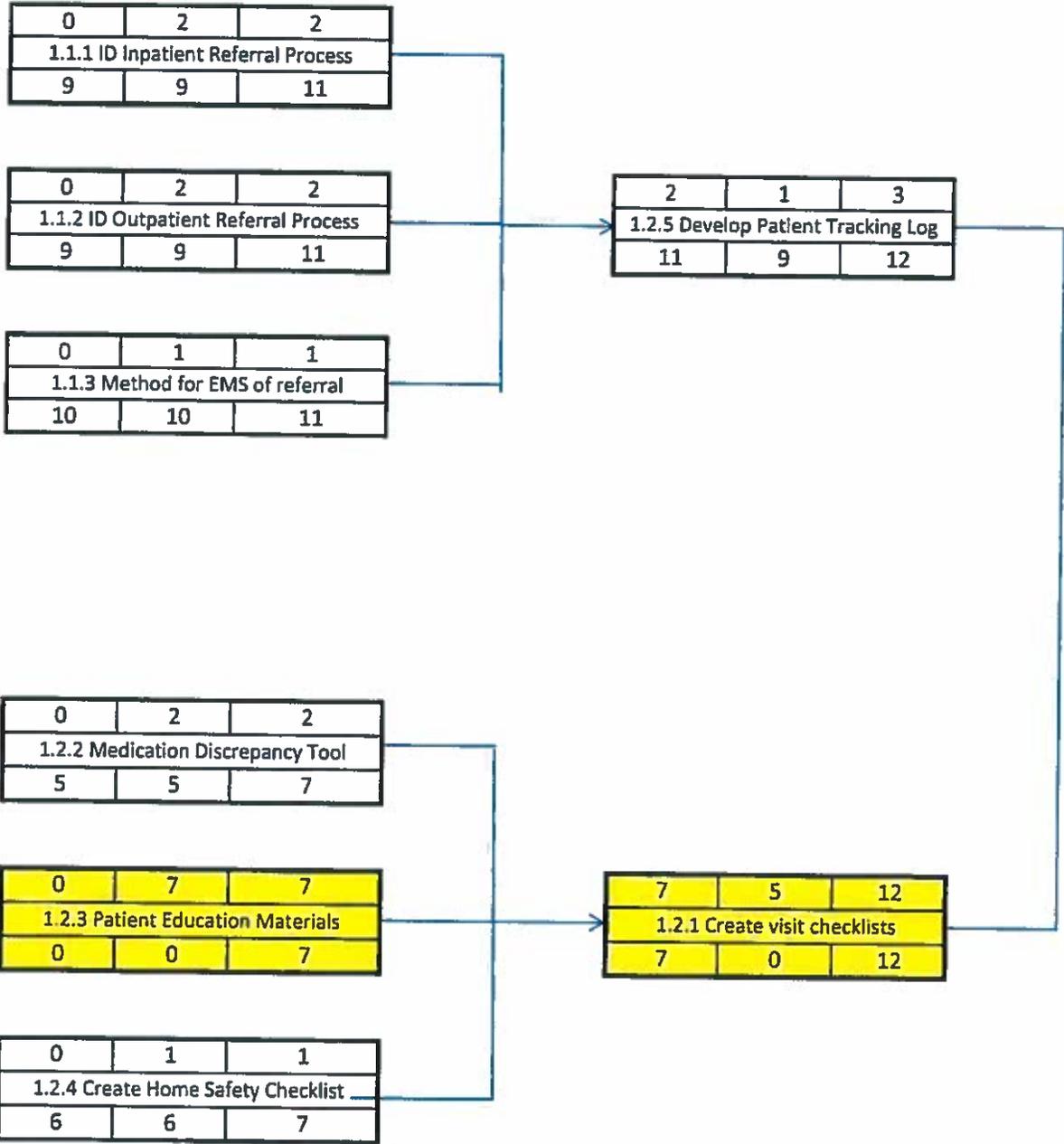
Project Name/ID: Community Paramedic Program

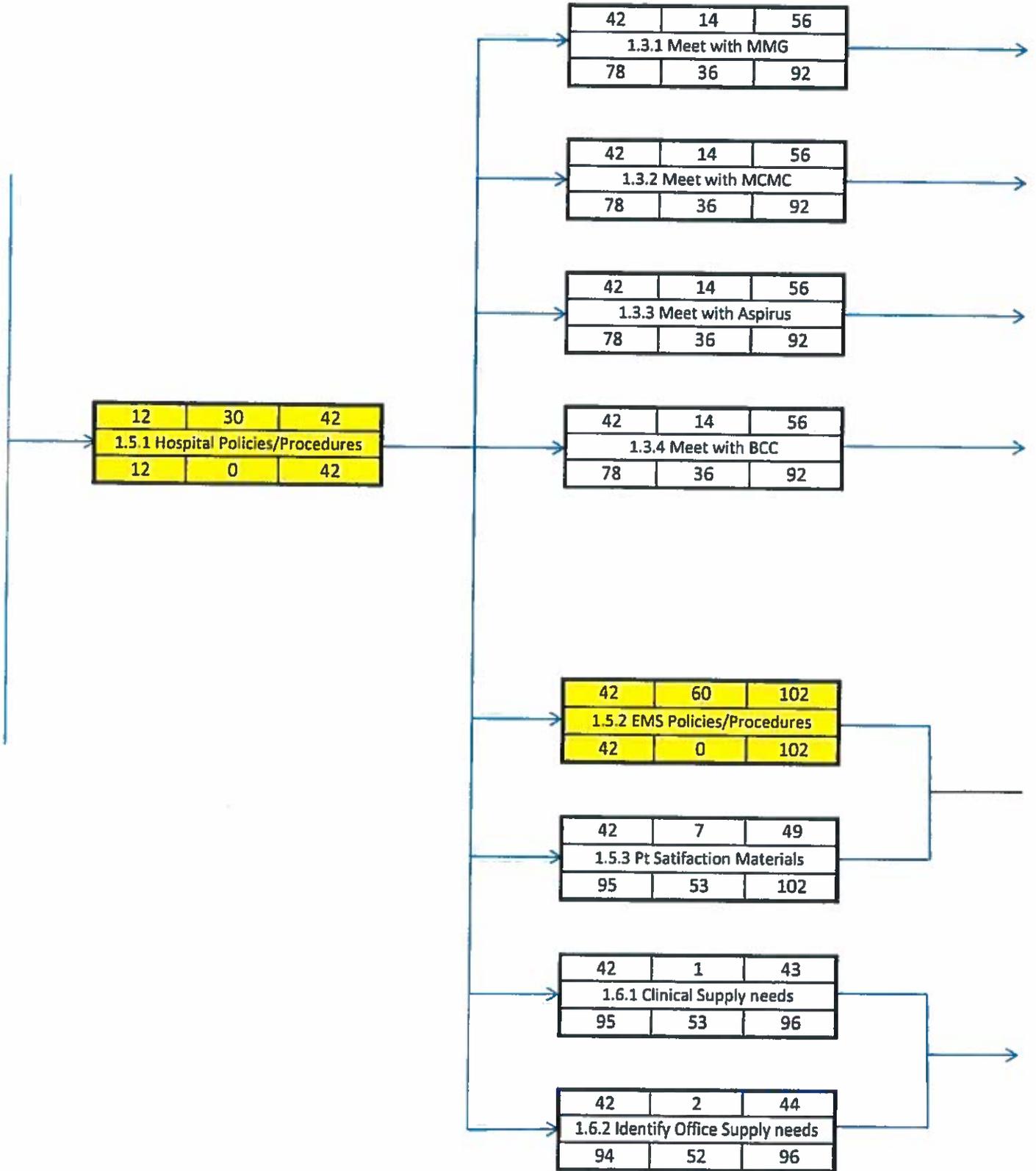
Document	Information
Date:	10/12/2016
Contact:	Kyle Carr
Project Manager:	Robyn Schertz

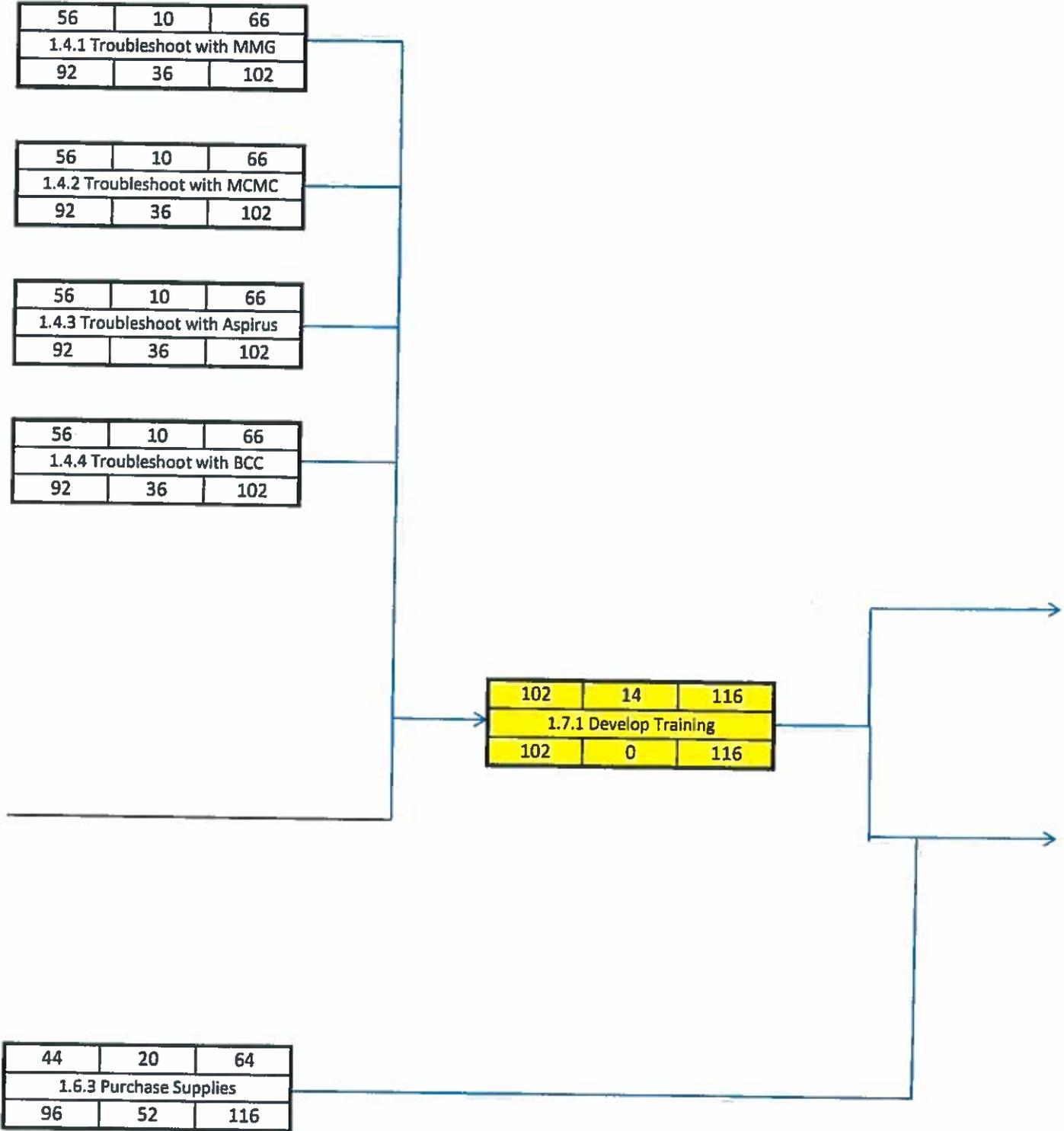
Measurable Objective: What will you measure? Numeric Objective Goes Here	Why will it be measured?	How will you measure it?	How frequently will the objective be measured?
All team members will stay on schedule for 100% of assigned tasks.	To ensure program moves forward on schedule.	Program manager will assign deadlines and monitor for completion	Weekly
All team members will communicate any delays or roadblocks to task completion with entire team within 48 hours.	To recognize and mitigate any delays that might be encountered by team	Program manager will ensure deadlines are met	Weekly
Feedback regarding effectiveness of protocols and visit documentation will be reviewed quarterly to ensure it meets provider needs	In order to provide benefit to patients, paramedics and primary care providers will need to collaborate in an effective manner.	Feedback will be solicited from paramedics and primary care providers	Quarterly
Reduce 30 day COPD readmission rate from 27.9% to less than or equal to goal of 11%	COPD accounts for the highest number of readmissions to GSHC. The CPP has the potential to have greatest impact in this category	30 day readmissions to GSHC will be monitored via hospital census	Monthly
Reduce/maintain 30 day CHF readmission rate to less than or equal to 11% (currently 4%)	There is an organization-wide focus on reducing CHF admissions. GSHC is meeting target, but the CPP will ensure we continue to meet our goals	30 day readmissions to GSHC will be monitored via hospital census	Monthly
Track visits in which a need for	This will measure our purpose for the visit: to catch the need	Information will be gathered	Measured with every visit,

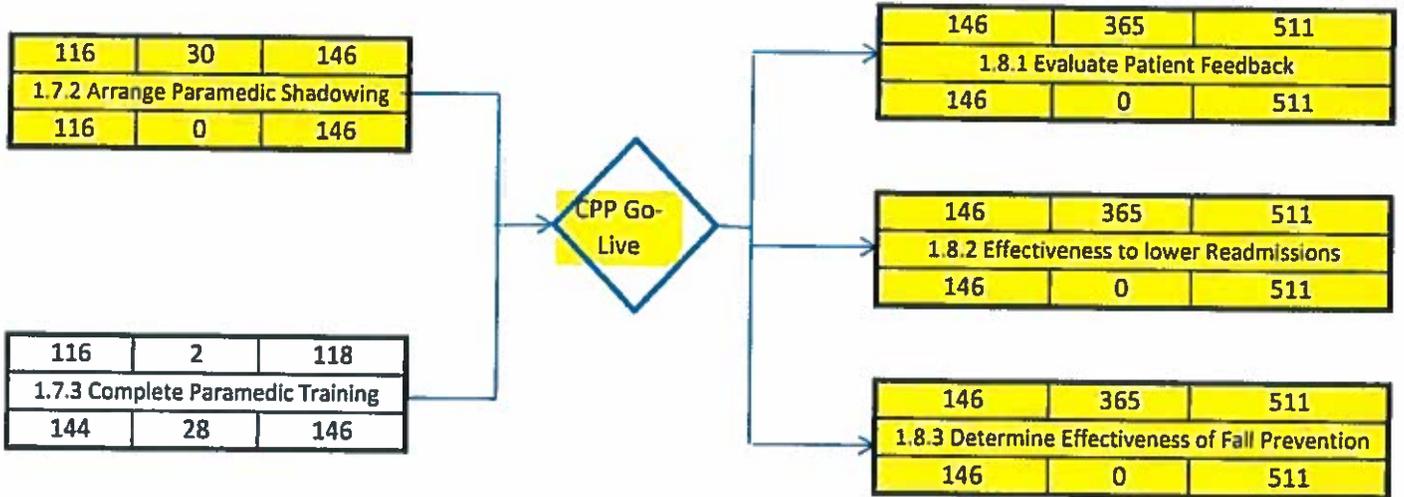
expedited follow up is needed sooner than scheduled primary care visit.	for intervention prior to an adverse event.	from CPP visit logs	aggregate data monthly
If need for follow up is identified by paramedic, what percent of patients are seen by PCP within 72 hours (goal 90%)	This measure will help determine if the CPP is successful in creating an alternate outcome (urgent PCP visit) when there is a need for intervention	Information will be gathered from CPP visit logs	Measured with every visit, aggregate data monthly
Patient Satisfaction with Community Paramedic Program (patient found visit helpful, patient would recommend service to others) is at a minimum 75% positive with goal of 90% positive	Patient satisfaction surveys will help us understand patient perceptions about the usefulness of the community paramedic program	Patient satisfaction surveys will be provided for each visit. If no survey is received, GSHC will follow up with phone survey	Measured with every visit, aggregate data monthly

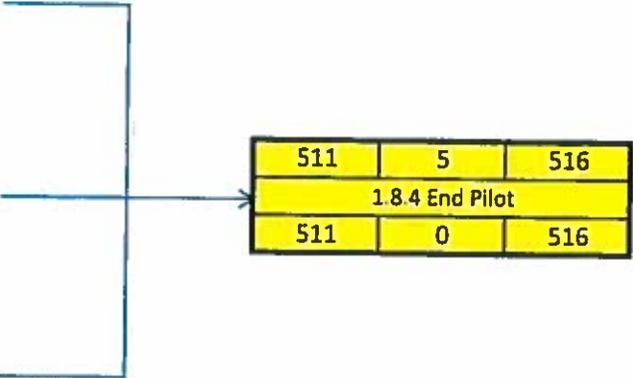
COMMUNITY PARAMEDIC PROGRAM NETWORK DIAGRAM













CITY OF MERRILL

1004 EAST FIRST STREET
MERRILL, WI 54452-2586

AN ORDINANCE: By Health and Safety Committee
Re: Amending Chapter 8, Article XII, Section 8-330
to add Mobile Food Vendors

ORDINANCE NO. 2017-
Introduced: _____
1st Reading: _____
2nd Reading: _____
3rd Reading: _____
Committee/Commission Action: _____

AN ORDINANCE

The Common Council of the City of Merrill, Wisconsin, does ordain as follows:

Section 1. Chapter 8, Article XII, Section 8-330 of the Code of Ordinances for the City of Merrill is created to add the following:

Sec. 8-330 Definitions.

The following words, terms and phrases, when used in this article, shall have the meanings ascribed to them in this section, except where the context clearly indicates a different meaning:

Mobile Food Vehicle – a commercially manufactured, self-contained, mobile food unit including trucks, carts and trailers, in which food is prepared or processed and from which food is sold or dispensed to the ultimate consumer.

Mobile Food Vehicle Vendor – the owner of a mobile food vehicle or pushcart; hereafter referred to as “vendor”.

Pushcart – a non-self-propelled wheeled cart, specifically designed and used for keeping, storing, or warming food or beverage for sale by a mobile food vehicle vendor, which may be moved by one person without the assistance of a motor.

Sec. 8-331 License Required

- a. It shall be unlawful for any person to do any of the following within a public right-of-way or on public property in the City of Merrill without first having obtained a State of Wisconsin Mobile Restaurant/Mobile Service Base Permit and a valid food vending license as prescribed in this article:
 - (1) Operate a mobile food vehicle or pushcart;
 - (2) Serve, sell, or distribute food from a mobile food vehicle or pushcart;
 - (3) Cook, wrap, package, or portion food in a mobile food vehicle or pushcart for service, sale, or distribution.

- b. No person shall park, stop, or operate a mobile food vehicle or pushcart, on or within a public right-of-way or on public property in the City of Merrill, without the appropriate permits/licenses, nor shall any mobile food vehicle vendor permit any person to park, stop or operate a mobile food vehicle or pushcart in a location adjacent to or within a ~~one hundred~~ two hundred, fifty foot radius of the nearest edge of any building or section of a building comprising a licensed food establishment, excluding any patio, awning, or temporary enclosure attached thereto, the kitchen of which is open for serving food to patrons. This requirement may be waived if the most recent application for a mobile food vending license was submitted together with the written consent of the proprietor of the adjacent licensed food establishment.
- c. All vendors will abide by all parking and traffic laws, ordinances, statutes, rules, and regulations at all times, except that a mobile food vehicle that is of such a length that it occupies all or a portion of two marked parking spaces may park in such spaces so long as it abides by all other parking restrictions, including required payments in both parking meters, when applicable.
- d. Mobile food vehicles are not permitted on public sidewalks.
- e. Vendors are not allowed in City parking lots or on public property, except as part of an approved special event or upon approval by the **Health and Safety Committee.** Vendors are **not** allowed in City parks except where prior approval has been granted by the Parks and Recreation Commission.
- f. The City shall not regulate Vendors in private parking lots so long as the property owner has granted permission and all required health licenses are valid. However, the host parking lot must remain in compliance with the zoning ordinance including off-street parking requirements for the host lot, and the mobile food vehicle or cart shall not block required drive aisles.
- g. In residential areas (such as areas not adjacent to City parks), vendors are not permitted to park and stay in one location; vendors must keep moving and make only short stops to sell products, except as part of an approved special event or upon approval by the **Health and Safety Committee.**
- h. A person with a valid driver's license of such a classification to allow the operation of the mobile food vehicle shall be with the vehicle at all times that any activity is taking place in the mobile food vehicle. The vendor is liable for any violations or this subsection.
- i. No person will park, stop, or operate a mobile food vehicle, nor will any mobile food vehicle vendor permit any person to park, stop or operate a mobile food vehicle in a location within 500 feet of the boundary line of any property upon which a fair, farmer's market, festival, carnival, circus, special event, or civic event licensed or sanctioned by the City is occurring, except when the vendor has obtained a permit or otherwise properly obtained permission to do so.
- j. Appropriate permits or other properly obtained permission must be obtained to park, stop, or operate a mobile food vehicle or push cart in a location within 500 feet of the boundary line of any property upon which a fair, farmer's market, festival, carnival, circus, special event, or civic event licensed or sanctioned by the City is occurring.
- k. All mobile food vehicle vendors are prohibited from connecting to light poles, utility poles, or any public source of electricity, water or sewer, or to any planter or tree or other public amenity.
- l. All signage must be permanently affixed to the mobile food vehicle or pushcart. No accessory signage will be placed outside or around the mobile food vehicle or pushcart.
- m. Mobile food vehicle or pushcart vending hours on public right-of-way are from **8:00 a.m. to 10:00 p.m. (Sunday through Thursday) and from 8:00 a.m. to 11:00 p.m. (Friday and Saturday).** Mobile food vehicle must be closed, the area cleaned and the mobile

food vehicle removed by the time specified. Mobile food vehicle vending hours are not restricted on private property locations.

- n. Nothing in this article shall be deemed to supersede or repeal any ordinance, National Fire Protection Association Codes and Standards, or administrative regulation relating to noise, park closing hours, or parking, except as specifically provided in the article. Vendors will take every precaution to ensure that their operations do not materially affect the peace and welfare of the general public nor cause any unreasonably loud, disturbing and unnecessary noise or any noise of such character, intensity or duration as to be detrimental to the life or health of any individual of which is in the disturbance of public peace and welfare.

Sec. 8-332 License Application; Regulation

- a. Any person desiring to operate a mobile food vehicle or pushcart will make written application for a mobile food vending licenses to the City Clerk's office. The application for such license shall be on forms provided by the City Clerk's office and will include all of the following:
- (1) The name, signature, and address of each applicant and of each member or officer of a corporate applicant.
 - (2) A description, including make, model, VIN number, and licenses plate, of the mobile food vehicle.
 - (3) A valid copy of all necessary licenses, permits or certificates required by the County of Lincoln, the State of Wisconsin, or any subsidiary enforcement agencies or departments thereof, including but not limited to valid proof of registration for the vehicle and driver's licenses for all operators and documentation of the necessary approvals from the Lincoln County Health Department for operation as a mobile food vendor.
 - (3)(4) A copy of general liability insurance with a \$1,000,000 limit, with the City of Merrill listed as additional insured.
 - (4)(5) Any additional information deemed necessary by the City Clerk to determine if issuance of a mobile food vending license to a particular applicant would be in the best interest of the public.
- b. Upon receipt of an application for a mobile food vending license, the clerk may conduct a background check and may refer to the Chief of Police or his or her designee who may make and complete an investigation of the statements made in such registration. Any such investigation will be completed as soon as practicable. The City Clerk may refuse to register the applicant if any of the following is determined:
- (1) The application contains any material omission or materially inaccurate statements.
 - (2) The applicant was convicted of a crime, statutory violation or ordinance violation within the last five (5) years, the nature of which is directly related the applicant fitness to engage in direct selling; or
 - (3) The applicant failed to comply with any requirement of §8-302(a)(4).
- c. Each mobile food vending license will expire on March 31st of each year.
- d. A mobile food vending license is not transferable from person to person
- e. A mobile food vending license is only valid for one vehicle only and is not transferable
- f. The mobile food vending license will be permanently and prominently affixed to the mobile food vehicle.
- g. Licenses, late fee and renewal fees shall be paid in accordance with the fee schedule as established by the Common Council, from time to time, and as indicated on the schedule of licenses and fees appearing in Chapter 16 of this Code.

Sec. 8-333 Suspension and Revocation

A mobile food vending licenses may be suspended or revoked by the City Clerk, ~~or~~ the Chief of Police, or the Fire Chief, if the license holder made any material omission or materially inaccurate statements in the license application, or if the license holder violates any provisions of this article, if there are noise complaints related to the mobile food vehicle or the operation thereof, or if the license holder is convicted of any crime or ordinance or statutory violation directly related to the licensed activity. Notice of suspension or revocation will be personally served on the applicant and will include a statement of the act(s) upon which the denial is based. Appeals are available as set out in §8-302(h).

Sec. 8-334 Violations and Penalties.

- a. Any person violating any provisions of this article shall be subject to the forfeitures and penalties contained in §2-19 of this Code. Each day of violation shall constitute a separate offense.
- b. The Police Department, Fire Department, and the Department of Public Works shall have concurrent authority to remove or cause the removal of any vending equipment or merchandise found on the street, sidewalk, terrace or other vending location in violation of any regulations established pursuant hereto. In addition to any forfeiture, the violator shall be liable for any removal, towing and storage charges incurred by either department.

Section 2 Severability. In the event any section, subsection, clause, phrase or portion of this ordinance is for any reason held illegal, invalid or unconstitutional by any court of competent jurisdiction, such portion shall be deemed a separate, distinct and independent provision, and such holding shall not affect the validity of the remainder of this ordinance. It is the legislative intent of the Common Council that this ordinance would have been adopted if such illegal provision had not been included or any illegal application had not been made.

Section 3 Repeal and Effective Date. All ordinances or parts of ordinances and resolutions in conflict herewith are hereby repealed. This ordinance shall take effect from and after its passage and publication.

Approved:

Moved by: _____

Adopted: _____

Approved: _____

Published: _____

William R. Bialecki,
Mayor

Attest:

William N. Heideman, City Clerk

<<ENTER YR>><<ENTER MONTH>><<ENTER AGENDA NO.>>

CITY OF MERRILL
1004 EAST FIRST STREET
MERRILL, WI 54452-2586

AN ORDINANCE: By Health & Safety Committee
Re: Amending Chapter 16, Section 1 to add
licensing fees for Mobile Food Vendors

ORDINANCE NO. 2017-
Introduced: _____
1st Reading: _____
2nd Reading: _____
3rd Reading: _____
Committee/Commission Action: _____

AN ORDINANCE

The Common Council of the City of Merrill, Wisconsin, does ordain as follows:

Section 1. Chapter 16, Section 1 of the Code of Ordinances for the City of Merrill is amended as follows:

<u>CHAPTER 8</u> BUSINESS LICENSING AND REGULATIONS		
8-19(b)(2)	Cigarette and tobacco products retailer license application fee	\$100.00
8-47(c)(1)	Transient merchant registration application fee	\$50.00
8-112(b)(2)	Application fee for application to operate public vehicles, taxicabs or automobiles for hire upon city streets	\$15.00 per vehicle
8-112(c)	License fee for operation of public vehicles, taxicabs or automobiles for hire upon city streets for one cab licensed	\$35.00
	For each additional cab licensed	\$10.00
8-117	Taxicab driver's license annual fee	\$15.00
8-138(a)	Permit to operate amusement arcade—application fee	\$25.00
8-183	License for cleaning, dyeing or pressing of garments and items of all kinds—annual fee	\$20.00
8-210(a)	Sexually oriented business license application and investigation fee	\$100.00

8-210(b)	Sexually oriented business license fee	\$150.00
8-210(c)	Sexually oriented business employee application, investigation and license fee	\$50.00
8-284	Investigation fee per individual	\$20.00
8-286(g)(4)	Failure to report daily penalty (per day)	\$10.00
8-291	Annual license regulated per Wis. Stats. § 134.71(11)(a)	\$210.00
8-291(b)	Pawn tracking system	\$2.00
8-302(g)	<u>Mobile food vehicle or pushcart license fee</u>	<u>\$200.00</u>

Section 2. Severability. In the event any section, subsection, clause, phrase or portion of this ordinance is for any reason held illegal, invalid or unconstitutional by any court of competent jurisdiction, such portion shall be deemed a separate, distinct and independent provision, and such holding shall not affect the validity of the remainder of this ordinance. It is the legislative intent of the Common Council that this ordinance would have been adopted if such illegal provision had not been included or any illegal application had not been made.

Section 3. Repeal and Effective Date. All ordinances or parts of ordinances and resolutions in conflict herewith are hereby repealed. This ordinance shall take effect from and after its passage and publication.

Moved by: _____
 Adopted: _____
 Approved: _____
 Published: _____

Approved:

 William R. Bialecki,
 Mayor

Attest:

 William N. Heideman, City Clerk

v

CITY OF MERRILL

1004 EAST FIRST STREET
MERRILL, WI 54452-2586

AN ORDINANCE: By Park and Recreation
Commission
Re: Amending Chapter 28, Article I, Section 28-1(c)(25) Commercial Enterprise Approval

ORDINANCE NO. 2017-
Introduced: _____
1st Reading: _____
2nd Reading: _____
3rd Reading: _____
Committee/Commission Action: _____

AN ORDINANCE

The Common Council of the City of Merrill, Wisconsin, does ordain as follows:

Section 1. Chapter 28, Article I, Section 28-1(c)(25) of the Code of Ordinances for the City of Merrill is amended as follows:

Commercial enterprise.

No person shall sell, or offer for sale, any article, thing, privilege or service in any park without prior written permission from the parks and recreation commission

Mobile food vehicle(s) or pushcart(s) shall not operate in any park, unless the appropriate licensing and/or agreements are in place.

Section 2. Severability. In the event any section, subsection, clause, phrase or portion of this ordinance is for any reason held illegal, invalid or unconstitutional by any court of competent jurisdiction, such portion shall be deemed a separate, distinct and independent provision, and such holding shall not affect the validity of the remainder of this ordinance. It is the legislative intent of the Common Council that this ordinance would have been adopted if such illegal provision had not been included or any illegal application had not been made.

Section 3. Repeal and Effective Date. All ordinances or parts of ordinances and resolutions in conflict herewith are hereby repealed. This ordinance shall take effect from and after its passage and publication.

Approved:

Moved by: _____

William R. Bialecki, Mayor

Adopted: _____

Attest:

Approved: _____

Published: _____

William N. Heideman, City Clerk



Fee: \$200.00
 Annual License Period
 License Expires: (Month day), 20__

MOBILE FOOD VENDOR PERMIT APPLICATION

Section 1: Business Information									
Business Name									
Business Address									
City		State			Zip				
Business Phone									
Business Type		(Check one)	Individual	Partnership	Corporation				
WI Seller's Permit No.									
<i>Please Note: A Wisconsin Seller's Permit Number is required to process application.</i>									
Section 2: Applicant Information									
Name		First	Middle Initial	Last					
Home Address									
City		State			Zip				
Phone									
Date of Birth									
Section 3: Insurance Information									
Liability Insurance Carrier									
Policy #		(Not Less Than \$1,000,000 In Coverage)							
<i>Please Note: The City of Merrill must be named as an Additional Insured & a copy of the Certificate of Liability Insurance must be submitted to the Clerk's Office with the Mobile Food Vendor Permit Application.</i>									
Section 4: Type of Mobile Vending Unit Information									
Item(s) to be sold									
Type of Direct Sales		(Check one)	Cart	Stand	Trailer				
Description of Cart, Stand, Trailer									
<i>Please Note: Attach a photo of Mobile Vending Unit</i>									
List License Plate No. & Registration Information of any vehicle to be used:									
Location(s) Where Selling		(Check All That Apply)	Sidewalk	Right-of-way	Private Property				
List Specified Location(s) Where Selling: Street Address, Days of Week at Location(s), Times For Each Location(s)									
1)									
2)									
3)									
4)									
5)									

READ CAREFULLY BEFORE SIGNING

I declare, under penalty of perjury, that the statements in this application, and all attachments to and documents submitted with this application, are true, correct and complete to the best of my knowledge. I understand and acknowledge that any information contained herein or submitted as a part of this application that is found to be false or misleading may result in this application being denied, or any license granted pursuant to this application, suspended or revoked, in addition to possible filing of applicable criminal charges. I also acknowledge that it is my responsibility to become familiar, and comply, with the provisions of Chapter 356: Food and Food Handling Establishments, Article II: Mobile Food Vendors of the City of Merrill.

Signature of Applicant:	Date:
-------------------------	-------

Application Attachments:

- Site plan if location is on private property showing the location of all existing and proposed structures, access, equipment and parking.
- Authorization to Utilize Property.
- Photo of Mobile Vending Unit (Truck, Cart, Trailer, etc.)
- Certificate of Liability Insurance: City of Merrill named as additional insured and certificate holder and not less than \$1,000,000 in Coverage.
- Wisconsin Seller's Permit.

Applications should be submitted to:

City of Merrill
City Clerk's Office
1004 E. First Street
Merrill, WI 54452
Phone: 715-536-5595

Office Use Only

Date Received:		Control #:	
Receipt #			
Date Processed:		License #	
Date of City Council Action:		City Council Action:	<input type="checkbox"/> Approved <input type="checkbox"/> Denied

CITY OF MERRILL

Memorandum

Date: _____
To: Chief of Police Attn: Records Division
From: City Clerk
Subject: **Mobile Food Vendor Permit Application**

The attached application was filed with this office within the preceding forty-eight hours. It is respectfully requested that your recommendation on the granting and issuance of a license be provided to this office.

CITY OF MERRILL

Memorandum

Date: _____ To: City Clerk
From: Chief of Police
Subject: **Mobile Food Vendor Permit Application**

I hereby recommend that the application be:

Granted a
license _____ Denied a license ____

Comments:

CITY OF MERRILL

Memorandum

Date: _____

To: Fire Chief

From: City Clerk

Subject: **Mobile Food Vendor Permit Application**

The attached application was filed with this office within the preceding forty-eight hours. It is respectfully requested that your recommendation on the granting and issuance of a license be provided to this office.

CITY OF MERRILL

Memorandum

Date: _____ To: City Clerk

From: Fire Chief

Subject: **Mobile Food Vendor Permit Application**

I hereby recommend that the application be:

Granted a

license _____ Denied a license ____

Comments:

Operations

Month	EMS Incidents	EMS Incidents Motor Vehicle Crash	Structure Fire	Other Fires	Other Hazards & Service Calls	Mutual Aid	Total Incidents for Month
January	131	2	0	0	17	0	150
February	140	3	0	5	14	1	163
March							
April							
May							
June							
July							
August							
September							
October							
November							
December							
Year to Date Total	271	5	0	5	31	1	313

EMS

Month	Total EMS Patients	Transfers	Stand-by	Stand By Tomahawk	Expenses	Total Billing
January	139	8	3	0	\$101,727.38	\$95,042.50
February	154	15	1	0	\$75,285.64	\$111,542.40
March						
April						
May						
June						
July						
August						
September						
October						
November						
December						
Total YTD	293	23	4	0	\$177,013.02	\$206,584.90

Attachment: Monthly Report - Fire (2308 : Fire Chief Savone)

Training

	Number of trainings offered	86	
	Number of Staff attending	291	
	Number of Staff Hours	429	

During the month training topics included: E-Scheduling Program Training, Tablet training and review, Incident priorities, Water Fill Site training, Fire Nozzle demonstration,

Fire Prevention Bureau

	Total Inspections	140	
	Number of Violations	92	
	Number of Corrected Violations	53	
	Number of Staff Hours this month	81.03 hours	

Public Education & Community Activities

	Blood Pressure Screening for residents of Park Place
	Blood Pressure Screening for residents of Jenny Towers
	Heartsaver CPR/First Aid and Bloodborne Pathogens class for 12 people from Weinbrenner Shoe Company
	Heartsaver CPR/First Aid and Bloodborne Pathogens class for 13 people from Weinbrenner Shoe Company
	Heartcode BLS for Healthcare Provider Skills test for 1 person from Lincoln County Health Department
	Heartcode BLS for Healthcare Providers CPR class for 11 people from Pine Crest Nursing Home

Attachment: Monthly Report - Fire (2308 : Fire Chief Savone)



**MERRILL
WISCONSIN**
City Of Parks

CITY OF MERRILL

Police Department

Chief Kenneth J. Neff
 Captain Corey A. Bennett
 1004 East First Street • Merrill, Wisconsin • 54452-2586
 Phone (715) 536-8311 • FAX (715) 536-5930

February 2017

	Last Month	This Month	Last Year
Complaints received	566	539	530
Traffic crashes	23	26	14
Juvenile non-traffic arrests	38	41	15
Traffic Citations (adult & juv.)	84	68	104
Adult non-traffic arrests	114	76	88

CVR Transactions

New applications	9	25	34
New application city revenue	\$117.00	\$325.00	\$442.00
Renewals	16	21	25
Renewal city revenue	\$104.00	\$136.50	\$162.50
CVR Revenue YTD		2017 \$682.50	2016 \$1,007.50

“Serving Merrill with Pride”

An equal opportunity/affirmative action employer.

SPECIAL ASSIGNMENTS AND ACTIVITIES

February 1, **Chief Neff** retirement party gathering

February 6, **Captain Bennett, Lt. Bacher, Lt. Hartwig, Lt. Seubert, Lt. Drabek, and Investigator Wunsch** attended Command Staff meeting

February 13, **Officer Tesch** attended Parent Support Network meeting

February 13, **Captain Bennett and Lt. Hartwig** attended WI Police Leadership Foundation Conference

February 14, **Captain Bennett** attended Council meeting

February 16, WPS - EAP updates for Dam sites

February 21, **Captain Bennett** attended Traffic Safety committee meeting

February 23, **Captain Bennett** attended Police and Fire Commission meeting

February 25, **Captain Bennett, Lt. Bacher, Lt. Hartwig, SRO Heckendorf, Administrative Assist. Brahos, Officer Tesch, Officer Soberg, and Officer Lange** assisted in conducting the Police Officer Applicant Physical Test at MHS

February 27, **Captain Bennett** spoke on Community Scan radio broadcast

February 27, **Captain Bennett** attended Health and Safety meeting

February 27, **Lt. Hartwig** attended ESG

February 28, **Investigator Wunsch and SRO Heckendorf** conducted Cyber Bullying and Cyber Security presentation at TB Scott Library

Corey A. Bennett
Chief of Police

Department Activity Report

First Date: 02/01/2017

Jurisdiction: LINCOLN911

Last Date: 02/28/2017

Department	Complaint Type	Description	All Units	Primary Unit
MRPD	911 HANGUP	911 HANGUP	1	1
	911 NUISANCE	911 NUISANCE CALL	8	3
	AGENCY/ASS	AGENCY ASSISTANCE	18	11
	ALARM	ALARM (BANK, FIRE, COMMERCIAL, RESIDENTIAL)	18	6
	AMBULANCE	AMBULANCE NEEDED	38	0
	AMBULNCFE	AMBULANCE TRANSFER	2	0
	ANIMAL COMF	ANIMAL COMPLAINT (BARKING DOG, NEGLECT, E	17	12
	ATT LOCATE	ATTEMPT TO LOCATE	5	2
	ATT BURGLAF	ATTEMPTED BURGLARY	3	2
	ATV/SNOW CC	ATV/SNOWMOBILE COMPLAINT	3	2
	BATTERY	BATTERY (intentional and unlawful touching or strikin	2	0
	CHILD ABUSE	CHILD ABUSE/NEGLECT	8	4
	CHLD CUS	INTERFERE W/CHILD CUSTODY	4	4
	CRASH/INJUR	CRASH WITH INJURY	5	0
	CRASH/PDO	CRASH PROPERTY DAMAGE ONLY	40	26
	CTZN/ASSIST	CITIZEN ASSISTANCE	3	2
	CVL	CIVIL	12	8
	DEBRIS SPILL	DEBRIS/SPILL ON ROADWAY	1	0
	DIS CONDUCT	DISORDERLY CONDUCT	65	24
	DOMESTIC	DOMESTIC	23	7
	DRUG ACTIVIT	DRUG ACTIVITY (POSSESSION, USE, PARAPHERI	17	11
	DRV COMP	DRIVING COMPLAINT (RECKLESS, ROAD RAGE, E	14	8
	ESCORT	ESCORT/CONVOY	10	5
	FALSE ALARM	FALSE ALARM (BANK, FIRE, COMMERCIAL, RESID	1	0
	FIRE MISC	FIRE MISCELLANEOUS	4	0
	FORGERY/FR	FORGERY/FRAUD	9	8
	FOUND ITM/AI	FOUND ITEM/ANIMAL	13	10
	GARBAGE DU	ILLEGAL DUMPING OF TRASH OR DEBRIS	2	2
	GAS SKIP	GAS SKIP	1	1
	HARASS CALL	HARASSING PHONE CALLS	3	3
	HARASSMENT	HARASSMENT	7	6
	HAZ SITUATIC	HAZARDOUS SITUATION	2	2
	HIT & RUN	HIT & RUN / F.PI.PD	10	7
	HOUSEWATCH	HOUSEWATCH	1	1
	IMP/ILL PARK	IMPROPERLY/ILLEGALLY PARKED VEHICLE	14	9
	INFO COMPL	INFORMATIONAL COMPLAINT	8	7
	INTOX DRIVF	INTOXICATED DRIVER	5	3
	LOCKOUT	VEHICLE LOCKOUT	30	29
	LOITERING	LOITERING	3	1
	LOST ITEM/AN	LOST ITEM/ANIMAL	6	5
	MENTAL SUB	MENTAL SUBJECT	13	5
	MESS DEL	MESSAGE FOR LOCAL DELIVERY	3	2
	MISSING PER	MISSING PERSON	4	2
	MOTORIST AS	MOTORIST ASSIST	10	5
	NEIGH COMP	NEIGHBOR COMPLAINT	3	2
	NOISE COMP	NOISE COMPLAINT	10	5
	ODOR INVEST	ODOR INVESTIGATION	5	2
	OPEN DR/WIN	OPEN DOOR/WINDOW FOUND	10	3

Department Activity Report

First Date: 02/01/2017

Jurisdiction: LINCOLN911

Last Date: 02/28/2017

<i>Department</i>	<i>Complaint</i>	<i>All Units</i>	<i>Primary Unit</i>
<i>Type</i>	<i>Description</i>		
MRPD			
PED ROADWA	PEDESTRIAN ROADWAY	2	1
PROB VIO	PROBATION VIOLATION	29	14
PROP DAM	PROPERTY DAMAGE	5	3
RCKLS CN/DR	RECKLESS CONDUCT/DRIVING	6	5
RUNAWAY	RUNAWAY	5	2
SEX ASSLT J	SEXUAL ASSAULT JUVENILE	1	0
SHOPLIFTING	SHOPLIFTING	12	6
SHOTS FIRED	SHOTS FIRED	1	1
SMOKE REPO	SMOKE REPORT	6	3
SPECIAL DUT	SPECIAL DUTY REPORT IN PERSON	1	1
STAND BY	STAND-BY	15	8
STOLEN VEH	STOLEN VEHICLE	8	2
STOP ARM VIK	STOP ARM VIOLATION	1	1
SUICIDE	SUICIDE	4	1
SUICIDE ATT	SUICIDE ATTEMPT	7	1
SUICIDE THR1	SUICIDE THREAT	15	2
SUSP ACTVTY	SUSPICIOUS ACTIVITY	25	12
SUSP PERSON	SUSPICIOUS PERSON	12	5
SUSP VEH	SUSPICIOUS VEHICLE	13	5
THEFT	THEFT	20	16
THREAT	THREATS	5	3
TOBACCO VIC	TOBACCO VIOLATION	1	1
TRAFF LIGHT	TRAFFIC LIGHT OUT	2	1
TRAFFIC STOI	TRAFFIC STOP	186	135
TRESPASSINC	TRESPASSING	2	1
TRUANCY	TRUANCY	18	18
VANDALISM	VANDALISM	2	2
VEH IN DITCH	VEHICLE IN DITCH	6	3
VIO CRT ORD	VIOLATION OF COURT ORDER	2	2
WANTED PER	CHECK RECORD FOR WANTS	15	4
WEATHER	WEATHER AND ROAD REPORT	2	1
WELFARE CK	WELFARE CHECK	36	21
<i>Department:</i>		959	539
<i>Overall:</i>		959	540

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02/06/17
Accrual Basis

Lincoln County Humane Society
Balance Sheet
As of January 31, 2017

	Jan 31, 17
ASSETS	
Current Assets	
Checking/Savings	
Expense Checking Account	86,874.80
PayPal Checking (RVB)	961.06
Buddy & Tar Savings	442.61
Associated Bank	1,981.92
RVSB - Building Fund	65,162.37
PayPal	2,232.42
Total Checking/Savings	157,655.18
Other Current Assets	
CD #700344021	10,000.00
CD #700366339	2,050.00
Total Other Current Assets	12,050.00
Total Current Assets	169,705.18
Fixed Assets	
Accumulated Depreciation	-12,755.19
Equipment	26,498.52
Total Fixed Assets	13,743.33
TOTAL ASSETS	183,448.51
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Sales Tax Payables	142.22
Total Accounts Payable	142.22
Other Current Liabilities	
Spay/Neuter Deposits	620.80
Payroll Liabilities	
Payroll Tax Liabilities	2,585.17
Total Payroll Liabilities	2,585.17
Total Other Current Liabilities	3,205.97
Total Current Liabilities	3,348.19
Total Liabilities	3,348.19
Equity	
Fund Balance	185,410.90
Net Income	-5,310.58
Total Equity	180,100.32
TOTAL LIABILITIES & EQUITY	183,448.51

Minutes from the LCHS Board meeting held on Jan 17, 2017

Attendance:

President:	Pat Hoerstmann	Vice President:	
Shelter Manager:	Liz Friedenfels	Treasurer:	Kari Kercher
Secretary:	Mary Moscherosch	County Board Rep:	
City Council Rep:	Kandy Peterson	WTA Rep:	
Board members:	Trina DeLasky, Sally Thayer, Lynn Mai		
Public:	Darla Sann, Jo Hoerstmann		

The meeting was called to order by President Pat Hoerstmann.

A motion to approve the minutes from the December 7th meeting was made by Kandy and 2nd by Trina. Voted on and approved.

Presidents Report: The new lighted sign out in front of the building on Memorial Drive is installed and looks very nice. Pat Hall who did the drywall work will be coming in to fix some drywall cracks. Willie informed Pat the Shelter won the National Frame Builders Association of the Year award. There will be some kind of a write up in our local paper and recognition on their web page.

Vice President Report:

Treasurers Report: Kari and Pat went over the financial report. A motion to approve was made by Trina and 2nd by Kandy. Voted on and approved.

Shelter Manager Report: The Give a Dog fund raising campaign raised \$3100.00. Dr. Griffin’s rabies clinic at the shelter was very successful. Johanna is preparing for the February “Love a Paw” Campaign.

A motion to adjourn was made by Trina and 2nd by Sally

Upcoming board meeting dates: Annual Feb. meeting tentatively set for Tuesday Feb. 21st. Liz will let us know if there is a change.

**Lincoln County Humane Society
Animal Statistics 2016**

INCOMING	Jan.	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Strays													
Cats	15												
Dogs	11												
Other	0												
Surrendors													
Cats	14												
Dogs	7												
Other	1												
Transfer													
Cats	3												
Dogs	7												
Other	0												
Born at Shelter / Foster													
Kittens	0												
Puppies	0												
Total Incoming													

OUTGOING	Jan.	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Redeems													
Cats	1												
Dogs	8												
Other	0												
Adoptions													
Cats	47												
Dogs	10												
Other	0												
Euthanasia													
Cats	0												
Dogs	2												
Other	0												
Rescue													
Cats	3												
Dogs	1												
Other	1												
Natural Death													
Cats	0												
Dogs	0												
Other	0												
Total Outgoing													

Currently at Shelter													AVG
Cats	25												
Dogs	7												
Other	0												
Total													

Currently in Foster Care													AVG
Cats	1												
Dogs	1												
Other	0												
Total													

Adoption Partners													
Petsmart Cat Adoptions	20												

The Fix Is In													Total
Public Cats	43												
Public Dogs	12												
LCHS Cats	4												
LCHS Dogs	7												

12:03 PM

02/06/17

Cash Basis

Lincoln County Humane Society
Profit & Loss Expense Detail
 January 2017

Type	Date	Num	Name	Memo	Paid Amount
Ordinary Income/Expense					
Expense					
EXPENSES					
Animal Related Expenses					
Food					
Bill	01/02/2017	11/14/16 - 1...	Wal-Mart Community	Yogurt, Vegetables ...	165.33
Bill	01/24/2017	2/11/17	Wal-Mart Community	Food	33.16
Bill	01/24/2017	2/11/17	Wal-Mart Community	Food	11.78
Check	01/26/2017	Debit	Petsmart #1415	Crickets, Worms, E...	33.21
Check	01/30/2017	Debit	County Market	Yogurt	33.93
Total Food					277.41
Medical - Surgeries/ Exams/Euth					
Bill	01/06/2017	424	Merrill Veterinary Clinic	12/29/16	245.97
Bill	01/06/2017	69807	Wisconsin Valley Veterinary Services	Ceasar - euthanasia	125.00
Bill	01/06/2017	69808	Wisconsin Valley Veterinary Services	Ceasar - Dog deca...	25.00
Bill	01/06/2017	12/30/16	The Practice LLC	22 cat spays	1,320.00
Bill	01/06/2017	12/30/16	The Practice LLC	19 cat neuters	190.00
Bill	01/06/2017	12/30/16	The Practice LLC	2 dog spays	200.00
Bill	01/06/2017	12/30/16	The Practice LLC	1 dog neuter	60.00
Bill	01/06/2017	12/30/16	The Practice LLC	47 Rabies	705.00
Bill	01/10/2017	2	The Johnson County Animal Shelter	Anthony & Gypsy - ...	174.00
Bill	01/10/2017	1	The Johnson County Animal Shelter	Caesar & Lucy - do...	99.00
Bill	01/20/2017	1411	The Fix Is In, Inc	1 dog spay	80.00
Bill	01/20/2017	1411	The Fix Is In, Inc	2 CVI	10.00
Bill	01/20/2017	1411	The Fix Is In, Inc	1 Dog Neuter + Extr...	86.00
Bill	01/20/2017	1411	The Fix Is In, Inc	1 Cat Neuter	30.00
Bill	01/20/2017	1411	The Fix Is In, Inc	2 Cat Spays	80.00
Bill	01/20/2017	D17-007-D1...	The Johnson County Animal Shelter	4 Puppy Exam	80.00
Bill	01/20/2017	D17-007-D1...	The Johnson County Animal Shelter	Health Certificate	25.00
Total Medical - Surgeries/ Exams/Euth					3,534.97
Cremation Expense					
Bill	01/06/2017	3182	Peaceful Pines Pet Memorials, Inc.	12/22/16	240.00
Bill	01/10/2017	3158	Peaceful Pines Pet Memorials, Inc.	1 dog	20.00
Total Cremation Expense					260.00
Medical Supplies					
Bill	01/02/2017	70266	Wisconsin Valley Veterinary Services	Fel-O-Guard	443.88
Bill	01/02/2017	11/14/16 - 1...	Wal-Mart Community	Frontline, Q-tips	173.78
Bill	01/06/2017	12/30/16	The Practice LLC	Albon & Duracet	16.00
Bill	01/10/2017	68359	Wisconsin Valley Veterinary Services	Rabies - Grayson (...	19.00
Bill	01/22/2017	71091	Wisconsin Valley Veterinary Services	50 doses - Bronchi-...	419.41
Bill	01/22/2017	71091	Wisconsin Valley Veterinary Services	50 doses - Bronchi-...	18.67
Bill	01/22/2017	71091	Wisconsin Valley Veterinary Services	50 Doses - Druamu...	433.30
Bill	01/22/2017	71091	Wisconsin Valley Veterinary Services	50 Doses - Druamu...	19.29
Bill	01/22/2017	71091	Wisconsin Valley Veterinary Services	25 Doses Fel-O-Gu...	6.31
Bill	01/22/2017	71091	Wisconsin Valley Veterinary Services	25 Doses Fel-O-Gu...	141.65
Bill	01/22/2017	71091	Wisconsin Valley Veterinary Services	Credit on account	-6.31
Bill	01/22/2017	71091	Wisconsin Valley Veterinary Services	Credit on account	-19.29
Bill	01/22/2017	71091	Wisconsin Valley Veterinary Services	Credit on account	-18.67
Bill	01/27/2017	71392	Wisconsin Valley Veterinary Services	Biomax 15 mL - 12	59.18
Bill	01/27/2017	71392	Wisconsin Valley Veterinary Services	Clavamox 62.5 mg ...	92.01
Bill	01/27/2017	71392	Wisconsin Valley Veterinary Services	Fel-O-Guard Plus 4...	295.92
Total Medical Supplies					2,094.13
Dog License to County					
Bill	01/10/2017	3741 - 3780	Lincoln County County Treasurer	3741 - 3780	420.00
Bill	01/23/2017	3781 - 3820	Lincoln County County Treasurer	3781 - 3820	460.00
Bill	01/25/2017	Additional \$20	Lincoln County County Treasurer	Additional \$20 on la...	20.00
Total Dog License to County					900.00
Sales Tax					
Bill	01/09/2017	Oct	Wisconsin Department of Revenue - ...	Oct	176.99
Bill	01/09/2017	Nov	Wisconsin Department of Revenue - ...	NOV	149.26
Bill	01/09/2017	dec	Wisconsin Department of Revenue - ...	Dec	283.29
Total Sales Tax					609.54

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02/06/17

Cash Basis

Lincoln County Humane Society
Profit & Loss Expense Detail
 January 2017

Type	Date	Num	Name	Memo	Paid Amount
Red Dingo Tags					
Bill	01/10/2017	USORD003...	Red Dingo Inc	4 tags	30.00
Bill	01/10/2017	USORD003...	Red Dingo Inc	Tag	7.50
Total Red Dingo Tags					37.50
Microchip					
Bill	01/14/2017	SIUN9497595	Pethealth Services	4 chip registrations	19.40
Total Microchip					19.40
Total Animal Related Expenses					7,732.95
Total EXPENSES					7,732.95
Fundraising Expenses					
Supplies					
Check	01/25/2017	Debit	VIP All Value Office Products	Envelopes	19.99
Total Supplies					19.99
Pavers/Tiles					
Bill	01/22/2017	JHETS3	Bricks R Us	2 Bricks	59.00
Bill	01/22/2017	JHETS7	Bricks R Us	3 Bricks + Shipping	103.50
Bill	01/23/2017	3/6/17	Wausau Award and Engraving Inc.	Tile	27.22
Bill	01/27/2017	1/25/17	Wausau Award and Engraving Inc.	Tile - Morrison	27.22
Total Pavers/Tiles					216.94
PayPal Expense					
Deposit	01/31/2017		Paypal	January PayPal fees	2.77
Total PayPal Expense					2.77
Total Fundraising Expenses					239.70
Office Related Expenses					
Professional Fees					
Bill	01/17/2017	1440	Janet Klutteman.	January	100.00
Total Professional Fees					100.00
Office Supplies / Equipment					
Bill	01/02/2017	11/14/16 - 1...	Wal-Mart Community	Ink, Office Supplies	113.99
Bill	01/17/2017	1440	Janet Klutteman.	W2s	26.00
Bill	01/24/2017	2/11/17	Wal-Mart Community	Ink	6.53
Bill	01/24/2017	2/11/17	Wal-Mart Community	Ink	18.38
Total Office Supplies / Equipment					164.90
Other Office Related Expenses					
Bill	01/09/2017	2017	Merrill Optimist Club	Optimist Enrollment	85.00
Total Other Office Related Expenses					85.00
Total Office Related Expenses					349.90
Payroll Expenses					
Hourly Employees					
Paycheck	01/06/2017	10102	Amber L Renken		41.25
Paycheck	01/06/2017	10102	Amber L Renken		42.19
Paycheck	01/06/2017	10103	Andrea L Nicholson		720.00
Paycheck	01/06/2017	10103	Andrea L Nicholson		26.25
Paycheck	01/06/2017	10104	Bonnyjean M Graap		194.78
Paycheck	01/06/2017	10104	Bonnyjean M Graap		32.78
Paycheck	01/06/2017	10105	Brittany B Graap		71.25
Paycheck	01/06/2017	10107	Kassandra A Boyce		347.81
Paycheck	01/06/2017	10107	Kassandra A Boyce		68.54
Paycheck	01/06/2017	10108	Misty L Wirt		478.72
Paycheck	01/06/2017	10108	Misty L Wirt		131.43
Paycheck	01/06/2017	10109	Tiffany K Tupa		655.40
Paycheck	01/06/2017	10109	Tiffany K Tupa		59.33
Paycheck	01/06/2017	10110	Timothy A Becker		198.75
Paycheck	01/20/2017	10132	Amber L Renken		67.50
Paycheck	01/20/2017	10133	Andrea L Nicholson		562.50
Paycheck	01/20/2017	10133	Andrea L Nicholson		160.00

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Lincoln County Humane Society
Profit & Loss Expense Detail
 January 2017

02/06/17

Cash Basis

Type	Date	Num	Name	Memo	Paid Amount
Paycheck	01/20/2017	10134	Bonnyjean M Graap		214.65
Paycheck	01/20/2017	10135	Brittany B Graap		56.25
Paycheck	01/20/2017	10137	Kassandra A Boyce		552.53
Paycheck	01/20/2017	10138	Misty L Wirt		579.86
Paycheck	01/20/2017	10139	Tiffany K Tupa		742.98
Paycheck	01/20/2017	10140	Timothy A Becker		245.63
Total Hourly Employees					6,250.38
Manager Salary					
Paycheck	01/06/2017	10106	Elizabeth K Friedenfels		1,403.85
Paycheck	01/20/2017	10136	Elizabeth K Friedenfels		1,403.85
Total Manager Salary					2,807.70
Federal Payroll Tax Expense					
Paycheck	01/06/2017	10102	Amber L Renken		5.17
Paycheck	01/06/2017	10102	Amber L Renken		1.21
Paycheck	01/06/2017	10103	Andrea L Nicholson		46.27
Paycheck	01/06/2017	10103	Andrea L Nicholson		10.82
Paycheck	01/06/2017	10104	Bonnyjean M Graap		14.11
Paycheck	01/06/2017	10104	Bonnyjean M Graap		3.30
Paycheck	01/06/2017	10105	Brittany B Graap		4.42
Paycheck	01/06/2017	10105	Brittany B Graap		1.03
Paycheck	01/06/2017	10106	Elizabeth K Friedenfels		86.54
Paycheck	01/06/2017	10106	Elizabeth K Friedenfels		20.24
Paycheck	01/06/2017	10107	Kassandra A Boyce		25.81
Paycheck	01/06/2017	10107	Kassandra A Boyce		6.04
Paycheck	01/06/2017	10108	Misty L Wirt		37.83
Paycheck	01/06/2017	10108	Misty L Wirt		8.85
Paycheck	01/06/2017	10109	Tiffany K Tupa		44.31
Paycheck	01/06/2017	10109	Tiffany K Tupa		10.36
Paycheck	01/06/2017	10110	Timothy A Becker		12.32
Paycheck	01/06/2017	10110	Timothy A Becker		2.88
Paycheck	01/20/2017	10132	Amber L Renken		4.19
Paycheck	01/20/2017	10132	Amber L Renken		0.98
Paycheck	01/20/2017	10133	Andrea L Nicholson		44.79
Paycheck	01/20/2017	10133	Andrea L Nicholson		10.48
Paycheck	01/20/2017	10134	Bonnyjean M Graap		13.31
Paycheck	01/20/2017	10134	Bonnyjean M Graap		3.11
Paycheck	01/20/2017	10135	Brittany B Graap		3.49
Paycheck	01/20/2017	10135	Brittany B Graap		0.82
Paycheck	01/20/2017	10136	Elizabeth K Friedenfels		86.55
Paycheck	01/20/2017	10136	Elizabeth K Friedenfels		20.24
Paycheck	01/20/2017	10137	Kassandra A Boyce		34.26
Paycheck	01/20/2017	10137	Kassandra A Boyce		8.01
Paycheck	01/20/2017	10138	Misty L Wirt		35.95
Paycheck	01/20/2017	10138	Misty L Wirt		8.41
Paycheck	01/20/2017	10139	Tiffany K Tupa		46.07
Paycheck	01/20/2017	10139	Tiffany K Tupa		10.78
Paycheck	01/20/2017	10140	Timothy A Becker		15.23
Paycheck	01/20/2017	10140	Timothy A Becker		3.56
Total Federal Payroll Tax Expense					691.74
Unemployment Expense					
Paycheck	01/06/2017	10102	Amber L Renken		1.00
Paycheck	01/06/2017	10103	Andrea L Nicholson		8.96
Paycheck	01/06/2017	10104	Bonnyjean M Graap		2.73
Paycheck	01/06/2017	10105	Brittany B Graap		0.86
Paycheck	01/06/2017	10106	Elizabeth K Friedenfels		16.75
Paycheck	01/06/2017	10107	Kassandra A Boyce		5.00
Paycheck	01/06/2017	10108	Misty L Wirt		7.32
Paycheck	01/06/2017	10109	Tiffany K Tupa		8.58
Paycheck	01/06/2017	10110	Timothy A Becker		2.39
Paycheck	01/20/2017	10132	Amber L Renken		0.81
Paycheck	01/20/2017	10133	Andrea L Nicholson		8.66
Paycheck	01/20/2017	10134	Bonnyjean M Graap		2.58
Paycheck	01/20/2017	10135	Brittany B Graap		0.67
Paycheck	01/20/2017	10136	Elizabeth K Friedenfels		16.75
Paycheck	01/20/2017	10137	Kassandra A Boyce		6.63

12:03 PM
02/06/17
Cash Basis

Lincoln County Humane Society
Profit & Loss Expense Detail
January 2017

Type	Date	Num	Name	Memo	Paid Amount
Paycheck	01/20/2017	10138	Misty L Wirt		6.96
Paycheck	01/20/2017	10139	Tiffany K Tupa		8.91
Paycheck	01/20/2017	10140	Timothy A Becker		2.94
Total Unemployment Expense					108.50
Employee Health Insurance					
Check	01/03/2017	debit	SHOP Marketplace		429.55
Paycheck	01/06/2017	10106	Elizabeth K Friedenfels		-8.00
Paycheck	01/20/2017	10136	Elizabeth K Friedenfels		-8.00
Total Employee Health Insurance					413.55
Workers' Compensation					
Bill	01/03/2017	011400260900	West Bend Mutual Insurance Company	Workers Compens...	1,237.00
Bill	01/22/2017	2/3/17	West Bend Mutual Insurance Company	Workman's Comp I...	185.00
Total Workers' Compensation					1,422.00
Total Payroll Expenses					11,693.87
Shelter Expenses					
Security Services					
Bill	01/14/2017	1639457	Per Mar Security Services	Service call & Labor	242.00
Total Security Services					242.00
Repairs					
Check	01/09/2017	debit	Pet Supplies	plastic flaps for dog...	192.80
Check	01/15/2017	Debit	Ace Hardware	Cat Tree Screws	11.78
Total Repairs					204.58
Supplies					
Bill	01/02/2017	11/14/16 - 1...	Wal-Mart Community	Cleaning Supplies	195.89
Deposit	01/04/2017		Liz Friedenfels	Oils	-10.00
Check	01/06/2017	Debit	Doterra	Oils	148.93
Bill	01/14/2017	A55411	Wisconsin Building Supply	Driver Set	10.54
Check	01/14/2017	Debit	Ace Hardware	Totes, mopstick	34.77
Deposit	01/15/2017		Liz Friedenfels	Oils	-15.00
Deposit	01/15/2017		Kassandra A Boyce	Oils	-29.25
Deposit	01/16/2017		Mary Bootz	Oil	-30.00
Deposit	01/16/2017		Misty Suwyn	Oil	-20.00
Deposit	01/23/2017		Liz Friedenfels	Oil	-35.00
Bill	01/24/2017	2/11/17	Wal-Mart Community	Toilet Cleaner	4.77
Bill	01/24/2017	2/11/17	Wal-Mart Community	Toilet Cleaner	1.69
Bill	01/24/2017	2/11/17	Wal-Mart Community	Gift Card	-1.69
Bill	01/24/2017	2/11/17	Wal-Mart Community	Gift Card	-11.78
Bill	01/24/2017	2/11/17	Wal-Mart Community	Gift Card	-6.53
Total Supplies					237.34
Electric/Gas					
Bill	01/20/2017	2/1/17	Wisconsin Public Service	2/1/17	927.06
Total Electric/Gas					927.06
Telephone					
Bill	01/23/2017	975251	Cellcom Rhinelander PCS	2/4/17	170.45
Bill	01/25/2017	2/13/17	Frontier Communications	Cancellation # 3842...	353.70
Bill	01/27/2017	2/10/17	Charter Communications	Charter	133.27
Total Telephone					657.42
Vehicle					
Bill	01/02/2017	2/28/17	Registration Fee Trust	Van Registration	75.00
Check	01/02/2017	debit	Kwik Trip		32.33
Check	01/03/2017	debit	Kwik Trip		29.90
Check	01/06/2017	Debit	Kwik Trip	Gasoline	27.10
Bill	01/10/2017	December	Kwik Trip	1/20/17	64.21
Check	01/14/2017	Debit	Kwik Trip	Gasoline	33.88
Check	01/16/2017	Debit	Holiday	Gasoline	17.52
Check	01/22/2017	Debit	Holiday	Gasoline	33.05
Check	01/25/2017	Debit	Holiday	Gasoline	9.00
Total Vehicle					321.99

6.3.a

Packet Pg. 67

12:03 PM
02/06/17
Cash Basis

Lincoln County Humane Society
Profit & Loss Expense Detail
January 2017

Type	Date	Num	Name	Memo	Paid Amount
Water					
Bill	01/23/2017	2/10/17	Merrill Water Utility	2/10/17	496.44
Total Water					496.44
Waste Removal					
Bill	01/06/2017	12/28/16	Waste Management of Central Wisc...	1/26/17	348.60
Total Waste Removal					348.60
Total Shelter Expenses					3,435.43
Total Expense					23,451.85
Net Ordinary Income					-23,451.85
Other Income/Expense					
Other Expense					
New Shelter Expenses					
Construction Expenses					
Bill	01/02/2017	4456	Graphic House.	Sign	1,500.00
Total Construction Expenses					1,500.00
Total New Shelter Expenses					1,500.00
Total Other Expense					1,500.00
Net Other Income					-1,500.00
Net Income					-24,951.85

Lincoln County Humane Society
Board of Directors Agenda
February 28th, 2017 - 5:00 pm
LCHS Building

Discuss and approve the following agenda items:

1. Minutes from previous meeting
2. Reports from Officers:
 - President
 - Vice President
 - Secretary
 - Treasurer
3. Volunteer Coordinator:
4. Shelter Manager:
5. Old Business:
6. New Business:
 - Review Bylaws – voting procedures
 - Election of Officers
 - Staff Wages
 - Review of 2016
 - 2017 Goals
7. Public Comments:
8. Open Discussion:
9. Upcoming Meeting:
10. Adjourn:

Shelter Report

February 2017

Animals:

The animals are doing well. Our cat numbers are still low but we have had several pregnant cats arrive at the shelter.

There have been several adoptions but we are working with various rescues to try to get some of our long-term dog residents into different organizations.

Staff:

Our staff is doing well. Tim is maintaining snow removal.

Events & Activities:

The February yoga class had two participants. Marcy will try another class in March and hopefully there will be more interest.

Janet is working to determine if an audit or review will be required for the 2016 calendar year. The donation amount was raised; Janet believes our income may be roughly \$1,000 under the amount. She will keep us updated as she works with the accountant.

"Love a Paw" has raised \$850 so far. We will work on collecting any remaining money and leftover Paws throughout the next week. Chip's and County Market have gotten very involved. County Market will be sending a check because they preferred not to hold cash for so long.

The Bowl-a-Thon will be held the last weekend of February. There are lots of good prizes so we are hoping for a good turnout.

12:07 PM
02/06/17
Cash Basis

Lincoln County Humane Society
Profit & Loss
January 2017

	Jan 17	Budget	Jan 17	YTD Budget	Annual Budget
Ordinary Income/Expense					
Income					
LCHS INCOME					
Animal Related Income					
Surrender Fees	70.00	166.67	70.00	166.67	2,000.00
Adoption Fees	2,323.00	3,500.00	2,323.00	3,500.00	42,000.00
Reclamation Fees	0.00	83.33	0.00	83.33	1,000.00
Dog License-Public	1,300.00	2,500.00	1,300.00	2,500.00	10,000.00
Dog License-County	0.00	0.00	0.00	0.00	40,000.00
Red Dingo Tags	40.00	91.66	40.00	91.66	1,100.00
Microchip	75.00	83.34	75.00	83.34	1,000.00
Other Animal Related Income	220.00		220.00		
Total Animal Related Income	4,028.00	6,425.00	4,028.00	6,425.00	97,100.00
Fundraising Income					
Aluminum Cans	176.00		176.00		
Donation Banks	697.75		697.75		
Sales/General Event Income	1,826.00		1,826.00		
Passive Fundraisers	60.00		60.00		
Other Fundraising Income	4.00		4.00		
Fundraising Income - Other	0.00	19,500.00	0.00	19,500.00	78,000.00
Total Fundraising Income	2,763.75	19,500.00	2,763.75	19,500.00	78,000.00
Donation Income					
General Donation	2,641.52	2,083.33	2,641.52	2,083.33	25,000.00
Memorial Income	970.00	1,000.00	970.00	1,000.00	12,000.00
Total Donation Income	3,611.52	3,083.33	3,611.52	3,083.33	37,000.00
Municipal Funding					
County Installments	8,750.00	8,750.00	8,750.00	8,750.00	35,000.00
City of Tomahawk	0.00	0.00	0.00	0.00	1,500.00
City of Merrill	0.00	0.00	0.00	0.00	15,000.00
City of Maine	0.00	250.00	0.00	250.00	1,000.00
Total Municipal Funding	8,750.00	9,000.00	8,750.00	9,000.00	52,500.00
Other					
Bank Interest	1.68	16.67	1.68	16.67	200.00
Total Other	1.68	16.67	1.68	16.67	200.00
Total LCHS INCOME	19,154.95	38,025.00	19,154.95	38,025.00	264,800.00
Total Income	19,154.95	38,025.00	19,154.95	38,025.00	264,800.00
Expense					
EXPENSES					
Animal Related Expenses					
Cat litter	0.00	166.67	0.00	166.67	2,000.00
Food	277.41	166.66	277.41	166.66	2,000.00
Medical - Surgeries/ Exams/Euth	3,534.97	2,600.00	3,534.97	2,600.00	31,200.00
Cremation Expense	260.00	41.67	260.00	41.67	500.00
Medical Supplies	2,094.13	1,125.00	2,094.13	1,125.00	13,500.00
Dog License to County	900.00	2,250.00	900.00	2,250.00	9,000.00
Sales Tax	609.54	250.00	609.54	250.00	3,000.00
Red Dingo Tags	37.50	16.67	37.50	16.67	200.00
Microchip	19.40	583.33	19.40	583.33	7,000.00
Total Animal Related Expenses	7,732.95	7,200.00	7,732.95	7,200.00	68,400.00
Total EXPENSES	7,732.95	7,200.00	7,732.95	7,200.00	68,400.00
Fundraising Expenses					
Supplies	19.99		19.99		
Pavers/Tiles	216.94		216.94		
PayPal Expense	2.77		2.77		
Fundraising Expenses - Other	0.00	783.33	0.00	783.33	9,400.00
Total Fundraising Expenses	239.70	783.33	239.70	783.33	9,400.00

12:07 PM

02/06/17

Cash Basis

Lincoln County Humane Society
Profit & Loss
January 2017

	Jan 17	Budget	Jan 17	YTD Budget	Annual Budget
Office Related Expenses					
Computer Purchase	0.00	1,000.00	0.00	1,000.00	1,000.00
Licenses and Permits	0.00	25.00	0.00	25.00	300.00
Domain/QuickBooks/Software	0.00	83.33	0.00	83.33	1,000.00
Professional Fees	100.00	125.00	100.00	125.00	7,500.00
Office Supplies / Equipment	164.90	208.34	164.90	208.34	2,500.00
Postage	0.00	41.66	0.00	41.66	500.00
Staff Meetings	0.00	25.00	0.00	25.00	300.00
Uniforms	0.00	41.67	0.00	41.67	500.00
Other Office Related Expenses	85.00		85.00		
Total Office Related Expenses	349.90	1,550.00	349.90	1,550.00	13,600.00
Payroll Expenses					
Hourly Employees	6,250.38	6,416.67	6,250.38	6,416.67	77,000.00
Manager Salary	2,807.70	3,041.66	2,807.70	3,041.66	36,500.00
Federal Payroll Tax Expense	691.74	716.66	691.74	716.66	8,600.00
Unemployment Expense	108.50	250.00	108.50	250.00	3,000.00
Employee Health Insurance	413.55	550.00	413.55	550.00	6,600.00
Workers' Compensation	1,422.00		1,422.00		
Total Payroll Expenses	11,693.87	10,974.99	11,693.87	10,974.99	131,700.00
Shelter Expenses					
Conference Expense	0.00	16.66	0.00	16.66	200.00
Security Services	242.00	150.00	242.00	150.00	1,800.00
Staff Education	0.00	41.67	0.00	41.67	500.00
Equipment	0.00	125.00	0.00	125.00	1,500.00
Repairs	204.58	166.67	204.58	166.67	2,000.00
Supplies	237.34	225.00	237.34	225.00	2,700.00
Electric/Gas	927.06	708.33	927.06	708.33	8,500.00
Insurance (Gen'l Lia, Vehicle)	0.00	833.33	0.00	833.33	10,000.00
Telephone	657.42	416.67	657.42	416.67	5,000.00
Vehicle	321.99	250.00	321.99	250.00	3,000.00
Water	496.44	208.33	496.44	208.33	2,500.00
Waste Removal	348.60	333.34	348.60	333.34	4,000.00
Total Shelter Expenses	3,435.43	3,475.00	3,435.43	3,475.00	41,700.00
Total Expense	23,451.85	23,983.32	23,451.85	23,983.32	264,800.00
Net Ordinary Income	-4,296.90	14,041.68	-4,296.90	14,041.68	0.00
Other Income/Expense					
Other Expense					
New Shelter Expenses					
Construction Expenses	1,500.00		1,500.00		
Total New Shelter Expenses	1,500.00		1,500.00		
Total Other Expense	1,500.00		1,500.00		
Net Other Income	-1,500.00		-1,500.00		
Net Income	-5,796.90	14,041.68	-5,796.90	14,041.68	0.00

Lincoln County Humane Society Board Members as of January 2017

Liz Friedenfels	September	2007
Kari Kercher	January	2009
Pat Hoerstmann	February	2009
Kandy Peterson	May	2010
Trina DeLasky	February	2012
Mike Loka	May	2012
Sally Thayer	January	2014
Jim Daenicke	January	2014
Mary Moscherosch	September	2014
Lynn Mai	November	2015
Mike Rick	May	2016

“Licensing Your Pet”

There are many expectations for pet owners besides providing your pet with the basics like food, water, shelter, as well as exercise and attention. But beyond being a responsible pet owner in your home, there are also requirements within our state for what you must do as a pet owner. Wisconsin law requires that all dogs over five months of age have a current dog license. Because a dog must be up to date on the rabies vaccination in order to be licensed, dog licensing is a public health measure to prevent an outbreak of the rabies virus.

Conservative estimates indicate that over 50% of Wisconsin’s dogs are not licensed. This may mean that just as many dogs are not given the life-saving rabies vaccination. The rabies vaccination is very inexpensive and can be done quickly and easily by a licensed veterinarian. Many local vets also offer rabies clinics throughout the year, which can be cost-saving for pet guardians. Keep in mind that owners who do not license their pets are much more unlikely to spay and neuter, vaccinate for a variety of diseases, and pay for medical emergencies when a pet is injured. Licensing is just one important part of being a pet owner.

It is also extremely important to put the current license on your pet. When a dog license is issued, the owner’s name and contact information are recorded by local officials and this information can be accessed if your dog does become lost. A lost dog’s only “ticket” home may be the license and identification tags it is wearing. An owner with a dog that is wearing a current license and information, is easier to contact and thereby requiring less work on the part of humane society staff, and is less expensive to redeem your dog from the shelter. Although it is not a current law that the feline companions of Lincoln County have a license, please make sure your cats have the rabies vaccination and wear a current identification tag and be microchipped in the event they become lost.

If you purchase the current dog license before March 31st, it is a cheaper fee. It is only \$10.00 to license a spayed or neutered dog and \$30 for an unaltered dog. After March 31st, the fees will be increased. According to the Merrill Police Department, the fine for a first offense of a dog not having a rabies vaccination is \$77.50 and the same rate applies to a dog that is not licensed. Imagine paying \$155 in fines and still being required to pay the original license fee.

In Lincoln County, over 90% of the fee paid for a dog license is given to the humane society as required by state statute. 50 cents from each license is kept by the “seller” whether that is a town treasurer, the county treasurer, or the Lincoln County Humane Society. Many of these providers of licenses donate this money back to the shelter. In 2016, LCHS received more than \$40,000 in dog license fees. This is a major part of our annual operating budget. In Lincoln County, over 3500 dog licenses are purchased each year. Because less than 50% of Wisconsin’s dogs are licensed, there are millions of dollars’ worth of licensing fees that go uncollected state wide. Don’t think of it as a tax on your dog, think of it as another way support the humane society.

In the unlikely event that your pet does bite someone, having a current rabies vaccination is also a money saving investment. If your pet were to bite and does not have a current rabies vaccination, the pet will need to be quarantined for ten days in an appropriate facility. This quarantine includes 3 veterinary checks to ensure that the rabies vaccination is not present. If your pet is current on rabies, the quarantine can take place at home and the pet owner will not be responsible for paying the quarantine and vet check fees. We often hear people say, "My pet never leaves the yard," or "My pet is too friendly to bite," but it is safer and less expensive to prepare for the worst possible scenario than to struggle with license, quarantine, and vaccination fees unexpectedly. Quarantine fees through the Lincoln County Humane Society are \$20 per day – that amounts to \$200 on a 10 day-quarantine hold.

Please be a responsible pet owner and provide this service to your pet. Current rabies vaccinations and licenses will potentially save money, create a safer environment for your pet, and increase the level of responsibility for pets within your community. Isn't your pooch worth that investment?

NOTICE OF PUBLIC HEARING

The City of Merrill Health and Safety Committee has scheduled a public hearing to consider a permit to allow one household to have more than four (but six or less) dogs. The permit has been applied for by Eric Maluegge, 900A S Foster Street.

The public hearing will be held in the City Hall Council Chambers at City Hall, 1004 East First Street, on Monday, March 27, 2017 at 6:00 p.m. Interested parties may attend to provide testimony.

This notice is being published per City of Merrill Code of Ordinances Section 6-92.

City Clerk William N. Heideman CMC , WCMC
City of Merrill

RECEIVED

MAR 16 2017

BY:

5-6 DOG LICENSE APPLICATION FOR 2017

\$35.00

Owner's Name: Eric Maluegge
Address: 900 A S Foster St
City: Merrill
Day time Phone number: 715-218-7957

Complete section for each dog that you own and return form with payment of \$35.00 to your local treasurer, at City Hall, 1004 E. First Street, Merrill, WI 54452.

lic#
2707

Name of Dog: Greta
Color: Brindle
Breed: Plott
Age: 2
Sex: F
Date of Rabies Vaccination: 11-30-16
Expiration Date: 11-30-2019
Rabies Tag No: 2643

2710 Name of Dog: Macie
Color: Black
Breed: Plott
Age: 3
Sex: F
Date of Rabies Vaccination: 11-30-16
Expiration Date: 11-30-2019
Rabies Tag No: 2638

2708

Name of Dog: Luigan
Color: Black + Tan
Breed: Black + Tan X Plott
Age: 1
Sex: M
Date of Rabies Vaccination: 11-30-16
Expiration Date: 11-30-2019
Rabies Tag No: 2639

2711 Name of Dog: Dutchess
Color: Red + white
Breed: Walker X Redbone
Age: 7
Sex: F
Date of Rabies Vaccination: 11-30-16
Expiration Date: 11-30-2019
Rabies Tag No: 2636

2709

Name of Dog: Chief
Color: Black, white, Grey
Breed: Blue tick
Age: 9
Sex: MN
Date of Rabies Vaccination: 11-30-16
Expiration Date: 11-30-2019
Rabies Tag No: 2644

2712 Name of Dog: Rock
Color: Brindle
Breed: Plott
Age: 6
Sex: M
Date of Rabies Vaccination: 11-30-16
Expiration Date: 11-30-19
Rabies Tag No: 52984

No application for license shall be made without compliance with rabies vaccination provisions of Chapter 12, Lincoln County Ordinance, Chapter 174, Wisconsin Statutes, and City of Merrill Ordinances. This responsibility rests with the owner of the dogs.

I, the undersigned, have complied with Chapter 12, Lincoln County Ordinances, Chapter 174, Wisconsin Statutes and City of Merrill Ordinances pertaining to dog license and rabies shots.

X E Maluegge

pd \$35



City of Merrill

Police Department

Chief Corey A. Bennett
Captain Dale A. Bacher • Captain Greg D. Hartwig
1004 East First Street • Merrill, Wisconsin • 54452-2586
Phone (715)536-8311 • FAX (715)536-5930

3-22-17

Health and Safety Committee
Re: Eric Maluegge dog license application

I am in receipt of the license application for Eric Maluegge to possess up to 6 dogs. I have inspected the address or premises on which the dogs are kept. I noted the following:

- The residence is on the fringe of the City limits and is more closely surrounded by county residents.
- The animals were kept in outdoor pens which appear to be newer in condition or very well maintained.
- The animal's pen spaces were clean and each animal appeared to have been well nourished.
- The animals only barked as I drove through the horseshoe driveway and immediately stopped as I was leaving the driveway.
- There have been no animal complaints in the City involving Mr. Maluegge in the past 3 years.

Sincerely,

A handwritten signature in blue ink that reads 'Corey A. Bennett'. The signature is written in a cursive style with a long horizontal stroke at the end.

Corey Bennett, Chief of Police

"Serving Merrill with Pride"