

QUAY COUNTY GOVERNMENT
300 South Third Street
P.O. Box 1246
Tucumcari, NM 88401
Phone: (575) 461-2112
Fax: (575) 461-6208

AGENDA
REGULAR SESSION
QUAY COUNTY BOARD OF COMMISSIONERS
MARCH 9, 2020

9:00 A.M. Call Meeting to Order

Pledge of Allegiance

Approval of Minutes-Regular Session February 24, 2020

Approval/Amendment of Agenda

Public Comment

Ongoing Business

New Business

- I. Russell Shafer, Quay County Sheriff**
 - Request Approval of FY 2019-2020 Resolution No. 40 - A Resolution Declaring Opposition to the Extreme Risk Protection Order Act
 - Request Approval of Law Enforcement Protection Funds
FY July 1, 2020 – June 30, 2021 Application
- II. Clinton D. Harden, QC Representative**
 - Legislative Update
- III. Connie Loveland, Tucumcari MainStreet Executive Director**
 - Presentation of Tucumcari MainStreet Report Update
- IV. Tracy Johnson, Tucumcari Talking Tour**
 - Request Approval of the Tucumcari Talking Tour/Equipment Use Agreement
- V. C. Renee Hayoz, Presbyterian Medical Services Administrator**
 - Presentation of Monthly RPHCA Reports
- VI. Patsy Gresham, Quay County Treasurer**

Request Approval of FY 2019-2020 Resolution No. 41 - Authorizing Investment of Monies in Local Short-Term Investment Fund
- VII. Christopher Birch, Quay County Detention Center Administrator**
 - Request Approval of Securus Technology Master Services Agreement



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Quay County, NM Ellen White - County Clerk, County Cle

Pages: 101



VIII. Andrea Shafer, Quay County DWI Coordinator Administrator

- Request Approval of FY 2019-2020 Resolution No. 42 - Authorizing the County to Submit a DWI Program Application to the NM DFA
- Request Approval of QC DWI Program and NM DFA/DWI Program MOU
- Request Approval of Statement of Assurances Local DWI Grant and Distribution Program

IX. Ellen White, Quay County Clerk

- Request Approval for FY 2018-2019 Amended Resolution No. 42 – Designating the Location of Election Day Polling Places

X. Lucas Bugg, Quay County Fire Marshall

- Request Approval of Fire #1 PERA Applications
- Request Approval of Fire #2 PERA Applications
- Request Approval of Fire #3 PERA Applications
- Request Approval of Quay Fire #4 PERA Applications
- Request Approval of Bard-Endee PERA Applications
- Request Approval of Forrest Fire PERA Applications
- Request Approval of Porter Fire PERA Applications

XI. Daniel Zamora, Quay County Emergency Management Coordinator

- Request Approval of the NM Department of Finance Administration First Amendment to Intergovernmental Grant Agreement Number 2019-3410-ZD5037-01018

XII. Larry Moore, Quay County Road Superintendent

- Request Approval of FY 2019-2020 Resolution No. 39 – 2020 Certified County Maintained Mileage
- Request Approval of Proposed 2020-2021 LGRF Funding
- Road Update

XIII. Richard Primrose, Quay County Manager

- Propose Amending; Ordinances 6 and 19 Dedication of a County Local Option – Gross Receipt Tax
- Request Approval of Quay County Representative for City of Tucumcari Library Advisory Board
- Request Approval to Reschedule the Regularly Scheduled Quay County Board of Commissioners' Meeting of Monday, March 23, 2020
- Correspondence

XIV. Request Approval of Accounts Payable

XV. Other Quay County Business That May Arise During the Commission Meeting and/or Comments from the Commissioners

XVI. Request for Closed Executive Session

- **Pursuant to Section 10-15-1(H) 7. The New Mexico Open Meetings Act Pertaining to Threatened or Pending Litigation**
- **Pursuant to Section 10-15-1(H) 8. Discussion of the Purchase, Acquisition or Disposal of Real Property or Water Rights**

XVII. Franklin McCasland, Quay County Commission Chairman

- Proposed action, if any, from Executive Session

Adjourn

Lunch-Time and Location to be Announced

REGULAR SESSION-BOARD OF QUAY COUNTY COMMISSIONERS

March 9, 2020

9:00 A.M.

BE IT REMEMBERED THE HONORABLE BOARD OF QUAY COUNTY COMMISSIONERS met in regular session the 9th day of March, 2020 at 9:00 a.m. in the Quay County Commission Chambers, Tucumcari, New Mexico, for the purpose of taking care of any business that may come before them.

PRESENT & PRESIDING:

Franklin McCasland, Chairman
Mike Cherry, Member
Sue Dowell, Member
Ellen L. White, County Clerk
Richard Primrose, County Manager

OTHERS PRESENT:

Janie Hoffman, Quay County Assessor
Daniel Zamora, Quay County Emergency Manager
Andrea Shafter, Quay County DWI Coordinator
Russell Shafer, Quay County Sheriff, Deputies and Staff
Christopher Birch, Quay County Detention Center Administrator
Lucas Bugg, Quay County Fire Marshal
Larry Moore, Quay County Road Superintendent
Cheryl Simpson, Quay County Finance Director
Tim Rose, 10th Judicial District Attorney
Jerry & Ann Hall, Citizens
Carmen Runyan, Great Tucumcari Chamber of Commerce
Clinton D. Harden and Kathy Elliot, Harden & Associates
Connie Loveland, Tucumcari MainStreet Executive Director
Tracy Johnson, Tucumcari Talking Tour
Renee Hayoz, Presbyterian Medical Services Administrator
Patsy Gresham, Quay County Treasurer
Harry Heckendorn, Citizen
Ron Warnick, Quay County Sun

Others present are on a list attached to these minutes.

Chairman McCasland called the meeting to order. Jerry Hall led the Pledge of Allegiance.

A MOTION was made by Sue Dowell, SECONDED by Mike Cherry to approve the minutes from the February 24, 2020 regular session as presented. MOTION carried with Cherry voting "aye", Dowell voting "aye" and McCasland voting "aye".

A MOTION was made by Mike Cherry, SECONDED by Sue Dowell to approve the Agenda. MOTION carried with Cherry voting "aye", Dowell voting "aye" and McCasland voting "aye".

Public Comment: NONE

Chairman McCasland recessed the meeting to allow those present to move to the District Courtroom to better serve the citizens that were present for Item No. 1, on the Agenda. Time noted 9:05 a.m.

NEW BUSINESS:

Chairman McCasland brought the meeting back to order in the District Courtroom. Time noted. 9:15 a.m.

Sheriff Russell Shafer, read and presented FY 2019-2020 Resolution No. 40; Declaring Opposition to the Extreme Risk Protection Order Act. Shafer stated in addition to the numerous citizens in attendance, he received 4 letters of support from residents. Chairman McCasland thanked Shafer for presenting the Resolution and for all of those in attendance. McCasland asked those in the audience, by show of hands, how many were in support of the Resolution, and how many were opposed. After a count, the record will reflect a show of 63-0 plus the 4 letters of support.

Commissioner Dowell thanked the citizens in attendance for their support of the law enforcement efforts in Quay County and the footwork they each had a part in to support this Resolution.

Commissioner Cherry echoed the comments of Dowell and McCasland, thanking everyone for attending. A MOTION was made by Mike Cherry, SECONDED by Sue Dowell to approve Resolution No. 40. MOTION carried with Cherry voting "aye", Dowell voting "aye" and McCasland voting "aye". A copy is attached to these minutes.

Chairman McCasland asked those in attendance to return to the Commission Chambers for the remainder of the meeting.

Clinton Harden and Kathy Elliot of Harden & Associates presented the 2020 Legislative Update. Elliot reported Quay County received all their requests for Capital Outlay projects, pending the Governor signing the legislation. Elliot reported the total allocated to Quay County entities was \$2,060,000.00.

Harden reported the New Mexico Racing Commission also was asked about the possibility of a sixth license. The Commission stated that item would not be revisited.

Harden thanked the Commission for allowing them to continue to lobby on behalf of Quay County.

Sheriff Russell Shafer, requested approved of the Law Enforcement Protection Funds Application in the amount of \$23,600.00 to be primarily used for equipment. A MOTION was made by Mike Cherry, SECONDED by Sue Dowell to approve the Application as presented. MOTION carried with Cherry voting "aye", Dowell voting "aye" and McCasland voting "aye". A copy is attached to these minutes.

Connie Loveland, Tucumcari MainStreet Executive Director presented the following update and 2019 Annual Service Report, which is attached.

1. A specialist will be in Tucumcari on March 18, to discuss options regarding the collapsing building at 2nd Street and Main Street at 4:00 p.m. at the Depot.
2. A meeting will be held regarding the revitalization of MainStreet on March 16 regarding branding and marketing.
3. An architect will be onsite on March 21 to discuss the arches from the old hotel that make up a portion of the VFW property.

Tracy Johnson, founder of the Tucumcari Talking Tour, requested approval of an Equipment Use Agreement to house an AM radio transmitting device at the Courthouse to attract tourists to the area. The broadcast would inform people of the history in the Tucumcari area, specifically regarding the older historical buildings and sites. A MOTION was made by Mike Cherry, SECONDED by Sue Dowell to approve the Agreement. MOTION carried with Dowell voting "aye", Cherry voting "aye" and McCasland voting "aye". A copy is attached.

Renee Hayoz, Presbyterian Medical Services Administrator presented the monthly RPHCA Report. A copy is attached.

Patsy Gresham, Quay County Treasurer requested approval of FY 2019-2020 Resolution No. 41; Authorizing Investment of Monies in the Local Short-Term Investment Fund. A MOTION was made by Mike Cherry, SECONDED by Sue Dowell to approve the Resolution. MOTION carried with Dowell voting "aye", Cherry voting "aye" and McCasland voting "aye". A copy is attached.

Christopher Birch, Quay County Detention Center Administrator, requested approval of an Agreement between Securus Technologies Master Services Agreement and Quay County for the Call Management System. A MOTION was made by Sue Dowell, SECONDED by Mike Cherry to approve the Agreement. MOTION carried with Dowell voting "aye", Cherry voting "aye" and McCasland voting "aye". A copy is attached.

Andrea Shafer, Quay County DWI Coordinator requested approval of the following items:

1. FY 2019-2020 Resolution No. 42; Authorizing the County to Submit an Application to the Department of Finance and Administration, Local Government Division to Participate in the Local DWI Grant and Distribution Program. A MOTION was made by Sue

Dowell, SECONDED by Mike Cherry to approve Resolution No. 42. MOTION carried with Dowell voting "aye", Cherry voting "aye" and McCasland voting "aye". A copy is attached.

2. Requested approval of the Quay County DWI Program and NM Department of Finance/DWI Program Memorandum of Understanding. A MOTION was made by Sue Dowell, SECONDED by Mike Cherry to approve the MOU as presented. MOTION carried with Cherry voting "aye", Dowell voting "aye" and McCasland voting "aye". A copy is attached.
3. Requested approval of Statement of Assurances Local DWI Grant and Distribution Program. A MOTION was made by Sue Dowell, SECONDED by Mike Cherry to approve the MOU as presented. MOTION carried with Cherry voting "aye", Dowell voting "aye" and McCasland voting "aye". A copy is attached.

Ellen White, Quay County Clerk requested approval of Amended FY 2018-2019 Resolution No. 42; Designating Polling Places for all Statewide Elections. White said the amendment is to re-establish traditional polling places in Precinct 2- Forrest Fire Station and Precinct 4-Nara Visa Community Center. In July, 2019 those two Precincts were designated as Mail Ballot Precincts. Following the Local Election, and those Precincts utilizing the Mail Ballot Process, White stated she received numerous calls from residents in those areas asking for their locations to be re-activated for various reasons and concerns. White communicated those concerns to the NM Secretary of State and received permission to move forward with amending this Resolution. A MOTION was made by Sue Dowell, SECONDED by Mike Cherry to approve the Amended Resolution. MOTION carried with Dowell voting "aye", Cherry voting "aye" and McCasland voting "aye". A copy is attached. Final approval of the amendment will be at the discretion of the New Mexico Secretary of State.

Lucas Bugg, Quay County Fire Marshall requested approval of the following Departments PERA Applications:

Rural Fire #1; Rural Fire #2; Rural Fire #3; Quay Fire #4; Bard-Endee Fire; Forrest Fire; Porter Fire

A MOTION was made by Mike Cherry, SECONDED by Franklin McCasland to accept each Departments PERA Application. MOTION carried with McCasland voting "aye", Cherry voting "aye", and Dowell voting "aye" with the exception of Rural Fire #3 to which Commissioner Dowell "abstained". Copies are attached.

Daniel Zamora, Quay County Emergency Management Coordinator requested approval of the NM Department of Finance Admin. First Amendment to Intergovernmental Grant Agreement Number 2019-3410-ZD5037-01018. Zamora explained this Amendment allocates an additional \$10,973.60 to assist with the 2020 Census Count in Quay County. A MOTION was made by Sue Dowell, SECONDED by Mike Cherry to approve said Amendment. MOTION carried with Cherry voting "aye", Dowell voting "aye" and McCasland voting "aye". A copy is attached.

Quay County Manager, Richard Primrose recognized Daniel Zamora for recently being named New Mexico Emergency Manager of the Year. Primrose stated Zamora's work is appreciated and respected throughout the State.

Chairman McCasland requested a ten minute break. Time noted 10:45 a.m. Regular Session resumed at 10:55 a.m.

Larry Moore, Quay County Road Superintendent, requested approval of the following items:

1. FY 2019-2020 Resolution No. 39; 2020 Certified County Maintained Mileage Report containing 1108.04 miles. A MOTION was made by Mike Cherry, SECONDED by Sue Dowell to approve the Resolution and Report. MOTION carried with Cherry voting "aye", Dowell voting "aye" and McCasland voting "aye". A copy of the Resolution and Report are attached. The map will be filed for record in the Quay County Clerk's Office.
2. Requested approval of the LGRF Proposed Projects for 2020-2021. The CAP and Co-Op Project will be 1.155 miles of Quay Road AF. The School Bus Projects will be 5 miles along Quay Roads 60, 64, M, O & Q. A MOTION was made by Mike Cherry, SECONDED by Sue Dowell to approve the projects being submitted. MOTION carried with Cherry voting "aye", Dowell voting "aye" and McCasland voting "aye".

Moore gave the following report:

1. Blade Reports were distributed.
2. The crews will begin the remaining 4.5 miles of Quay Road BH this week.

Primrose stated he received thanks from LaDonna Chacon for work recently performed on a road in her area.

Commissioner Dowell expressed her concern for the ongoing dangerous traffic situation on U.S. Highway 54 where it intersects with Quay Road AI. Dowell asked former Road Superintendent, Harry Heckendorn, who lives near that intersection, to speak to those concerns. Heckendorn said the traffic on Quay Road AI continues to become a hazard with semi and tourists utilizing it for access between U.S. Hwy 54 and Interstate 40. Dowell said she would like Quay County to reinitiate the conversation with the New Mexico Department of Transportation to study this problem and for Quay County to offer any assistance to be part of the solution. Chairman McCasland suggested the County draft a Resolution addressing their concerns and ideas for a solution and present it at the NMDOT next regularly scheduled meeting.

Richard Primrose, Quay County Manager requested approval to advertise and begin the process to amend Ordinances No. 6 and No. 19; reauthorizing the dedication of the Gross Receipts Tax implemented by these two Ordinances. Primrose explained the Legislature de-earmarked these taxes so entities could utilize them in their general fund as deemed appropriate. Primrose has worked closely with the Department of Finance to ensure amending the Ordinances are the correct process. The notices to amend must be published in the Quay County Sun on March 11 and approved before March 31 to be delivered to the Department of Finance prior to the April 1 deadline. A MOTION was made by Sue Dowell, SECONDED by Mike Cherry to approve

proceeding with the steps to amend Ordinances No. 6 and 19. MOTION carried with Cherry voting “aye”, Dowell voting “aye” and McCasland voting “aye”.

Primrose asked for the Commissioner to reschedule the originally scheduled meeting set for Monday, March 23 to a date after the 25th and before the 31st to meet the deadlines regarding these two Ordinances being amended. A MOTION was made by Sue Dowell, SECONDED by Mike Cherry to move the meeting from March 23 to 9:00 a.m. on March 27, 2020. MOTION carried with Cherry voting “aye”, Dowell voting “aye” and McCasland voting “aye”.

Primrose asked the Commission to approve Alida Brown as the Quay County Representative to the City of Tucumcari Library Advisory Board. A MOTION was made by Mike Cherry, SECONDED by Sue Dowell to approve Alida Brown. MOTION carried with Dowell voting “aye”, Cherry voting “aye” and McCasland voting “aye”.

Primrose provided the following correspondence:

1. Guadalupe County Pesticide Applicator CEU Workshop scheduled for March 17, 2020 at 3:00 p.m. at the Blue Hole Convention Center in Santa Rosa.
2. Bull Production Workshop scheduled for March 13, 2020 at 5:30 p.m. at the Quay County Fair Barn.
3. PERA Representatives will be at the Tucumcari Convention Center on March 19th from 10:00 a.m. – 2:00 p.m. and at the Logan Civic Center on March 18th.

A MOTION was made by Sue Dowell SECONDED by Mike Cherry to approve the expenditures included in the Accounts Payable Report ending March 5, 2020. MOTION carried with Dowell voting “aye”, Cherry voting “aye” and McCasland voting “aye”.

Other Quay County Business That May Arise during the Commission Meeting and/or comments from the Commissioners:

Commissioner Cherry offered congratulations and best wishes to the local basketball teams entering state competition.

A MOTION was made by Mike Cherry, Seconded by Sue Dowell to go into Executive Session pursuant to Section 10-15-1(H)7 pertaining to Threatened or Pending Litigation and Section 10-15-1(H)8 pertaining to the Discussion of the Purchase, Acquisition or Disposal of Real Property or Water Rights. MOTION carried with Cherry voting “aye”, Dowell voting “aye” and McCasland voting “aye”. Time noted 11:25 a.m.

---Executive Session---

Return to regular session. Time noted 11:40 a.m.

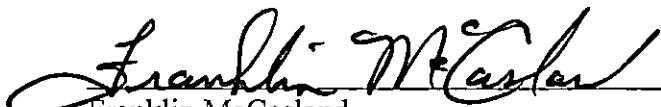
A MOTION was made by Mike Cherry, SECONDED by Sue Dowell that only the above described items were discussed in Executive Session. MOTION carried with Dowell voting "aye", Cherry voting "aye" and McCasland voting "aye".


Chairman McCasland noted No Action as a result of the Executive Session will be taken.

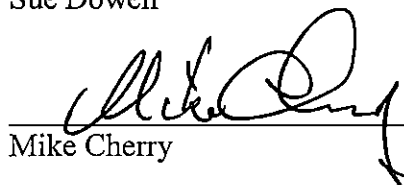
There being no further business, a MOTION was made by Mike Cherry SECONDED by Sue Dowell to adjourn. MOTION carried with Cherry voting "aye", Dowell voting "aye" and McCasland voting "aye". Time noted 11:45 a.m.

Respectfully submitted by Ellen White, County Clerk.

BOARD OF QUAY COUNTY COMMISSIONERS


Franklin McCasland


Sue Dowell


Mike Cherry



Ellen L. White, County Clerk

**QUAY COUNTY
FISCAL YEAR 2019-2020
RESOLUTION NO. 40**

**A RESOLUTION DECLARING OPPOSITION TO
THE EXTREME RISK PROTECTION ORDER ACT**

WHEREAS, The Board of County Commissioners of Quay County and its chief law enforcement official, the Quay County Sheriff, have long recognized the necessity of the right to bear arms for citizens to protect themselves and their property; and

WHEREAS, at its regular meeting on February 11, 2019, the Board of County Commissioners of Quay County, with the support of the Quay County Sheriff, declared Quay County to be a Second Amendment Sanctuary County and recognized the Quay County Sheriff's right, in the exercise of his sound discretion, to prioritize the law enforcement duties of the deputies assigned to his office and not to enforce any unconstitutional firearms law against any citizen; and

WHEREAS, the New Mexico Legislature has passed an Act titled *Extreme Risk Protection Order Act* that allows a District Court to issue an order for a person not to have "custody or control of, purchase, possess or receive or attempt to purchase or receive a firearm or ammunition" and to issue a search warrant to law enforcement for firearms and ammunition in the person's custody or control of persons who have committed no crime; and

WHEREAS, Quay County is a vast area of 2,882 square miles and has a population of more than 8,000 people; and

WHEREAS, the right to bear arms is essential to a citizen's ability to protect their personal safety, their family's safety, and their property; and

WHEREAS, the law does not provide sufficient due process, creates an additional burden on the already overworked District Courts, and creates a new responsibility that exposes law enforcement to additional dangers.

NOW THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Quay County that it declare its opposition to the Extreme Risk Protection Order Act.

BE IT FURTHER RESOLVED, that the County Manager communicate the Board's position to Quay County's legislators.

PASSED, APPROVED AND ADOPTED, this 9th day of March, 2020, by the Board of County Commissioners of Quay County in an open meeting in Tucumcari, New Mexico.

QUAY COUNTY BOARD OF COMMISSIONERS

The official seal of Quay County, New Mexico, is a circular emblem. It features a central sunburst design with the words "QUAY COUNTY" and "NEW MEXICO" around it. The outer ring of the seal contains the text "OFFICIAL SEAL, BOARD OF COUNTY COMMISSIONERS, QUAY COUNTY, NEW MEXICO".
Franklin McCasland
Franklin McCasland, Chairman

Sue Dowell
Sue Dowell, Member

Mike Cherry
Mike Cherry, Member

ATTEST:

Ellen White
Ellen White, County Clerk

QUAY COUNTY COMMISSION MEETINGATTENDANCE SHEETMARCH 9, 2020**PRINTED NAME****ADDRESS**

Rudy Hallgren	Tucumcari
Yvonne Messer	Tucumcari
Tracy Jim Johnson	Tucumcari
Renee Hayer	1302 E Main Tuc
Cynthia Lathrom	Tucumcari
Ned W. May	TUCUMCARI
Jan W. May	Logan, N.M.
GARY MASSEY	TUCUMCARI NM
Cody Massey	Tucumcari, NM
NIKE TAYLOR	TUC
Connie Leland	Tuc
Trendi Cox	Logan, NM
Richard Lopez	Tucumcari NM
Billy Jones	Tucum NM
Donald Rudy	Tuc N.M.
William Fowler	Tuc N.M.
Carmen Runyan	Tucumcari NM

9

QUAY COUNTY COMMISSION MEETING

ATTENDANCE SHEET

MARCH 9, 2020

PRINTED NAME

ADDRESS

Jefferson Byrd	Tucumcari,
Winona L Wallin	Quay
Francis H. Wallin	Quay
Kent + Viola Terry	Logan
Lynn Stael	Tucumcari
Jerry Stael	Tucumcari
Lupe Lacy	Quay/Logan
Paula Rael	Quay/Logan
Robert Cielli	Tucumcari
Kathy Elliott	Chms
Randy L. L. L.	Tucumcari
John Peterson	Bad, NM
Gwen GRAY	Quay
Rex GRAY	Quay
Becky Salter	Tucumcari
Fanny Sanders	Tuc —
Gail Sanders	Tuc —
Will A Sims	Tuc —
Rebbie Sims	Tuc —

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QUAY COUNTY COMMISSION MEETING

ATTENDANCE SHEET

MARCH 9, 2020

PRINTED NAME

ADDRESS

Donna Hawkins P.O. Box 757 101 Osage Dr. Logan, NM 88426

Jerry Hawkins P.O. Box 757, 101 Osage Dr. Logan, NM 88426

Janet Garcia 1788 QR 60 San Jon, NM 88434

Todd Peterson 6175 QR M Bard, NM 88411

Joe Corbett 3298 QR 37 McAlister 88427

Phillip Bx 2997 Qay Road 61 Tucumcari, NM 88401

Ron Warnick QC Sun

Deanna Doreen 802 Bass Alley Logan, NM 88426

Pat Casson 303 Sunrise Blvd Logan, NM 88426

Bob Casson 303 Sunrise Blvd Logan, NM 88426

Margaret Collins 7176 Py Rd J San Jon 88434

Justin Powell 804 E Rankin Ave. Tuc. nm 88401

Debra Ware 3928 SR 469 Grady, NM 88420

Jimmy Ware 3928 SR 469 Grady NM. 88420

Matthew W. Kreeger 2012 South 8th Tucumcari NM 88401

Tim Rose 2507 S Shore Dr. Logan NM 88426

Clinic/Program Name: Quay County Family Health Center
Month Reported: February 2020

Monthly RPHCA Narrative Report

Please provide brief but detailed information for the following questions. Answer all questions or mark N/A.

- 1. Please describe any changes in the types of services provided during the month reported. Describe any discussions about adding new services**

Diabetic Retina View camera was done for a period of about 7 days. Clinical staff are focusing on improving patients A1C scores.
UNM Student Nurse is conducting his rotation; getting plenty of positive feedback from the patients regarding this patient.

- 2. Please describe any difficulties encountered in providing services during the month reported. What were the causes of the difficulties?**

Staff PTO, Holidays and shorter month resulted in fewer encounters this month.

- 3. Were there any changes in the encounters (+ or - 10%) from the previous month reported? Please explain any causes for the changes.**

Encounters are below the monthly goal, this month was lower due to PTO request, holidays and shorter month.

- 4. Please describe any changes in the staffing pattern (regardless of the position or the change in FTE).**

Both TOC MAs resigned, Certified MA transferring to TOC status in April. New certified MA is selected and currently going through the hiring process.

- 5. Please describe recruitment efforts for any positions. Which positions? What actions have been taken?**

PMS website, Clinic Community Board and local Quay Co Jobs FB page.

- 6. Were there any changes to the hours? Explain.**

No changes were made. Hours continue to be 7:00 AM – 5:30 PM, Monday through Friday.

- 7. What efforts did you make to collaborate with local and statewide entities?**

- Quay Co Commissioner Meeting
- Mesalands Community College – Maze of Life Event planning
- Harding Co Health Council – Spring Health Fair Event planning
- CYFD – Child Abuse Awareness Event planning

8. **Please describe any methods for increasing clinic utilization that your program and staff are engaging in.**

Site continues to provide care at the Quay County Detention Center.

9. **Please describe the outreach activities your program and staff provided to the community during the month reported.**

Senior Center visits

10. **Have you received any new funding? Are you aware of any new funding opportunities? Please describe any new initiatives or projects that have been implemented.**

None

Please note the date of the last advisory board meeting AND THE AGENDA ITEMS DISCUSSED.

Meeting was held on December 4, 2019

Welcome and Introductions

Regional Goals

- Advocacy for Health Center Funding
- Dental Access
- Community Outreach
- Behavioral Risk Factor Surveillance Systems

Clinic Update

- Update from JCO visit
- Diabetic Eye Camera
- PIP Updates

Home Visiting Update

- Enrolled Clients
- Outreach Events

Municipality/County: Quay County

Contact Name: Heather Pacheco Contact Title: Administrative Assistant

Contact Phone Number: 575-461-2720 Contact Email: heather.pacheco@quaycounty-nm.gov

**APPLICATION FOR LAW ENFORCEMENT PROTECTION FUNDS
FOR MUNICIPALITIES AND COUNTIES
PURSUANT TO CHAPTER 29, ARTICLE 13 NMSA 1978
FOR THE JULY 1, 2020 - JUNE 30, 2021 FISCAL YEAR**

SUPPLEMENTAL SCHEDULE

Instructions: List the name, certificate number, and date of certification of all full-time police officers and sheriff deputies certified by the Department of Public Safety (DPS), New Mexico Police Academy pursuant to Section 29-7-8 NMSA 1978 or authorized to act as a New Mexico peace officer pursuant to Section 29-1-11 NMSA 1978. Please photocopy this form if additional space is needed.

Name of Full-Time Certified Police Officers and Sheriff Deputies	Certificate Number	Cert. Date
1) Russell Shafer	15-0077-P	05/19/05
2) Dennis Garcia	04-9246-P	09/17/04
3) Larry Cooksey	88-0195-P	09/15/88
4) Richard Huffman	05-0065-P	05/19/05
5) Rudy Vallejo	17-0249-P	10/27/17
6) Tyler Davis	17-0059-P	05/18/17
7)		
8)		
9)		
10)		
11)		
12)		
13)		
14)		
15)		
16)		
17)		
18)		
19)		
20)		
21)		
22)		

NOTE: Please use name as reported to DPS, e.g. If an officer has changed his/her last name and change has not been reported to DPS.

Municipality*: Quay County

**ITEMIZED SCHEDULE
FOR SECTION III.A ON PAGE ONE OF APPLICATION**

*** [NOTE: This schedule only pertains to municipalities with a Population of 1500 or less and universities.]**

CATEGORY	# OF ITEMS	ESTIMATED COST
EQUIPMENT:		
Subtotal		\$
APPARATUS:		
Subtotal		\$
Repair of Equipment:		
Subtotal		\$
GRAND TOTAL (Must equal total of Section III.A of Page One)		\$

For allowable expenditures, see Section 29-13-7 NMSA 1978 and LEPP Rule 2 NMAC 110.3.8A and 110.3.8B.

Samples of "Equipment" descriptions are: police vehicle, vehicle dashboard computer, police radios, surveillance equipment, finger printing kits, etc.

Samples of "Apparatus" descriptions are: guns & holsters, uniforms, badges, ammunition, protective vests for police officers, protective vests for police dogs, etc.

For unallowable expenditures, see LEPP Rule 2 NMAC 110.3.8C. [For example, operating expenses, routine vehicle maintenance, and furniture are unallowable.]



2019 Annual Service Delivery Report
Main Street America Accredited Program: Tucumcari MainStreet



Technical Assistance Services Requested of New Mexico MainStreet

Market Value

Organization: 1. Assistance with Executive Director transition and hiring process · Board development support <i>· Included two site-visits and off-site work in 2019 by one NMMS Revitalization Specialist at market value plus expenses</i>		\$2,000
Economic Vitality (Creative Economy): 1. Creative economy work with organization and community, including development of creative economy projects to be implemented in coordination with NMMS Fall Leadership Network Meeting and educational presentations on the creative economy to the local organization, community leaders and other individuals engaging in economic development work · Community demographic analysis <i>· Included two site-visits and off-site work in 2019 by two NMMS Revitalization Specialist at market value plus expenses</i>		\$3,000
2. Development of historical/cultural trivia interactive experience <i>· Included three site-visits and off-site work in 2019 by one NMMS Revitalization Specialist at market value plus expenses</i>		\$5,000
3. Walking Tour "App" including development of the app and information research on six historic sites and their "stories" <i>· Included three site-visits and off-site work in 2019 by one NMMS Revitalization Specialist at market value plus expenses</i>		\$10,000
4. Development of storytelling wayfinding project to visit and engage with six sites in the downtown district <i>· Included three site-visits and off-site work in 2019 by one NMMS Revitalization Specialist at market value plus expenses</i>		\$5,000
5. Activation of six district business storefronts with student art from Mesalands College <i>· Included three site-visits and off-site work in 2019 by one NMMS Revitalization Specialist at market value plus expenses</i>		\$1,500
6. Art in the park event, featuring art installations, interactive art and food trucks <i>· Included three site-visits and off-site work in 2019 by one NMMS Revitalization Specialist at market value plus expenses</i>		\$5,000
7. Development of "pop up" tool kit, an equipment list to activate the breezeway with a strategy for income through equipment rental, etc. <i>· Included three site-visits and off-site work in 2019 by one NMMS Revitalization Specialist at market value plus expenses</i>		\$500
Economic Vitality (Property Redevelopment): 1. Technical assistance and guidance on utilizing the local vacant property ordinance and the MRA to develop public-private partnerships <i>· Included one site-visit and off-site work in 2019 by one NMMS Revitalization Specialist at market value plus expenses</i>		\$3,000
2. Assessment of district property for potential second story redevelopment · Completion of three property inventories and related pre-feasibility plans <i>· Included one site-visit and off-site work in 2019 by one NMMS Revitalization Specialist at market value plus expenses</i>		\$3,000
Design: 1. Assessment and recommendations for addressing building deterioration, including a roof leak and concrete arches in the courtyard <i>· Included two site-visits and off-site work in 2019 by one NMMS Revitalization Specialist at market value plus expenses</i>		\$1,500
New Mexico MainStreet Capital Outlay Public Infrastructure Grant Great Blocks on MainStreet Phase 1 Construction		\$600,000
New Mexico MainStreet Professional Development Institutes Attended by Tucumcari MainStreet Staff & Board New Executive Director Orientation (Half Day) Volunteer Development Training Session (Half Day) Project & Event Management Training Session (Half Day)		\$500 \$500 \$500
New Mexico MainStreet Network Services Per Community Local Organization Annual Program Review, Site Visit & Report NMMS Leadership Network Meetings (3)* NMMS Online Presence & Marketing (Store Website · Off the Road Website · Digital Dashboard · Facebook · YouTube · Instagram · Twitter · Flickr) NMMS Monthly E-newsletter NMMS Annual Report, Awards Program & Other Brochures National Main Street Center Network "Main Street America" Membership Fees		\$2,800 \$12,000 \$9,250 \$150 \$350 \$350
Total New Mexico MainStreet Services Utilized in 2019		\$659,900



*Price is per person in attendance from each community



Equipment Use Agreement

This agreement is to establish the terms of the use of an AM radio transmitting device (the "device") and is hereby entered into on this date (the "Effective Date") 3/9/2020 by Quay Co. Govt. (the "Participant") and Tracy Johnson (the "Committee Chair").

Participant:

Name

Quay County Govt.

Business Name

30NS 3rd

Address Line 1

PO Box 1246

Address Line 2

Tucumcari, NM 88401

Telephone

505 461 2112

Committee Chair:

Name

Tracy Johnson

Business Name

Address Line 1

1902 S 10th St

Address Line 2

Tucumcari, NM 88401

Telephone

505-503-3636

The Participant and Committee Chair agree to the following terms and conditions:

Agreement Period

1. This Agreement shall commence upon the Effective Date, as stated above, and will continue until 3/8/2021 (the "Agreement Period").
2. This agreement shall automatically renew on a yearly basis unless terminated by either party upon 30 (thirty) days written notice to the other party.

Participant

1. Participant agrees to the placement of one Device for the purpose of the Tucumcari Talking Tour project in a secure location with access to an electrical outlet nearby. The Device should be placed in a location high upon a shelf or other suitable location where risks of damage and/or theft would be at a minimum.
2. Participant agrees to leave the Device powered on and transmitting 24 hours per day/365 days per year.
3. Participant agrees to verify on a daily/weekly basis that the Device is transmitting properly and to notify the Committee Chair within 24 hours should the Device fail to transmit.
4. Participant agrees to place the Device in a safe, secure location.
5. Participant understands they will be charged \$250.00 if the Device is stolen or damaged due to neglect on the part of the Participant.
6. Participant agrees to place a Tucumcari's Talking Tour sign in a conspicuous location that can be seen by the motoring public.
7. Participant agrees to provide Committee Chair with a written script of approximately 300 words (approximately two-minutes in recording length) showcasing the history of the building or the business. Participant may include up to an additional 25 words to offer a promotional item or discount.
8. Participant understands that at the end of each message will be an ask for donations to help fund the Tucumcari Lights Grant program.

Committee Chair

1. Committee Chair agrees to place one Device in the above named place of business for the purpose of the Tucumcari Talking Tour project at no cost to Participant.
2. Committee Chair agrees to provide Participant with a Tucumcari's Talking Tour window sign.
3. Committee Chair agrees to record, or have recorded, Participant's message on Device.
4. Committee Chair agrees to repair or replace, at Committee Chair's discretion, the Device should the Device fail to transmit.

Obligations

1. The Committee Chair will use the Device in a proper manner, complying with all applicable laws and ordinances which may in any way relate to the possession or use of the Device.
2. The Participant will assume all risks of loss or damage caused by the Device.
3. At the end of the Agreement Period, the Participant will return the Device to the Committee Chair in good condition, normal wear from proper usage excepted.
4. The return of the device shall be at the Participant's expense to the address of the Committee Chair as provided.

Liability

1. The Device shall at all times remain the property of the Committee Chair.
2. The Participant shall defend, indemnify, and hold harmless the Committee Chair, the Tucumcari Mainstreet, and the City of Tucumcari and its councilors, officers, employees and agents from and against all claims, liabilities, losses, damages and expenses, including legal fees and costs, resulting from or related to the performance of this Agreement, except to the extent these are solely caused by the Committee Chair, Tucumcari Mainstreet, or City of Tucumcari's gross negligence or willful misconduct.
3. This agreement will be governed under the jurisdiction of the state of New Mexico.
4. The Participant's obligations under this Agreement may not be assigned, delegated, or transferred, in whole or in part, without the Committee Chair's prior written consent. This Agreement is not for the benefit of any third party, including any employee, contractor or other party.
5. This Agreement is executed in and shall be governed by and construed in accordance with the laws of the State of New Mexico without regard to its choice of law principles, which shall be the forum for any lawsuits arising under the Agreement or incident thereto. The parties stipulate that venue is proper in a court of competent jurisdiction in Quay County, New Mexico and each party waives any objection to such venue. The Committee Chair does not and will not agree to binding arbitration of any disputes.
6. This Agreement may be amended only by a written document signed by both parties.
7. This Agreement constitutes the entire agreement between the parties and supersedes all previous agreements or understandings.
8. This Agreement shall become effective on the Effective Date or when signed and dated by the Committee Chair, whichever is later.
9. The undersigned individual represents that s/he has authority to bind the Participant to this Agreement and has read and understands the terms of this Agreement.

The undersigned have read this agreement and consent to abide by its terms therein:

Participant/Business: Quay County Govt.

Committee Chair: Tracy Johnson

Name of Signatory: Franklin McCasland

Name of Signatory: _____

Signature: Franklin McCasland

Signature: Tracy Johnson

Date: 3/9/2020

Date: 3/9/20

Quay County
FY 2019-2020
Resolution No. 41

**RESOLUTION AUTHORIZING INVESTMENT OF
MONIES IN LOCAL SHORT-TERM INVESTMENT FUND**

WHEREAS, LOCAL PUBLIC BODIES IN NEW MEXICO ARE AUTHORIZED TO PARTICIPATE IN THE LOCAL SHORT-TERM INVESTMENT FUND, ESTABLISHED PURSUANT TO SECTION 6-10-10-10.1 NMSA 1978, AND OPERATED BY THE NEW MEXICO STATE TREASURER; AND

WHEREAS, Quay County, NM DESIRES TO PARTICIPATE IN THE SHORT-TERM INVESTMENTS FUND;

NOW THEREFORE, BE IT RESOLVED THAT THE Treasurer FOR AND ON BEHALF OF Quay County, NM AUTHORIZES THE DEPOSIT AND WITHDRAWAL OF MONIES IN THE LOCAL SHORT-TERM INVESTMENT FUND OPERATED BY THE STATE TREASURER.

TWO SIGNATURES REQUIRED ON ALL TRANSACTIONS

BE IT FURTHER RESOLVED THAT THE FOLLOWING OFFICERS OR THEIR SUCCESSORS ARE AUTHORIZED TO ORDER THE DEPOSIT OR WITHDRAWAL OF MONIES IN THE LOCAL SHORT-TERM INVESTMENT FUND UNTIL THIS AUTHORITY IS REVOKED BY ACTION OF THE Treasurer AND WRITTEN NOTICE OF SUCH ACTION IS RECEIVED BY THE STATE TREASURER.

Treasurer Patsy Gresham
TITLE NAME

Patsy Gresham
SIGNATURE

Chief Deputy Treasurer Albenita Rael
TITLE NAME

Albenita Rael
SIGNATURE

Commission Chairman Franklin McCasland
TITLE NAME

Franklin McCasland
SIGNATURE

PASSED AND ADOPTED BY THE Quay County Commission

STATE OF NEW MEXICO, ON March 9, 2020

New Mexico Local Government Investment Pool (LGIP) deposits are not guaranteed or insured by any bank, the State of New Mexico, the Federal Deposit Insurance Corporation, the Federal Reserve Board, or any other agency. New Mexico LGIP deposits involve certain investment risks. Yield and total return may fluctuate and are not guaranteed.



New Mexico State Treasurer's Office
Local Government Investment Pool (LGIP)

APPLICATION

NOTE: Retain a copy of this document for your records. Any modification shall be in writing by execution of an Update Account Information form received by the New Mexico State Treasurer's office.

ACCOUNT REGISTRATION

The account shall be registered as follow:

Name of local public entity: Quay County, New Mexico

Title of account: Quay County LGIP Account

Type of Organization ☐ City/Town/Village ☒ County ☐ School ☐ Quasi Gov't Agency ☐ Judicial
☐ Special District ☐ Pueblo/Tribe ☐ University/College ☐ Other _____

Entity's Contact Person: Patsy Gresham

Telephone Number: (575) 461-0470

Fax Number: (575) 461-8465

Email Address: patsy.gresham@quaycounty-nm.gov

Mailing Address: P.O. Box 1226, 300 S. 3rd St.

Tucumcari, NM 88401

Please select how monthly investment earnings on the account should be handled:

☒ Reinvest ☐ Disburse via ACH

Banking information (your bank can assist you with this information):

Name and address of Bank AimBank
101 E. Rt.66 Blvd.
Tucumcari, NM 88401

1022 0104 0

Bank ABA Routing Number

343331

Entity's Bank Account Number

I certify that the above information is correct to the best of my knowledge

Patsy Gresham

Print Name

*Authorized Signature

3/9/20

Date

**Only individuals who are listed on the Certification of Authorized Persons form are allowed to submit an application.*

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For LGIP use ONLY

STO # _____

New Mexico LGIP Bureau Chief

Date

Revised 10/20/13



CERTIFICATION OF AUTHORIZED PERSONS

NOTE: Retain a copy of this document for your records. Any modification shall be in writing. This document is in full force and in effect until revoked in whole in writing or amended by execution of a superseding certification received by the New Mexico State Treasurer's Office.

Date 2/6/20 ☒ New ☐ Supersedes certification ☐ Revocation of Authority

Name of local public entity: Quay County, New Mexico

Title of account(s): Quay County LGIP Account STO #(s) _____

The following named persons are officers or other authorized signatories of the above denoted public entity and is/are authorized to act with full power to redeem investment in the Local Government Investment Pool (LGIP) and to execute and deliver any instrument necessary to effectuate the authority hereby conferred:

<u>NAME</u>	<u>TITLE</u>	<u>SPECIMEN SIGNATURE</u>	Information Only
<u>Patsy Gresham</u>	<u>Treasurer</u>	_____	<input type="checkbox"/>
<u>Albenita Rael</u>	<u>Chief Deputy Treasurer</u>	_____	<input type="checkbox"/>
<u>Franklin McCasland</u>	<u>Commission Chairman2</u>	<u>Franklin McCasland</u>	<input type="checkbox"/>
<u>Heather Maggi</u>	<u>Deputy Treasurer</u>	_____	<input checked="" type="checkbox"/>
<u>Richard Primrose</u>	<u>County Manager</u>	_____	<input checked="" type="checkbox"/>

2 *Number of Authorized Signatures required per investment transaction (REQUIRED)*

The New Mexico State Treasurer may, without further inquiry, act upon the oral instruction of ANY PERSON(s) purporting to be authorized person(s) named in the Certification Form last received by the State Treasurer's Office. The State Treasurer shall not be liable for any claims, expenses (including legal fees), or losses resulting from any good faith act or failure to act by the State Treasurer, his agents or employees.

CERTIFYING BANK OFFICER*

-OR-

(Seal)

NEW MEXICO NOTARY SIGNATURE

* Signatures must be guaranteed by a commercial bank or trust company or by a member of a National Securities Exchange.

New Mexico Local Government Investment Pool (LGIP) deposits are not guaranteed or insured by any bank, the State of New Mexico, the Federal Deposit Insurance Corporation, the Federal Reserve Board, or any other agency. New Mexico LGIP deposits involve certain investment risk. Yield and total return may fluctuate and are not guaranteed.

For LGIP use ONLY

Date Received _____ Application submitted herewith or on file? ☐ Yes ☐ No
Wire information complete? ☐ Yes ☐ No Application accepted? ☐ Yes ☐ No

New Mexico LGIP Bureau Chief

Date

**Master Services Agreement
Quay County Detention Center (NM)**

This Master Services Agreement (this "Agreement") is by and between the Quay County Detention Center ("you" or "Customer") and Securus Technologies, Inc., ("we," "us," or "Provider"). This Agreement supersedes any and all other agreements (oral, written, or otherwise) that may have been made between the parties and will be effective as of the last date signed by either party (the "Effective Date").

Whereas, the Customer desires and Provider agrees that Provider will install an inmate telecommunication system and will provide telecommunications and maintenance services according to the terms and conditions set forth herein and in the attached Schedule(s) and Statement of Work, which are incorporated by reference;

Now therefore, in consideration of the mutual promises and covenants contained herein, the parties agree as follows:

1. Applications. This Agreement specifies the general terms and conditions under which we will provide certain inmate-related services and applications (the "Application(s)") to you. Additional terms and conditions with respect to the Applications will be specified in the schedules entered into by the parties and attached hereto (the "Schedules"). The Schedules are incorporated into this Agreement and are subject to the terms and conditions of this Agreement. In the event of any conflict between this Agreement and a Schedule, the terms of the Schedule will govern. In the event of any conflict between any two Schedules for a particular Application, the latest in time will govern.

2. Use of Applications. You grant us the exclusive right and license to install, maintain, and derive revenue from the Applications through our inmate systems (including, without limitation, the related hardware and software) (the "System") located in and around the inmate confinement facility or facilities identified in the Schedule (the "Facility" or "Facilities"). You are responsible for the manner in which you and your respective users use the Applications. Unless expressly permitted by a Schedule or separate written agreement with us, you will not resell the Applications or provide access to the Applications (other than as expressly provided in a particular Schedule), directly or indirectly, to third parties. During the term of this Agreement and subject to the remaining terms and conditions of this Agreement, Provider will be the sole and exclusive provider of existing and any future inmate-related communications, whether fixed, mobile or otherwise, including but not limited to voice, video, and data (e.g., phone calls, video calls, messaging, prepaid calling cards, debit calling, and e-mail) and inmate software applications (e.g., automated grievance filing system, law library, etc.) at all existing and future correctional facilities under the authority of Customer and in lieu of any other third party providing such inmate communications, including without limitation, Customer's employees, agents, or subcontractors.

3. Compensation. Compensation for each Application, if any, and the applicable payment addresses are as stated in the Schedules.

4. Term. The initial term of this Agreement (the "Initial Term") will begin on the Effective Date and will end on March 18, 2025. Notwithstanding anything to the contrary, the terms and conditions of this Agreement will continue to apply to each Schedule for so long as we continue to provide the Application to you after the expiration or earlier termination of this Agreement..

5. Service Level Agreement and Limited Remedy. We are committed to providing you with reliable, high quality Applications, and we offer certain assurances about the quality of our Applications (the "Service Level Agreement"). The Service Level Agreement for each Application is as set forth in the applicable Schedule. THE SERVICE LEVEL AGREEMENT SETS FORTH THE SOLE AND EXCLUSIVE REMEDIES FOR FAILURE OR DEFECT OF AN APPLICATION. WE DISCLAIM ALL WARRANTIES, EXPRESS OR IMPLIED, INCLUDING THE WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE, ANY IMPLIED WARRANTY ARISING FROM A COURSE OF DEALING OR USAGE OF TRADE, AND NONINFRINGEMENT.

6. Software License. We grant you a personal, non-exclusive, non-transferable license (without the right to sublicense) to access and use certain proprietary computer software products and materials in connection with the Applications (the "Software"). In connection therewith, Customer represents that (i) it will be responsible for distributing and assigning licenses to its end users, and (ii) it will monitor and ensure that its licensed end users comply with all Provider Use Terms and Conditions and as directed herein. The Software includes any upgrades, modifications, updates, and additions to existing features that we implement in our discretion (the "Updates"). Updates do not include additional features and significant enhancements to existing features. You are the license holder of any third-party software products we obtain on your behalf. You authorize us to provide or preinstall the third-party software and agree that we may agree to the third-party End User License Agreements on your behalf. Your rights to use any third-party software product that we provide will be limited by the terms of the underlying license that we obtained for such product. The Software is to be used solely for your internal business purposes in connection with the Applications at the Facilities. You will not (i) permit any parent, subsidiary, affiliated entity, or third party to use the Software, (ii) assign, sublicense, lease, encumber, or otherwise transfer

or attempt to transfer the Software or any portion thereof, (iii) process or permit to be processed any data of any other party with the Software, (iv) alter, maintain, enhance, disassemble, decompile, reverse engineer or otherwise modify the Software or allow any third party to do so, (v) connect the Software to any products that we did not furnish or approve in writing, or (vi) ship, transfer, or export the Software into any country, or use the Software in any manner prohibited by the export laws of the United States. We are not liable with regard to any Software that you use in a prohibited manner.

7. Ownership and Use. The System, the Applications, and related records, data, and information (excepting recorded communications and, if applicable, e-mails, for which you retain ownership) will at all times remain our sole and exclusive property unless prohibited by law, in which event, we will have the unlimited right to use such records, data, and information for investigative and law enforcement purposes. During the term of this Agreement and for a reasonable period of time thereafter, we will provide you with reasonable access to the records. We (or our licensors, if any) have and will retain all right, title, interest, and ownership in and to (i) the Software and any copies, custom versions, modifications, or updates of the Software, (ii) all related documentation, and (iii) any trade secrets, know-how, methodologies, and processes related to our Applications, the System, and our other products and services (the "Materials"). The Materials constitute proprietary information and trade secrets of Provider and its licensors, whether or not any portion thereof is or may be the subject of a valid copyright or patent.

8. Legality/Limited License Agreement. For services related to Applications which may allow you to monitor and record inmate or other administrative telephone calls, or transmit or receive inmate electronic messages ("e-mail"); by providing the Application, we make no representation or warranty as to the legality of recording or monitoring inmate or administrative telephone calls or transmitting or receiving inmate e-mail messages. Further, you retain custody and ownership of all recordings, and inmate e-mail messages; however you grant us a perpetual limited license to compile, store, and access recordings or inmate calls and access inmate e-mail messages for purposes of (i) complying with the requests of officials at the Facility, (ii) disclosing information to requesting law enforcement and correctional officials as they may require for investigative, penological or public safety purposes, (iii) performing billing and collection functions, or (iv) maintaining equipment and quality control purposes. This license does not apply to recordings of inmate calls or e-mail messages with their attorneys or to recordings or e-mail messages protected from disclosure by other applicable privileges.

9. Private Number Designation. We will provide you with the ability to designate certain numbers (for example, attorney or clergy numbers) as "Private" within our Secure Call Platform. Calls to numbers designated as Private will not be recorded by us. Although we will maintain your Private list within our Secure Call Platform, you acknowledge and agree that you will have the sole discretion, authority, and responsibility for designating numbers as Private, and that we have no discretion, authority, or responsibility for making such designations, unless done so at your instruction. Further, to the fullest extent allowed by applicable law, you and/or your employees, agents, or contractors agree to be responsible for any loss, cost, claim, liability, damage, and expense (including, without limitation, reasonable attorney's fees and expenses) arising out of the recording or monitoring of calls to numbers that should have been, but were not, designated by you as Private.

10. Confidentiality and Non-Disclosure. The System, Applications, and related call records and information (the "Confidential Information") will at all times remain confidential to Provider. Customer understands and acknowledges that Provider, as a common carrier, is required by Section 222 of the Communications Act of 1934, as amended, 47 U.S.C. Section 222, to maintain the confidentiality of "Customer Proprietary Network Information", or "CPNI", which protects from disclosure consumers' sensitive personal information (including phone numbers called by a consumer; the frequency, duration, and timing of such calls; and any services purchased by the consumer). Customer understands and acknowledges that such Confidential Information may be exempt from public disclosure and you agree that you will not disclose such Confidential Information to any third party without our prior written consent. Because you will be able to access confidential information of third parties that is protected by certain federal and state privacy laws through the Software and Applications, you will only access the Software with computer systems that have effective firewall and anti-virus protection. Moreover, you acknowledge that the contents of this contract constitute proprietary trade secrets and represent that you have not disclosed the terms and conditions of this Agreement to anyone outside of your organization save your legal representative. You warrant that you will keep the terms and conditions of this Agreement confidential and, unless required by court order or statute, will not disclose such information without Provider's express written consent (except that you may disclose the contents of this Agreement to your attorney or tax advisor, if any, but only after informing those persons that they must keep confidential the information contained herein). Before complying with any such court order or statute, you agree to notify Provider so that it may assert any rights to non-disclosure that it may have under the applicable law.

11. Claims. To the fullest extent allowed by applicable law, each party by itself and/or its employees, agents, or contractors agrees to be responsible for any loss, cost, claim, liability, damage, and expense (including, without limitation, reasonable attorney's fees and expenses) (collectively "Claims") arising out of (i) a breach of its own representations, warranties, and/or covenants contained herein, or (ii) gross negligence or willful misconduct, or (iii) actual or alleged intellectual property infringement.

Furthermore, the parties understand and agree that each one is subject to federal, state, and local laws and regulations, and each party bears the burden of its own compliance. Provider agrees to install and implement the Inmate Telephone System according to the law governing Provider, the instruction it receives from Customer as to Customer's requirements under the law, and the Facility's demographics. Customer agrees to indemnify Provider against any and all Claims arising out of or related to instruction Provider receives from Customer.

12. Insurance. We maintain comprehensive general liability insurance having limits of not less than \$2,000,000.00 in the aggregate. You agree to provide us with reasonable and timely written notice of any claim, demand, or cause of action made or brought against you arising out of or related to the utilization of the Applications and the System in which the Provider is brought in as a co-defendant in the Claim. We have the right to defend any such claim, demand, or cause of action at our sole cost and expense and within our sole and exclusive discretion. You agree not to compromise or settle any claim or cause of action arising out of or related to the use of the Applications or System without our prior written consent, and you are required to assist us with our defense of any such claim, demand, or cause of action.

13. Default and Termination. If either party defaults in the performance of any obligation under this Agreement, the non-defaulting party will give the defaulting party written notice of its default setting forth with specificity the nature of the default. If the defaulting party fails to cure its default within 30 days after receipt of the notice of default, the non-defaulting party will have the right to terminate this Agreement upon 30 days' written notice and to pursue all other remedies available to the non-defaulting party, either at law or in equity. Notwithstanding the foregoing, the 30 day cure period will be extended to 90 days if the default is not reasonably susceptible to cure within such 30 day period, but only if the defaulting party has begun to cure the default during the 30 day period and diligently pursues the cure of such default. Notwithstanding the foregoing, if Customer breaches its obligations in the section entitled "Software License" or the section entitled "Confidentiality", Provider will have the right to terminate this Agreement immediately.

14. Limitation of Liability. NOTWITHSTANDING ANYTHING TO THE CONTRARY IN THIS AGREEMENT, NEITHER PARTY WILL HAVE ANY LIABILITY FOR INDIRECT, INCIDENTAL, SPECIAL, OR CONSEQUENTIAL DAMAGES, LOSS OF PROFITS OR INCOME, LOST OR CORRUPTED DATA, OR LOSS OF USE OR OTHER BENEFITS, HOWSOEVER CAUSED AND EVEN IF DUE TO THE PARTY'S NEGLIGENCE, BREACH OF CONTRACT, OR OTHER FAULT, EVEN IF SUCH PARTY HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGES. OUR AGGREGATE LIABILITY TO YOU RELATING TO OR ARISING OUT OF THIS AGREEMENT, WHETHER IN CONTRACT, TORT OR OTHERWISE, WILL NOT EXCEED THE AMOUNT WE PAID YOU DURING THE 12 MONTH PERIOD BEFORE THE DATE THE CLAIM AROSE.

15. Uncontrollable Circumstance. We reserve the right to renegotiate or terminate this Agreement upon 60 days' advance written notice if circumstances outside our control related to the Facilities (including, without limitation, changes in rates, regulations, or operations mandated by law; material reduction in inmate population or capacity; material changes in jail policy or economic conditions; actions you take for security reasons (e.g., Lockdowns); or acts of God) negatively impact our business; however, we will not unreasonably exercise such right. Further, Customer acknowledges that Provider's provision of the services is subject to certain federal, state, or local regulatory requirements and restrictions that are subject to change from time-to-time and that nothing contained herein to the contrary will restrict Provider from taking any steps necessary to perform in compliance therewith.

16. Injunctive Relief. Both parties agree that a breach of any of the obligations set forth in the sections entitled "Software License," "Ownership and Use," and "Confidentiality" would irreparably damage and create undue hardships for the other party. Therefore, the non-breaching party will be entitled to immediate court ordered injunctive relief to stop any apparent breach of such sections, such remedy being in addition to any other remedies available to such non-breaching party.

17. Force Majeure. Either party may be excused from performance under this Agreement to the extent that performance is prevented by any act of God, war, civil disturbance, terrorism, strikes, supply or market, failure of a third party's performance, failure, fluctuation or non-availability of electrical power, heat, light, air conditioning or telecommunications equipment, other equipment failure or similar event beyond its reasonable control; provided, however that the affected party will use reasonable efforts to remove such causes of non-performance.

18. Notices. Any notice or demand made by either party under the terms of this Agreement or under any statute will be in writing and will be given by personal delivery; registered or certified U.S. mail, postage prepaid; or commercial courier delivery service, to the address below the party's signature below, or to such other address as a party may designate by written notice in compliance with this section. Notices will be deemed delivered as follows: personal delivery – upon receipt; U.S. mail – 5 days after deposit; and courier – when delivered as shown by courier records.

19. No Third-party Beneficiary Rights. The parties do not intend to create in any other individual or entity the status of a third-party beneficiary, and this Agreement will not be construed so as to create such status. The rights, duties, and obligations contained herein will operate only between the parties and will inure solely to their benefit. The provisions of this Agreement are intended to assist only the parties in determining and performing their obligations hereunder, and the parties intend and expressly agree that they alone will have any legal or equitable right to seek to enforce this Agreement, to seek any remedy arising out of a party's performance or failure to perform any term or condition of this Agreement, or to bring an action for the breach of this Agreement.

20. Miscellaneous. This Agreement will be governed by and construed in accordance with the laws of the state where the Facility is located. No waiver by either party of any event of default under this Agreement will operate as a waiver of any subsequent default under the terms of this Agreement. If any provision of this Agreement is held to be invalid or unenforceable, the validity or enforceability of the other provisions will remain unaffected. This Agreement will be binding upon and inure to the benefit of Provider and Customer and their respective successors and permitted assigns. Except for assignments to our affiliates or to any entity that succeeds to our business in connection with a merger or acquisition, neither party may assign this Agreement without the prior written consent of the other party. Each signatory to this

Agreement warrants and represents that he or she has the unrestricted right and requisite authority to enter into and execute this Agreement, to bind his or her respective party, and to authorize the installation and operation of the System. Provider and Customer each will comply, at its own expense, with all applicable laws and regulations in the performance of their respective obligations under this Agreement and otherwise in their operations. Nothing in this Agreement will be deemed or construed by the parties or any other entity to create an agency, partnership, or joint venture between Customer and Provider. This Agreement cannot be modified orally and can be modified only by a written instrument signed by all parties. The parties' rights and obligations, which by their nature would extend beyond the termination, cancellation, or expiration of this Agreement, will survive such termination, cancellation, or expiration (including, without limitation, any payment obligations for services or equipment received before such termination, cancellation, or expiration). This Agreement may be executed in counterparts, each of which will be fully effective as an original, and all of which together will constitute one and the same instrument. Each party agrees that delivery of an executed copy of this Agreement by facsimile transmission or by PDF e-mail attachment will have the same force and effect as hand delivery with original signatures. Each party may use facsimile or PDF signatures as evidence of the execution and delivery of this Agreement to the same extent that original signatures can be used. This Agreement, together with the exhibits and Schedules, constitutes the entire agreement of the parties regarding the subject matter set forth herein and supersedes any prior or contemporaneous oral or written agreements or guarantees regarding the subject matter set forth herein.

EXECUTED as of the Effective Date.

CUSTOMER:

Quay County Detention Center

By: Franklin McCasland

Name: Franklin McCasland

Title: Chairman

Date: 3/9/2020

Customer's Notice Address:

223 W. High Street
Tucumcari, NM 88401

PROVIDER:

Securus Technologies, Inc.

By: _____

Name: Robert E. Pickens

Title: Chief Executive Officer

Date: _____

Provider's Notice Address:

4000 International Parkway
Carrollton, Texas 75007
Attention: General Counsel
Phone: (972) 277-0300

Provider's Payment Address:

4000 International Parkway
Carrollton, Texas 75007
Attention: Accounts Receivable

Please return signed contract to:

4000 International Parkway
Carrollton, Texas 75007
Attention: Contracts Administrator
Phone: (972) 277-0300

Schedule
Quay County Detention Center

This Schedule is between Securus Technologies, Inc. ("we" or "Provider"), and the Quay County Detention Center ("you" or "Customer") and is part of and governed by the Master Services Agreement (the "Agreement") executed by the parties. The terms and conditions of the Agreement are incorporated herein by reference. This Schedule will be coterminous with the Agreement ("Schedule Effective Date").

A. Applications. We will provide the following Applications:

CALL MANAGEMENT SYSTEM

DESCRIPTION:

Secure Call Platform: Secure Call Platform ("SCP") provides through its centralized system automatic placement of calls by inmates without the need for conventional live operator services. In addition, SCP has the ability to do the following: (a) monitor and record inmate calls, (b) prevent monitoring and recording of private calls (i.e., attorney client calls, clergy calls, or other calls as approved and implemented by you); private number settings allow you to mark these calls not to be monitored or recorded, and you are solely responsible for identifying, approving and disabling requests for private treatment; (c) automatically limit the duration of each call to a certain period designated by us, (d) maintain call detail records in accordance with our standard practices, (e) automatically shut the System on or off, and (f) allow free calls to the extent required by applicable law. We will be responsible for all billing and collections of inmate calling charges but may contract with third parties to perform such functions. SCP will be provided at the Facilities specified in the chart below.

SCP provides the ability to store call recordings in secure, redundant environment. We will store call recordings for a period of 12 months from the date of recording, after which they will be permanently deleted. SCP also provides you with the ability to download and store call recordings. You are solely responsible for preserving any call recordings beyond the storage period by downloading them to a separate storage medium.

SCP also includes the ability to integrate inmate Debit accounts. A Debit account is a prepaid, inmate-owned account used to pay for inmate telephone calls. A Debit account is funded by transfer of inmate's facility trust/commissary account funds to inmate's Debit account. Provider will also allow inmate friends and family members to fund an inmate's Debit account via multiple points-of-sale. Funds deposited by friends and family members into an inmate's Debit account become property of the inmate. Provider establishes inmate Debit accounts which are associated with the inmate's Personal Identification Number ("PIN"). Provider requires inmate to key in his/her PIN at the beginning of every Debit call to complete the call and pay for the call using the inmate's Debit account. If implemented, Customer agrees to have the Debit module of Provider's SCP Call Management System enabled for the Facilities to offer Debit account to inmates. If implemented, Customer also agrees to use Provider's SCP User Interface or utilize integration with Customer's trust account system to process inmate's fund transfer requests. Notwithstanding, Provider will not be responsible for any delays due to (i) Customer's failure to perform any of its obligations for the project; (ii) any of Customer's vendors' failure to perform any of its obligations for the project; or (iii) circumstances outside of Provider's control.

FACILITIES AND RELATED SPECIFICATIONS:

Facility Name and Address
Quay County Detention Center 223 W. High Street Tucumcari, NM 88401

CENTRALIZED NET CENTRIC, VOIP, DIGITAL TRANSMITTED CALL MANAGEMENT SYSTEM

DESCRIPTION:

Secure Calling Platform User Interface. We will provide you with the Software regarding the Secure Calling Platform Interface ("S-Gate User Interface") which may be used only on computers and other equipment that meets or exceeds the requisite specifications. Customer represents that (i) it will be responsible for distributing and assigning licenses to its end users; (ii) it will use the SCP User Interface for lawful purposes and will not transmit, retransmit, or store material in violation of any federal or state laws or regulation; and (iii) it will monitor and ensure that its licensed end users comply with all Provider Use Terms and Conditions and as directed herein.

SERVICE LEVEL AGREEMENT

We agree to repair and maintain the System in good operating condition (ordinary wear and tear excepted), including, without limitation, furnishing all parts and labor. All such maintenance will be conducted in accordance with the service levels in Items 1 through 10 below. All such maintenance will be provided at our sole cost and expense unless necessitated by any misuse of, or destruction, damage, or vandalism to any premises equipment by you (not inmates at the Facilities), in which case, we may recoup the cost of such repair and maintenance through either a Commission deduction or direct invoicing, at our option. You agree to promptly notify us in writing after discovering any misuse of or destruction, damage, or vandalism to the equipment. If any portion of the System is interfaced with other devices or software owned or used by you or a third party, we will have no obligation to repair or maintain such other devices or software. This SERVICE LEVEL AGREEMENT does not apply to any provided *Openworkstation(s)* (see below). For the services contemplated hereunder, we may provide, based upon the Facility's requirements, two types of workstations (personal computer/desktop/laptop/terminal): The "*Openworkstation*" is an open non-secured workstation which permits administrative user rights for Facility personnel and allows the Facility to add additional third-party software. Ownership of the *Openworkstation* is transferred to the Facility along with a three-year product support plan with the hardware provider. We have no obligation to provide any technical and field support services for an *Openworkstation*. CUSTOMER IS SOLELY RESPONSIBLE FOR THE MAINTENANCE OF ANY *OPENWORKSTATION(S)*."

1. Outage Report; Technical Support. If either of the following occurs: (a) you experience a System outage or malfunction or (b) the System requires maintenance (each a "System Event"), then you will promptly report the System Event to our Technical Support Department ("Technical Support"). You may contact Technical Support 24 hours a day, seven days a week (except in the event of planned or emergency outages) by telephone at 866-558-2323, by email at TechnicalSupport@securustech.net, or by facsimile at 800-368-3168. We will provide you commercially reasonable notice, when practical, before any Technical Support outage.

2. Priority Classifications. Upon receipt of your report of a System Event, Technical Support will classify the System Event as one of the following three priority levels:

"Priority 1"	30% or more of the functionality of the System is adversely affected by the System Event.
"Priority 2"	5% - 29% of the functionality of the System is adversely affected by the System Event.
"Priority 3"	Less than 5% of the functionality of the System is adversely affected by the System Event. Single and multiple phones related issues.

3. Response Times. After receipt of notice of the System Event, we will respond to the System Event within the following time periods:

Priority 1	2 hours
Priority 2	24 hours
Priority 3	72 hours

4. Response Process. In the event of a System Event, where the equipment is located on Customer premises, Technical Support will either initiate remote diagnosis and correction of the System Event or dispatch a field technician to the Facility (in which case the applicable regional dispatcher will contact you with the technician's estimated time of arrival), as necessary. In the event a System Event occurs in the centralized SCP system, technical support will initiate remote diagnosis and correction of the System Event.

5. Performance of Service. All of our repair and maintenance of the System will be done in a good and workmanlike manner at no cost to you except as may be otherwise set forth in the Agreement. Any requested modification or upgrade to the System that is agreed upon by you and us may be subject to a charge as set forth in the Agreement and will be implemented within the time period agreed by the parties.

6. Escalation Contacts. Your account will be monitored by the applicable Territory Manager and Regional Service Manager. In addition, you may use the following escalation list if our response time exceeds 36 hours: first to the Technical Support Manager or Regional Service Manager, as applicable, then to the Director of Field Services, then to the Executive Director, Service.

7. Notice of Resolution. After receiving internal notification that a Priority 1 System Event has been resolved, a technician will contact you to confirm resolution. For a Priority 2 or 3 System Event, a member of our customer satisfaction team will confirm resolution.

8. Monitoring. We will monitor our back office and validation systems 24 hours a day, seven days a week.

9. Required IGR. You are responsible for providing a dedicated isolated grounded receptacle ("IGR") for use in connection with the primary System. Upon request we will provide you with the specifications for the IGR. If you are unable to or do not provide the IGR, we will provide the IGR on a time and materials basis at the installer's then-current billing rates, provided that we are not responsible for any delay caused by your failure to provide the IGR.

10. End-User Billing Services and Customer Care. Our Securus Correctional Billing Services department will maintain dedicated customer service representatives to handle end-user issues such as call blocking or unblocking and setting up end-user payment accounts. The customer service representatives will be available 24 hours a day, 7 days a week by telephone at 800-844-6591, via chat by visiting our website www.securustech.net, and by facsimile at 972-277-0714. In addition, we will maintain an automated inquiry system on a toll-free customer service phone line that will be available to end-users 24 hours a day, 7 days a week to provide basic information and handle most routine activities. We will also accept payments from end-users by credit card, check, and cash deposit (such as by money order, MoneyGram or Western Union transfer).

COMMISSARY ORDER BY PHONE

Commissary Order by Phone allows an inmate to order and purchase commissary items using the inmate phone system by selecting an additional menu option on the phone system. Customer's commissary operator provides an interactive voice response system ("IVR") and a speed-dial number (800#) into the commissary's IVR. Customer hereby requests that Provider work with Customer's commissary operator to set up and activate Commissary Order by Phone at the Facility.

ADVANCECONNECT SINGLE CALL™

Securus' AdvanceConnect™ payment product allows family members and friends to pre-pay for calls originating from inmates in correctional facilities. AdvanceConnect™ gives consumers the choice to pre-pay for multiple calls or for a single call just before connection using the AdvanceConnect Single Call™ feature. AdvanceConnect Single Call™ allows friends and family to fund the minimum to complete the current inbound call. AdvanceConnect Single Call™ transactions are rated at the FCC-regulated fee (currently \$3 for automated transactions) plus the applicable per-minute rate and any applicable federal, state, and local taxes.

OUTBOUND VOICEMAIL

Outbound Voicemail allows friends and family (F&F) to retrieve voicemails left by inmates. If an inmate attempts to call F&F but the call goes unanswered, the inmate is given the option to leave a voicemail. If the inmate leaves a voicemail, a text message containing a link will be sent to the dialed number. Once the F&F clicks the link, they will be sent to a web form to pay and listen to the voicemail. Outbound Voicemail is priced at the applicable AdvanceConnect calling rates, based on the actual duration of the call, plus any applicable taxes and a \$3.00 transaction fee.

PREPAID CALLING CARDS

Upon receipt of your written request, we will provide you with inmate Prepaid Calling Cards for resale to inmates at the Facility(s). Prepaid Calling Cards are not returnable or refundable; all sales are final. Each Prepaid Calling Cards will be valid for no more than six (6) months from the date it is first used. The cards are subject to applicable local, state, and federal taxes plus any applicable per call surcharge fee. If you authorize us, we will deal with your third-party commissary operator ("Commissary Operator") for the sole purpose of selling Prepaid Calling Cards to you. If that is the case, you will notify us in writing of any change in the identity of the Commissary Operator, which change will be effective on the date that we receive the notice. Notwithstanding anything to the contrary, you will remain primarily liable for the payment for Prepaid Calling Cards sold to Commissary Operator on your behalf.

TAXES:

The face value of the Prepaid Calling Cards does not include any taxes or other fees. Provider will invoice Customer for each order of Prepaid Calling Cards. Customer agrees to pay the invoice within 30 days, including all applicable sales taxes and other regulatory charges. Customer may provide a Sales and Use Tax Resale Certificate to Provider stating that Customer will be responsible for charging the applicable taxes to the end-users and for remitting the collected taxes to the proper taxing jurisdictions. If Provider receives a Sales and Use Tax Resale Certificate from Customer, Provider will not charge applicable sales taxes on Customer invoices for Prepaid Calling Cards purchases.

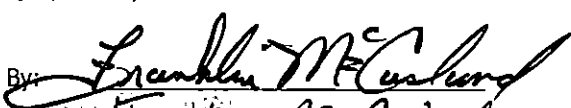
The face value of the Cards plus any applicable sales tax and shipping charges will be due and payable within 30 days after the invoice date. After such 30 day period, Provider reserves the right to charge interest on the overdue amount at the lower of (a) 15% per annum or (b) the maximum rate allowed by law and to deduct the invoice price of the Cards plus any accrued interest from any amounts we owe you until paid in full. If you authorize us in writing we will deduct amounts owed from your earned Commissions. If the amounts owed exceed the Commission for the relevant month or if, for any

reason, the Agreement terminates or expires during the relevant month, Provider will invoice you for the balance which will be due within 30 days after the date of the invoice. All applicable sales taxes will be charged on the invoiced amount of the Prepaid Calling Card sale, unless Customer provides us a valid reseller's certificate before the time of sale.

CALLING RATES

Provider will charge rates that are in compliance with state and federal regulatory requirements. International rates, if applicable, will vary by country.

EXECUTED as of the Schedule Effective Date.

<u>CUSTOMER:</u> Quay County Detention Center By:  Name: <u>Franklin McCasland</u> Title: <u>Chairman</u>	<u>PROVIDER:</u> Securus Technologies, Inc. By: _____ Name: Robert E. Pickens Title: Chief Executive Officer
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Please return signed contract to:

4000 International Parkway
Carrollton, Texas 75007
Attention: Contracts Administrator
Phone: (972) 277-0300

QUAY COUNTY RESOLUTION

Resolution No. 42

A RESOLUTION AUTHORIZING THE COUNTY TO SUBMIT AN APPLICATION TO THE DEPARTMENT OF FINANCE AND ADMINISTRATION, LOCAL GOVERNMENT DIVISION TO PARTICIPATE IN THE LOCAL DWI GRANT AND DISTRIBUTION PROGRAM.

WHEREAS, the Legislature enacted Section 11-6A-1 through 11-6A-6 NMSA 1978 as amended to address the serious problems of Driving While Intoxicated (DWI) in the State; and

WHEREAS, a program is established to make grant and distribution funding available to counties and municipalities for new, innovative or model programs, services or activities to prevent or reduce the incidence domestic abuse related to DWI, DWI, alcoholism and alcohol abuse; and

WHEREAS, the county DWI planning council and other governmental entities approval must be received in order to apply for grant and distribution funding; and

WHEREAS, the County along with participating agencies is making application to the Department of Finance and Administration, Local Government Division for program funding.

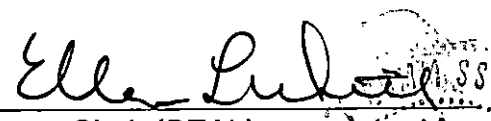
NOW THEREFORE, BE IT RESOLVED by the governing body of the County of Quay_ that the County Chairperson, **Franklin McCasland**, on behalf of the County and all participating entities is authorized to submit an application for Distribution and/or Grant Fiscal Year 2021 program funding under the regulations established by the Local Government Division.

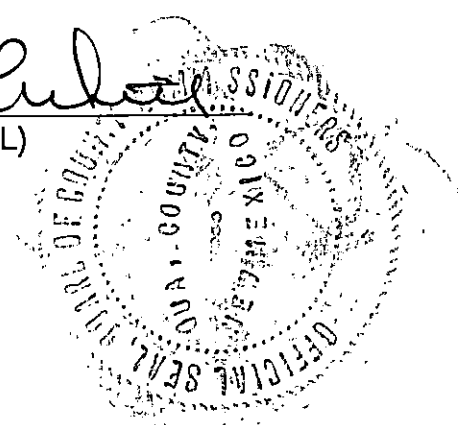
APPROVED AND ADOPTED by the governing body at its meeting of **March 9_, 20 20_**.


County Commission Chairperson

Attest:

DWI Planning Council Representative


County Clerk (SEAL)



Revised: October 2019

Application Cover Sheet

FY21 Local DWI Program Distribution and Grant Funding

Local Government Division - DFA

County/Municipality: Quay County

DWI Program Coordinator:

Name: Andrea Shafer
 Address: P. O. Box 1011
 City, Zip: Tucumcari, NM 88401
 Telephone: 575-461-6096
 E-Mail: andrea.shafer@quaycounty-nm.gov

Fiscal Agent as listed on current W-9:

Contact Person: Cheryl Simpson
 Mailing Address: P. O. Box 1246
 City, Zip: Tucumcari, NM 88401
 Telephone: 575-461-2112
 E-Mail: cheryl.simpson@quaycounty-nm.gov

Indicate amounts budgeted for each component area.

	<u>Distribution</u>	<u>Grant</u>	<u>Component Total</u>
Prevention	-	-	-
Enforcement	-	-	-
Screening	-	-	-
Domestic Abuse	-	-	-
Treatment	-	-	-
Compl. Mtr./track	54,540.00	-	54,540.00
Coord/Plan& Eval.	44,800.00	-	44,800.00
Alt. Sentencing	-	-	-
Total	99,340.00	-	99,340.00
	Total Distrib. Request	Total Grant Request	Total Program Request

Certification:

The attached resolution adopted by the governing body of Quay County on March 9, 2020 authorizes the
 (Applicant) (Date)
 applicant to file this application for assistance from the State of New Mexico. To the best of my knowledge,
 the information presented in this application is true and correct.

Franklin McCasland, Commission Chair
 Printed Name/Title


 Signature of County Commissioner/Mayor

LOCAL DWI DISTRIBUTION PROGRAM
REVENUE/EXPENDITURE SUMMARY

Applicant/Grantee

Quay County

LDWI Funds

99,340.00

REVENUES BY SOURCE		EXPENDITURE BY CATEGORY	DISTRIBUTION	IN-KIND MATCH***	TOTAL
		ADMINISTRATIVE*			
Local DWI Program	99,340.00	Personnel Services		7,000.00	7,000.00
		Employee Benefits		1,000.00	1,000.00
In-Kind Match:					
Program Generated Fees	12,800.00				
County	8,000.00				
City	-				
Judicial/Courts	-	PROGRAM			
Other (list):		Personnel Services	62,200.00	-	62,200.00
	-	Employee Benefits	13,000.00	-	13,000.00
	-	Travel (In-State)	5,140.00	-	5,140.00
	-	Travel (Out-of-State)	-	-	-
	-	Supplies	5,000.00	2,400.00	7,400.00
	-	Operating Costs	14,000.00	8,400.00	22,400.00
	-	Contractual Services	-	2,000.00	2,000.00
	-	Minor Equipment	-	-	-
	-	Capital Purchases**	-	-	-
		TOTALS:	99,340.00	20,800.00	
TOTAL REVENUES	120,140.00			TOTAL EXPENDITURES	120,140.00

* Administrative is allowed only as In-Kind Match

**Capital purchases must have prior approval from DFA/LDWI.

*** In-Kind Match must be at least 10% of Grant total

10%= 9,934.00

STATEMENT OF ASSURANCES

Local DWI Grant and Distribution Program

Fiscal Year 2021: July 1, 2020 – June 30, 2021

The applicant hereby assures and certifies compliance with the following statutes, rules, regulations, and guidelines associated with the acceptance and use of funds under the New Mexico Local DWI Grant and Distribution Program:

1. Compliance with the provisions of the New Mexico Local DWI Grant Program Act, Sections 11-6A-1 through 11-6A-6 NMSA 1978 as amended, the NMAC Title 2, Chapter 110 Part 4 Regulations, and the approved LDWI Guidelines.
2. The applicant has the responsibility and legal authority to receive and expend funds as described in the grant and distribution project description, as well as to finance the grantee share (minimum 10%) of costs of the project, including all project overruns.
3. Compliance with the State Procurement Code, Sections 13-1-21 through 13-1-199, NMSA 1978 as amended, with the exception of Home Ruled Governments. All project-related services, activities or programs done through a service provider must be implemented through a professional services contract. Any project-related contract, subcontract, or agreement and related amendments, providing services to the grant or distribution program, must be submitted for administrative review by the Local Government Division prior to execution.
4. Adherence to all financial, accounting, and reporting requirements of the Department of Finance and Administration. Distribution programs will include the Exhibit F, the Local DWI Distribution Fund Financial Status Report. Grant programs will include the Local DWI Program Request for Payment/Financial Status Report, Exhibit D. The said reports shall include a narrative of successes and challenges, a detailed budget breakdown of expenditures to date, a summary of any fees collected and/or expended, the Screening and Tracking Report, the Managerial Data Set, Planning Council meeting agendas and minutes, and such other information following the objectives of the county's evaluation as may be of assistance to the Division in its evaluation.
5. Compliance with the requirement to not budget, nor expend, any of the grant amount awarded or the amount distributed for **indirect administrative costs** incurred during the grant or distribution fiscal period. Requests for payment or financial status reports shall document all direct program administrative expenditures and in-kind/match administrative expenditures.
6. Compliance with the requirement to not budget, nor expend, greater than **ten percent** of the grant amount awarded or the amount distributed for **capital purchases** incurred during the grant or distribution fiscal period. Requests for payment or financial status reports shall

specify all capital purchases. **The ten percent cap for capital purchases does not exist with detoxification funding grants.**

7. Compliance with all required reports, including but not limited to: the first quarter narrative and fiscal reports due on the last working day of October; the second quarter narrative and fiscal reports due on the last working day of January; and the third quarter narrative and fiscal reports due on the last working day of April; the fourth and the final quarter Grant Fiscal report due by the 10th of July and the fourth and final narrative and distribution fiscal reports for the fiscal year due the last working day of July. Annual protocols for the screening, treatment, and compliance monitoring components are due the last working day of August for the current fiscal year. The annual reports which include program evaluation are due the last working day of August for the prior fiscal year.
8. Compliance with the current Local DWI Grant Program Screening Guidelines. To avoid any conflict of interest, or appearance of conflict of interest, screeners should not be affiliated with any contracted treatment agency. Clients will be given options (a list of available providers) for alcohol related treatment and will not be *mandated* to a particular treatment agency.
9. If applicable to the applicant, compliance with the requirements of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Department of Health and Human Services regulation entitled "Standards for Privacy of Individually Identifiable Health Information", 45 CFR Parts 160 and 164, applicable to entities covered by HIPAA; (the HIPAA Regulations).
10. Any distribution program under run amount for the fiscal year must be returned to the Local DWI Grant Fund by September 30 of the following fiscal year. Failure to remit an under run to the Local DWI Grant Fund will cause suspension of grant reimbursements and/or future distributions until the remittance is made.
11. Grant program under runs revert to the Local DWI Grant Fund.
12. Compliance with all applicable conditions and requirements prescribed by the Division in relation to receipt/accountability of state General Funds.
13. The grant applicant will follow the scope of work for the grant program, as negotiated with the Local Government Division, and in accordance with the local planning council's approved plan. The applicant will submit any proposed modifications/amendments to the scope of work to the Division for its approval, prior to execution.
14. The distribution program applicant will follow the local planning council's application as approved by DWI Grant Council in the application review process. The applicant will submit any proposed modifications/amendments to this proposal to the Division for its written approval, prior to execution of changes to programs.

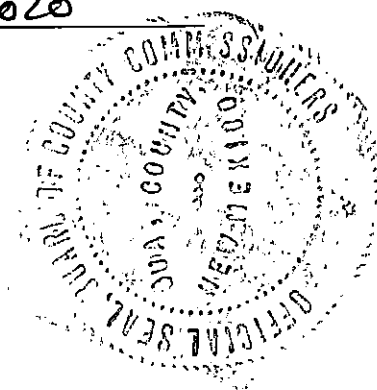
15. Compliance with conflict of interest prohibitions whereby no member, officer, or employee of the grant or the distribution program, or its designee or agents, no voting member of the local planning council or of the governing body of the locality in which the program is situated, and no other public official of such locality who exercises any functions or responsibilities with respect to the program during his/her tenure (or for one year thereafter) shall have any interest, direct or indirect, in any contract or subcontract for work to be performed in the program. The grant and/or the distribution program shall incorporate, in all such contracts or subcontracts, a provision prohibiting such interest pursuant to the purposes of these stated provisions.
16. Compliance with the maintenance of records as will fully disclose the amount and disposition of the total funds from all sources budgeted for the grant or distribution agreement period, the purpose of undertaking for which such funds were used and the amount and nature of all contributions from other sources, and such other records as the Division shall prescribe. All Program records must adhere to the New Mexico State Records Center and Archives Rule for Functional Retention and Disposition Schedule, 1.21.2 NMAC.
17. The applicant will provide access to authorized State officials and representatives of all books, accounts, records, reports, files, and other papers, things, or property pertaining to the project in order to make audits, examinations, excerpts and transcripts.
18. The applicant will provide DFA's auditor and evaluator timely access to all program records and information. Additionally, the applicant will assure that records of subcontractors working for the applicant are retained and made available to DFA's auditor and evaluator.

Franklin McCasland

County Commission Chairperson (or Designee) (Please Print)


Signature

3/9/2020
Date



MEMORANDUM OF UNDERSTANDING

The Quay County DWI Program (hereinafter referred to as the "Program") and the New Mexico Department of Finance and Administration/Local Government Division/Driving While Intoxicated Program (hereinafter referred to as "Division") hereby exchange the following assurances and enter into the following Memorandum of Understanding (MOU):

The Division assures:

1. That Division is in full compliance with the provisions concerning security for records and research activities in accordance with Federal Confidentiality regulations, 42 CFR Part 2.16 and 2.52.
2. That client identifying information will not be re-disclosed except back to the Program from which the information was obtained, or according to the terms of this MOU.
3. That in receiving, storing, processing, or otherwise dealing with any information from the Program about the clients in the Program, the Division acknowledges it is bound by the provisions of the Federal confidentiality regulations, 42 CFR Part 2.
4. That the Division shall undertake to resist any effort to obtain access to information pertaining to patients otherwise than as expressly provided for in the Federal confidentiality regulations, 42 CFR Part 2.
5. That the Division is not a "covered entity" as defined by the Department of Health and Human Services Regulations entitled "Standards for Privacy of Individually Identifiable Health Information", 45 CFR Parts 160 and 164, implementing the Health Insurance Portability and Accountability Act of 1996 (HIPAA); (the HIPAA Regulations).
6. That the Division shall never possess treatment or maintain any "individually identifiable health information" or transmit "protected health information" as defined by the HIPAA Regulations and in the Health Information Technology for Economic and Clinical Health Act of 2009 (HITECH Act).

The Program agrees to:

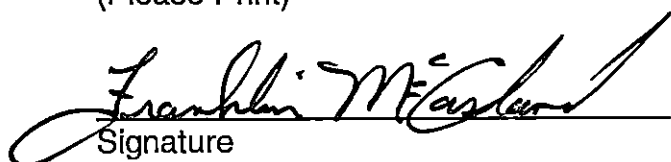
1. Upon request, provide the Division or other parties authorized with client records for those clients provided services through the Local Government Division DWI Grant Program, for the purpose of conducting outcome

monitoring research activities, and evaluation of LDWI Program interventions.

2. If applicable, comply with the requirements of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), the Health Information Technology for Economic and Clinical Health Act of 2009 (HITECH Act) and the Department of Health and Human Services Regulation entitled "Standards for Privacy of Individually Identifiable Health Information", 45 CFR Parts 160 and 164, applicable to entities covered by HIPAA; (the HIPAA Regulations).
3. Report or transmit data to the Division that deletes and contains no "individually identifiable health information" or "protected health information" as defined by the HIPAA Regulations and the Health Information Technology for Economic and Clinical Health Act of 2009 (HITECH Act).

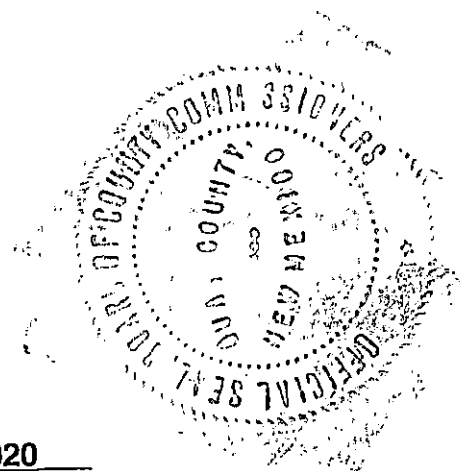
Franklin McCasland

County Commission Chairperson (or Designee)
(Please Print)


Signature

3/9/2020

Date



Executed this _____ day of _____, 20____.

Donnie Quintana, Director
Local Government Division



**QUAY COUNTY GOVERNMENT
FISCAL YEAR 2018-2019**

(AMENDED) RESOLUTION NO. 42

**A Resolution
Designating the Location of Election Day Polling Places
for all Statewide Elections Conducted in 2020 and 2021;**

WHEREAS, pursuant to the New Mexico Statutes Annotated 1978, Section 1-3-2 (2019) in June or July of 2019 the Board of County Commissioners by resolution shall designate the location of election day polling places in the county for the conduct of any statewide election conducted in calendar years 2020 and 2021; *and*

WHEREAS, the Board of County Commissioners finds that each polling place designated in this resolution complies with the provisions of NMSA 1978, Section 1-3-7 (2019), titled Polling Places; *and*

WHEREAS, the Board of County Commissioners finds that the Voting Convenience Centers created by this resolution will make voting more convenient and accessible to voters of the consolidated precinct, will not result in delays in the voting process, and are centrally located within each consolidated precinct; and further that the Voter Convenience Centers created by this Resolution along with any Early Voting locations which the County Clerk determines to maintain open on Election Day as additional Voter Convenience Centers all meet the requirements of Subsections B and C of NMSA 1978, Section 1-3-4 (2019) and will be available to voters of any precinct in the county to cast a vote at the Voting Convenience Center; *and*

WHEREAS, the Board of County Commissioners exempts those precincts not designated a Voting Convenience Center and they will be designated as Traditional Precincts and adhere to NMSA 1979, Section 1-3-4.7; and

WHEREAS, the Board of County Commissioners finds that that each polling place provides individuals with physical mobility limitations unobstructed access to at least one voting machine; *and*

NOW, THEREFORE, BE IT RESOLVED that the Board of County Commissioners designates the election day polling locations for any Statewide Election to be conducted in 2020 and 2021 as follows:

- Precinct 1 – Vote Center - House Community/Senior Citizens Center – 110 South Apple Street, House, NM
- Precinct 2 – Forrest NM – 209 State Highway 210, Forrest, NM (Traditional Precinct)
- Precinct 3 – Vote Center - San Jon City Community Center – 2357 State Highway 469, San Jon, NM

Precinct 4 - Nara Visa NM -950 Bell Street, Nara Visa, NM (Traditional Precinct)

Precinct 5 - Vote Center - Logan Civic Center - 100 North Second Street, Logan, NM


Precinct 6-12- Vote Center - Tucumcari Convention Center - 1500 West Route 66 Blvd.,
Tucumcari, NM

Precinct 13 - Absentee - Quay County Courthouse - 300 South Third St., Tucumcari, NM

Precinct 14 - Early - Quay County Courthouse - 300 South Third St., Tucumcari, NM

AMENDED this 9th day of March, 2020.

BOARD OF QUAY COUNTY COMMISSIONERS

A circular official seal of Quay County, New Mexico. The outer ring contains the text "OFFICIAL SEAL" at the top and "QUAY COUNTY, NEW MEXICO" at the bottom. The center features a stylized sunburst design.
Franklin McCasland
Franklin McCasland, Chairman

Mike Cherry
Mike Cherry, Member

Sue Dowell
Sue Dowell, Member

Attest: Ellen L. White
Ellen L. White, County Clerk



PERA

Public Employees
Retirement Association
of New Mexico

33 Plaza La Prensa
Santa Fe, New Mexico 87507
(505) 476-9300 voice
(800) 342-3422 Toll-Free
www.nmpera.org


**2019 Volunteer Fire Department (VFD)
Fire Chief, Reporter and County Fire Marshal
Contact Information**

SECTION A – CONTACT INFORMATION (COMPLETE ALL SECTIONS)

1. VFD Name: Porter VFD
2. PERA VFD Number (5 digit number): 09961
3. Fire Chief Name: Austin Gibson Telephone Number: 575-403-5081
4. Reporter Name: Austin Gibson Telephone Number: 575-403-5081
5. County Fire Marshal Name: Lucas Bugg Telephone Number: 575-461-3645
6. VFD Email Address/es: austingibson199008@yahoo.com
7. VFD Telephone Number(s): 575-576-1911
8. VFD Mailing Address: Po Box 91
- City, State: San Jon NM Zip Code: 88434

SECTION B – AUTHORIZATION

Name of VFD Fire Chief (print): Austin Gibson

Signature of VFD Fire Chief: 

Please return this form on or before March 31 of each calendar year or as the VFDs administration changes. The form must be completed in its entirety and returned to PERA for processing. Please keep a copy for your VFDs records.

**PERA**Public Employees
Retirement Association
of New Mexico33 Plaza La Prensa
Santa Fe, New Mexico 87507
(505) 476-9300 voice
(800) 342-3422 toll-free
www.nmpera.org**2019 Volunteer Firefighters Annual Reporting Form****SECTION A – VOLUNTEER FIRE DEPARTMENT – GENERAL INFORMATION**

1. Volunteer Fire Department (VFD) Name: Porter VFD
2. VFD Mailing Address: Po Box 233
- City, State: San Jon NM Zip Code: 88434
3. PERA VFD Number (5 digit number): 09961 4. County Fire Marshal: _____
5. VFD Fire Chief: Austin Gibson 6. Email Address: Austin Gibson
7. Phone (work): (575) 403-5081 (home/cell): (575) 403-5081

SECTION B – DEPARTMENT TOTALS

1.	New VFD Members reported in 2019	<u>0</u>
2.	Current Active (Non-Retired) VFD Members reported in 2019	<u>7</u>
3.	Retired VFD Members reported in 2019	<u>0</u>
4.	Total number of Volunteer Firefighters reported in 2019:	<u>7</u>

SECTION C – CERTIFICATION

I, Austin Gibson, Fire Chief of the Porter VFD
Volunteer Fire Department, affirm that the records submitted to PERA are true and correct and reflect **100%** of my VFDs 2019 roster.

[Signature]
Signature of VFD Fire Chief

3/9/2020
Date

State of New Mexico

County of Quay

On this 9 day of March, 2020, known to me to be the person described in and who executed the above and foregoing instrument and acknowledged to me that they executed the same as their free act and deed.

[Signature]
(Notary Public)

My commission expires: 3/31/2023

[Signature]
Municipal Mayor or Chair of County Commission

3/9/2020
Date

Return this form along with the appropriate Qualification Record Form(s) by March 31, 2020 to PERA. Strikethroughs and white-out edits are not permitted. Keep copies for your VFDs records.

**PERA**Public Employees
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Santa Fe, New Mexico 87507
(505) 476-9300 voice
(800) 342-3422 Toll-Free
www.nmpera.org**2019 Volunteer Firefighter
Service Credit Qualification Record**

Instructions: Please print or type in dark ink. Check one box to indicate whether or not member met minimum qualifications for service credit for the year indicated. Return this form along with the Annual Reporting Form by March 31, 2020 to PERA. Keep copies for your VFDs records.

VFD Name: Porter VFDPERA VFD Number (5 digit number): 09961County: Quay**Current Active (Non-Retired) VFD Members Only**

Vol No.	Social Security Number (must be provided or no service will be credited)	Full Name of Volunteer Firefighter (Provide mailing address for each member)	Date of Birth (00/00/00)	Service Credit Eligibility Met? (Check one)	
				Yes	No
1.	[REDACTED]	Name: Jeremy Allen Address: 6256 Quay Road O Bard NM 88411	[REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.	[REDACTED]	Name: Rana (Gibson) Allen Address: 6256 Quay Road O Bard NM 88411	[REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.	[REDACTED]	Name: Paul Gibson Address: 6245 Quay Road O Bard NM 88411	[REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.	[REDACTED]	Name: Carolyn Gibson Address: 6245 Quay Road O Bard NM 88411	[REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.	[REDACTED]	Name: Franklin Gibson Address: 6754 Quay Road C Bard NM 88411	[REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.	[REDACTED]	Name: Alice Gibson Address: Po Box 233 San Jon NM 88434	[REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7.	[REDACTED]	Name: Austin Gibson Address: Po Box 233 San Jon NM 88434	[REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
9.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
10.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>

Volunteer Fire Department Certification

(to be signed either by the VFD Fire Chief, District Fire Chief, County Fire Marshal or other authorized person)

Signature: [Signature]Title: ChiefDate: 2/24/20

December 2019



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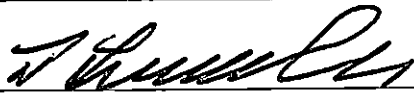
**2019 Volunteer Fire Department (VFD)
Fire Chief, Reporter and County Fire Marshal
Contact Information**

SECTION A – CONTACT INFORMATION (COMPLETE ALL SECTIONS)

1. VFD Name: Forrest Volunteer Fire Department
2. PERA VFD Number (5 digit number): 09668
3. Fire Chief Name: Joe G. Lavender Telephone Number: 575-799-4879
4. Reporter Name: Joe G. Lavender Telephone Number: 575-799-4879
5. County Fire Marshal Name: Lucas Bugg Telephone Number: 575-403-6479
6. VFD Email Address/es: joegl387@gmail.com
7. VFD Telephone Number(s): 575-485-6312
8. VFD Mailing Address: 209 State Hwy 210
McAlister, NM City, State: Zip Code: 88427

SECTION B – AUTHORIZATION

Name of VFD Fire Chief (print): Joe G. Lavender

Signature of VFD Fire Chief: 

Please return this form on or before March 31 of each calendar year or as the VFDs administration changes. The form must be completed in its entirety and returned to PERA for processing. Please keep a copy for your VFDs records.



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2019 Volunteer Firefighters Annual Reporting Form

SECTION A – VOLUNTEER FIRE DEPARTMENT – GENERAL INFORMATION

- Volunteer Fire Department (VFD) Name: Forrest Volunteer fire Department
- VFD Mailing Address: 209 State Hwy 210
City, State: McAlister, New Mexico Zip Code: 88427
- PERA VFD Number (5 digit number): 09668
- County Fire Marshal: Lucas Bugg
- VFD Fire Chief: Joe Lavender
- Email Address: joegl387@gmail.com
- Phone (work): () (home/cell): 575 799-4879

SECTION B – DEPARTMENT TOTALS

1.	New VFD Members reported in 2019	0
2.	Current Active (Non-Retired) VFD Members reported in 2019	6
3.	Retired VFD Members reported in 2019	8
4.	Total number of Volunteer Firefighters reported in 2019:	14

SECTION C - CERTIFICATION

I, Joe Lavender, Fire Chief of the Forrest
Volunteer Fire Department, affirm that the records submitted to PERA are true and correct and reflect 100% of my VFDs 2019 roster.

[Signature]
Signature of VFD Fire Chief

3/9/2020
Date

State of New Mexico

County of S Quay

On this 9th day of March, 2020, known to me to be the person described in and who executed the above and foregoing instrument and acknowledged to me that they executed the same as their free act and deed.

[Signature]
(Notary Public)

My commission expires 3/21/2023

[Signature]
Municipal Mayor or Chair of County Commission

3/9/2020
Date

Return this form along with the appropriate Qualification Record Form(s) by March 31, 2020 to PERA. Strikethroughs and white-out edits are not permitted. Keep copies for your VFDs records.

October 2019

**PERA**Public Employees
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of New Mexico33 Plaza La Prensa
Santa Fe, New Mexico 87507
(505) 476-9300 voice
(800) 342-3422 Toll-Free
www.nmpera.org**2019 Volunteer Firefighter
Service Credit Qualification Record**

Instructions: Please print or type in dark ink. Check one box to indicate whether or not member met minimum qualifications for service credit for the year indicated. Return this form along with the Annual Reporting Form by March 31, 2020 to PERA. Keep copies for your VFDs records.

VFD Name: Forrest Volunteer Fire DepartmentPERA VFD Number (5 digit number): 09668 County: Quay**Current Active (Non-Retired) VFD Members Only**

Vol No.	Social Security Number (must be provided or no service will be credited)	Full Name of Volunteer Firefighter (Provide mailing address for each member)	Date of Birth (00/00/00)	Service Credit Eligibility Met? (Check one)	
				Yes	No
1.	XXXXXXXXXX	Name: David Rush Address: 3681 Quay Rd 34 Melrose, NM 88124	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.	XXXXXXXXXX	Name: Jerri Rush Address: 3681 Quay Rd 34 Melrose, NM 88124	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.	XXXXXXXXXX	Name: William Sours Address:	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.	XXXXXXXXXX	Name: Cahill Sours Address: 4016 Quay Rd Al McAlister, NM 88427	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.	XXXXXXXXXX	Name: Monika Garrett Address: 3289 Quay Rd 37 Melrose, NM 88124	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.	XXXXXXXXXX	Name: Randell Rush Address: 3681 Quay Rd 34m Melrose, NM 88124	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
8.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
9.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
10.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>

Volunteer Fire Department Certification

(to be signed either by the VFD Fire Chief, District Fire Chief, County Fire Marshal or other authorized person)

Signature: [Signature] Title: Chief Date: 3-9-2020

December 2019

**PERA**Public Employees
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www.nmpera.org**2019 Volunteer Firefighter
Service Credit Qualification Record**

Instructions: Please print or type in dark ink. Check one box to indicate whether or not member met minimum qualifications for service credit for the year indicated. Return this form along with the Annual Reporting Form by March 31, 2020 to PERA. Keep copies for your Volunteer Fire Department's (VFD) records.

VFD Name: Forrest Volunteer Fire DepartmentPERA VFD Number (5 digit number): 09668County: Quay**Retired VFD Members Only**

Vol No.	Social Security Number (must be provided or no service will be credited)	Full Name of Volunteer Firefighter (Provide mailing address for each member)	Date of Birth (00/00/00)	Service Credit Eligibility Met? (Check one)	
				Yes	No
1.	[REDACTED]	Name: Don Beevers Address: 3471 Quay Rd AF Melrose, NM 88124	[REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.	[REDACTED]	Name: Joe Garrett Address: 3298 Quay Rd 37 Melrose, NM 88124	[REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.	[REDACTED]	Name: Eric Rush Address: HCR 63 Box 710 Melrose, NM 88124	[REDACTED]	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.	[REDACTED]	Name: Ray Rush Address: 4143 Quay Rd 36 McAlister, NM 88427	[REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.	[REDACTED]	Name: Ted Rush Address: 2675 Quay Rd 40 McAlister, NM 88427	[REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.	[REDACTED]	Name: Judy Rush Address: 2675 Quay Rd 40 McAlister, NM 88427	[REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7.	[REDACTED]	Name: Diana Rush Address: 4143 Quay Rd 40 McAlister, NM 88427	[REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8.	[REDACTED]	Name: Joe Lavender Address: 2121 State Hwy 268 Melrose, NM 88124	[REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
10.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>

Note: PERA has a 100% reporting policy. Retired VFD Members are not eligible to accrue additional service credit once pension benefits begin.

Volunteer Fire Department Certification

(to be signed either by the VFD Fire Chief, District Fire Chief, County Fire Marshal or other authorized person)

Signature: [Signature] Title: Chief Date: 3-9-2020



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Corrected Qualification Report for Volunteer Firefighter Service Credit Form

Instructions: Please print or type in dark ink. The original of this form must be returned to PERA for processing.

SECTION A - GENERAL INFORMATION

1. Member Name: Ellen Yvonne Bone
2. Social Security Number: 585-54-5344
3. Address: 6552 Quay Road 0
4. Telephone Number: 575.576.2709
5. Fire Department Name: Bard-Endee Fire District
6. PERA Number (5 digit number): 09602

SECTION B - CERTIFICATION

I, Ellen Yvonne Bone, affirm that the records submitted on the attached Corrected Qualification Record for Volunteer Firefighter Service Credit Form are true and correct.

Ellen Yvonne Bone
Member Signature

03/09/2020

Date

AND
Franklin McCarland
Municipal Mayor or Chair of County Commission

03/09/2020

Date

State of New Mexico)
County of QUAY) SS:

Signed and sworn to (or affirmed) before me by Ellen Yvonne Bone on this the 9 day
of March, 2020. (Name of Volunteer Firefighter)

My Commission Expires 3/21/2023 Notary Public Telephone No: 575 461 0510

Notary Signature [Signature]

Return this Report with the Corrected Qualification Record for Volunteer Firefighter Service Credit Form to the Public Employees Retirement Association no later than March 31, 2020. Strikethroughs and correction tape/fluid are not permitted. Keep a copy for your records.



PERA

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**Corrected Qualification Record
for Volunteer Firefighter Service Credit Form**

INSTRUCTIONS: Please print legibly or type information. The original of this form must be returned to PERA for processing along with the Volunteer Firefighter Corrected Qualification Report Form. Please note, the information reflected in this form can be obtained from different sources, including but not limited to the INFRS system, run reports, and dispatch and insurance records.

Member Name: Ellen Yvonne Bone Social Security Number: 585-54-5344

Address: 6552 Quay Rd O City: Bard State: NM Zip: 88411

Telephone Number: 575.576.2709 Cell: 575.403.8120

No.	Year	Fire Drills		Business Meetings		Emergency Responses	
		# Held	# Attended	# Held	# Attended	# Held	# Attended
1.	2012	12	9	12	9	18	9
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							
16.							
17.							
18.							
19.							
20.							
21.							
22.							
23.							
24.							
25.							

Member Signature: Ellen Yvonne Bone Date: 3/9/2020

May 2019



PERA

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of New Mexico

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www.nmpera.org

Corrected Qualification Report for Volunteer Firefighter Service Credit Form

Instructions: Please print or type in dark ink. The original of this form must be returned to PERA for processing.

SECTION A - GENERAL INFORMATION

1. Member Name: Wade Lane
2. Social Security Number: 453-11-6466
3. Address: 502 Oak Ave. San Jon New Mexico 88434
4. Telephone Number: 575.403.9191
5. Fire Department Name: Bard-Endee Fire District
6. PERA Number (5 digit number): 09602

SECTION B - CERTIFICATION

I, Wade Lane, affirm that the records submitted on the attached Corrected Qualification Record for Volunteer Firefighter Service Credit Form are true and correct.

Wade Lane
Member Signature

03/09/2020

Date

AND
Franklin McCasland
Municipal Mayor or Chair of County Commission

03/09/2020

Date

State of New Mexico)
County of QUAY) SS:

Signed and sworn to (or affirmed) before me by Wade Lane on this the 9 day
of March, 2020. (Name of Volunteer Firefighter)

My Commission Expires 3/21/2023 Notary Public Telephone No: 575 461 0510

Notary Signature: [Signature]

Return this Report with the Corrected Qualification Record for Volunteer Firefighter Service Credit Form to the Public Employees Retirement Association no later than March 31, 2020. Strikethroughs and correction tape/fluid are not permitted. Keep a copy for your records.



PERA

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**Corrected Qualification Record
for Volunteer Firefighter Service Credit Form**

INSTRUCTIONS: Please print legibly or type information. The original of this form must be returned to PERA for processing along with the Volunteer Firefighter Corrected Qualification Report Form. Please note, the information reflected in this form can be obtained from different sources, including but not limited to the INFRS system, run reports, and dispatch and insurance records.

Member Name: Wade Lane Social Security Number: 453-11-6466

Address: 502 Oak Ave. City: San Jon State: NM Zip: 88434

Telephone Number: 575.576.2709 Cell: 575.403.9191

No.	Year	Fire Drills		Business Meetings		Emergency Responses	
		# Held	# Attended	# Held	# Attended	# Held	# Attended
1.	2008	12	9	12	10	14	7
2.	2012	12	7	12	8	18	10
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							
16.							
17.							
18.							
19.							
20.							
21.							
22.							
23.							
24.							
25.							

Member Signature: Wade Lane Date: 3/9/2020

May 2019



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2019 Volunteer Firefighters Annual Reporting Form

SECTION A - VOLUNTEER FIRE DEPARTMENT - GENERAL INFORMATION

- Volunteer Fire Department (VFD) Name: Bard-Endee Fire District
- VFD Mailing Address: 1097 Route 66
City, State: Bard, New Mexico Zip Code: 88411
- PERA VFD Number (5 digit number): 09602
- County Fire Marshal: Lucas Bugg
- VFD Fire Chief: Donald Adams
- Email Address: bardendee@yahoo.com
- Phone (work): (575) 403-7911 (home/cell): (575) 576-2210

SECTION B - DEPARTMENT TOTALS

1.	New VFD Members reported in 2019	0
2.	Current Active (Non-Retired) VFD Members reported in 2019	14
3.	Retired VFD Members reported in 2019	7
4.	Total number of Volunteer Firefighters reported in 2019:	21

SECTION C - CERTIFICATION.

I, Donald Adams, Fire Chief of the Bard-Endee
Volunteer Fire Department, affirm that the records submitted to PERA are true and correct and reflect 100% of my VFDs 2019 roster.

Donald Adams
Signature of VFD Fire Chief

3/9/2020
Date

State of New Mexico

County of Sua

On this 9 day of March, 20, 20, known to me to be the person described in and who executed the above and foregoing instrument and acknowledged to me that they executed the same as their free act and deed.

Elle L. White
(Notary Public)

My commission expires: 3/21/23

Frank M. Casland
Municipal Mayor or Chair of County Commission

3/9/2020
Date

Return this form along with the appropriate Qualification Record Form(s) by March 31, 2020 to PERA. Strikethroughs and white-out edits are not permitted. Keep copies for your VFDs records.

October 2019



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2019 Volunteer Fire Department (VFD) Fire Chief, Reporter and County Fire Marshal Contact Information

SECTION A – CONTACT INFORMATION (COMPLETE ALL SECTIONS)

1. VFD Name: Bard-Endee Fire District
2. PERA VFD Number (5 digit number): 09602
3. Fire Chief Name: Donald Adams Telephone Number: 575-403-7911
4. Reporter Name: Donald Adams Telephone Number: 575-403-7911
5. County Fire Marshal Name: Lucas Bugg Telephone Number: 575-403-6479
6. VFD Email Address/es: bardendee@yahoo.com
7. VFD Telephone Number(s): 575-576-2233
8. VFD Mailing Address: 1097 Route 66
City, State: Bard, New Mexico Zip Code: 88411

SECTION B – AUTHORIZATION

Name of VFD Fire Chief (print): Donald Adams

Signature of VFD Fire Chief: 

Please return this form on or before March 31 of each calendar year or as the VFDs administration changes. The form must be completed in its entirety and returned to PERA for processing. Please keep a copy for your VFDs records.



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2019 Volunteer Firefighter Service Credit Qualification Record

Instructions: Please print or type in dark ink. Check one box to indicate whether or not member met minimum qualifications for service credit for the year indicated. Return this form along with the Annual Reporting Form by March 31, 2020 to PERA. Keep copies for your VFDs records.

VFD Name: Bard-Endee Fire District

PERA VFD Number (5 digit number): 09602 County: Quay

Current Active (Non-Retired) VFD Members Only

Vol No.	Social Security Number (must be provided or no service will be credited)	Full Name of Volunteer Firefighter (Provide mailing address for each member)	Date of Birth (00/00/00)	Service Credit Eligibility Met? (Check one)	
				Yes	No
1.	000000000	Name: Kelly L. Boney Address: 4865 Quay Rd L San Jon, NM 88434	000000	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.	000000000	Name: Steven Carter Address: 105 Ute Dr. Logan NM 88426	000000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.	000000000	Name: Aeren C. Carter Address: 105 Ute Dr. Logan, NM 88426	000000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.	000000000	Name: Jackson Glenn Carter Address: 1916 Quay Rd 66 San Jon, NM 88434	000000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.	000000000	Name: Jennifer Carter Address: 1916 Quay Rd. 66 San Jon, NM 88434	000000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.	000000000	Name: Kalon Lafferty Address: 6003 Quay Rd M Bard, NM 88411	000000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7.	000000000	Name: Wade Lane Address: 502 Oak AVE. San Jon, NM 88411	000000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8.	000000000	Name: Benjamin Bone Address: 6452 Quay Rd O Bard, NM 88411	000000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9.	000000000	Name: Barton Bone Address: 6452 Quay Rd O Bard, NM 88411	000000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10.	000000000	Name: Casey R Adams Address: 5913 Quay Rd K Bard, NM 88411	000000	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Volunteer Fire Department Certification

(to be signed either by the VFD Fire Chief, District Fire Chief, County Fire Marshal or other authorized person)

Signature: Donald Adams Title: Chief Date: 3/9/2020

December 2019



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2019 Volunteer Firefighter Service Credit Qualification Record

Instructions: Please print or type in dark ink. Check one box to indicate whether or not member met minimum qualifications for service credit for the year indicated. Return this form along with the Annual Reporting Form by March 31, 2020 to PERA. Keep copies for your VFDs records.

VFD Name: Bard-Endee Fire District

PERA VFD Number (5 digit number): 09602

County: Quay

Current Active (Non-Retired) VFD Members Only

Vol No.	Social Security Number (must be provided or no service will be credited)	Full Name of Volunteer Firefighter (Provide mailing address for each member)	Date of Birth (00/00/00)	Service Credit Eligibility Met? (Check one)	
				Yes	No
1.	XXXXXXXXXX	Name: Heidi L. Adams Address: 6074 Quay Rd AK Tucumcari, NM 88401	XXXXXX	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.	XXXXXXXXXX	Name: Melissa L Johnson Address: 599 St Hwy 392 Bard, NM 88411	XXXXXX	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.	XXXXXXXXXX	Name: Ellen Yvonne Bone Address: 6552 Quay Rd O Bard, NM 88411	XXXXXX	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
5.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
6.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
7.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
8.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
9.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
10.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>

Volunteer Fire Department Certification

(to be signed either by the VFD Fire Chief, District Fire Chief, County Fire Marshal or other authorized person)

Signature: Doreen C. Adams Title: Chief Date: 3/9/2020

December 2019



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2019 Volunteer Firefighter Service Credit Qualification Record

Instructions: Please print or type in dark ink. Check one box to indicate whether or not member met minimum qualifications for service credit for the year indicated. Return this form along with the Annual Reporting Form by March 31, 2020 to PERA. Keep copies for your Volunteer Fire Department's (VFD) records.

VFD Name: Bard-Endee Fire District

PERA VFD Number (5 digit number): 09602 County: Quay

Retired VFD Members Only

Vol No.	Social Security Number (must be provided or no service will be credited)	Full Name of Volunteer Firefighter (Provide mailing address for each member)	Date of Birth (00/00/00)	Service Credit Eligibility Met? (Check one)	
				Yes	No
1.	XXXXXXXXXX	Name: Donald R. Adams Address: 5913 Quay Rd K Bard, NM 88411	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.	XXXXXXXXXX	Name: Linda Adams Address: 5913 Quay Rd K Bard, NM 88411	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.	XXXXXXXXXX	Name: Donald H. McCoy Address: 5936 Quay Rd G Bard, NM 88411	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.	XXXXXXXXXX	Name: Leslie Dale Bone Address: 6452 Quay Rd O Bard, NM 88411	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.	XXXXXXXXXX	Name: Jimmy Ray Johnson Address: 599 St Hwy 392 Bard, NM 88411	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.	XXXXXXXXXX	Name: Louis Glen Brown Address: 626 Route 66 Bard, NM 88411	00/00/00	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7.	XXXXXXXXXX	Name: Donald Ewin Carter Address: 1916 Quay Rd 66 San Jon, NM 88434	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8.	XXXXXXXXXX	Name: Debbie Carter Address: 1916 Quay Rd 66 San Jon, NM 88434	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
10.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>

Note: PERA has a 100% reporting policy. Retired VFD Members are not eligible to accrue additional service credit once pension benefits begin.

Volunteer Fire Department Certification

(to be signed either by the VFD Fire Chief, District Fire Chief, County Fire Marshal or other authorized person)

Signature: Donald Adams Title: Chief Date: 3/9/2020

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www.nmpera.org**2019 Volunteer Firefighters Annual Reporting Form****SECTION A – VOLUNTEER FIRE DEPARTMENT – GENERAL INFORMATION**

1. Volunteer Fire Department (VFD) Name: QUAY FIRE DEPARTMENT

2. VFD Mailing Address: 4314 Quay Rd 50.4

City, State: Tucumcari, NM Zip Code: 88401

3. PERA VFD Number (5 digit number): 09755 4. County Fire Marshal: Lucas Bugg

5. VFD Fire Chief: Gerald Hight 6. Email Address: ghight@plateautel.net

7. Phone (work): (575) 487-9514 (home/cell): (575) 487-9514

SECTION B – DEPARTMENT TOTALS

1.	New VFD Members reported in 2019	0
2.	Current Active (Non-Retired) VFD Members reported in 2019	12
3.	Retired VFD Members reported in 2019	6
4.	Total number of Volunteer Firefighters reported in 2019:	18

SECTION C - CERTIFICATION

I, Gerald Hight, Fire Chief of the QUAY FIRE DEPARTMENT
Volunteer Fire Department, affirm that the records submitted to PERA are true and correct and reflect 100% of my VFDs 2019 roster.

Gerald Hight
Signature of VFD Fire Chief

3/9/2020
Date

State of New Mexico

County of Quay

On this 9th day of March, 2020, known to me to be the person described in and who executed the above and foregoing instrument and acknowledged to me that they executed the same as their free act and deed.

Ellen Linder
(Notary Public)

My commission expires: 3/21/2023

Franklin McCasland
Municipal Mayor or Chair of County Commission Date 3/9/2020

Return this form along with the appropriate Qualification Record Form(s) by March 31, 2020 to PERA. Strikethroughs and white-out edits are not permitted. Keep copies for your VFDs records.

October 2019



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2019 Volunteer Fire Department (VFD) Fire Chief, Reporter and County Fire Marshal Contact Information

SECTION A – CONTACT INFORMATION (COMPLETE ALL SECTIONS)

1. VFD Name: Quay Fire Department
2. PERA VFD Number (5 digit number): 09755
3. Fire Chief Name: Gerald Hight Telephone Number: (575)487-9514
4. Reporter Name: Paula O'Steen Telephone Number: (575)760-7961
5. County Fire Marshal Name: Lucas Bugg Telephone Number: (575)403-6479
6. VFD Email Address/es: ghight@plateautel.net
7. VFD Telephone Number(s): (575)487-2002
8. VFD Mailing Address: 4314 Quay Rd 50.4
City, State: Tucumcari, NM Zip Code: 88401

SECTION B – AUTHORIZATION

Name of VFD Fire Chief (print): Gerald Hight

Signature of VFD Fire Chief: *Gerald Hight*

Please return this form on or before March 31 of each calendar year or as the VFDs administration changes. The form must be completed in its entirety and returned to PERA for processing. Please keep a copy for your VFDs records.



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2019 Volunteer Firefighter Service Credit Qualification Record

Instructions: Please print or type in dark ink. Check one box to indicate whether or not member met minimum qualifications for service credit for the year indicated. Return this form along with the Annual Reporting Form by March 31, 2020 to PERA. Keep copies for your VFDs records.

VFD Name: Quay Fire Department

PERA VFD Number (5 digit number): 09755

County: Quay

Current Active (Non-Retired) VFD Members Only					
Vol No.	Social Security Number (must be provided or no service will be credited)	Full Name of Volunteer Firefighter (Provide mailing address for each member)	Date of Birth (00/00/00)	Service Credit Eligibility Met? (Check one)	
				Yes	No
1.	XXXXXXXXXX	Name: Gambardella, Sheryl Address: 4290 Quay Rd AR, Tucumcari, NM 88401	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.	XXXXXXXXXX	Name: Thompson, Elizabeth Address: 4452 Quay Rd 49, Tucumcari, NM 88401	00/00/00	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.	XXXXXXXXXX	Name: Thompson, Rick Address: 4452 Quay Rd 49, Tucumcari, NM 88401	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.	XXXXXXXXXX	Name: Thompkins, Clinton Address: 4272 Quay Rd 54, Tucumcari, NM 88401	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.	XXXXXXXXXX	Name: Humphries, William Address: PO Box 861, Tucumcari, NM 88401	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.	XXXXXXXXXX	Name: Hampton, Teresa Address: 4545 Quay Rd 45, Tucumcari, NM 88401	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7.	XXXXXXXXXX	Name: Hight, Doris Address: 4286 Quay Rd 42, Tucumcari, NM 88401	00/00/00	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8.	XXXXXXXXXX	Name: Hampton, Roy Address: 4313 Quay Rd AR, Tucumcari, NM 88401	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9.	XXXXXXXXXX	Name: Hight, Dustan Address: 4314 Quay Rd 50.4, Tucumcari, NM 88401	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10.	XXXXXXXXXX	Name: Thompkins, Misty Address: 4272 Quay Rd 54, Tucumcari, NM 88401	00/00/00	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Volunteer Fire Department Certification

(to be signed either by the VFD Fire Chief, District Fire Chief, County Fire Marshal or other authorized person)

Signature: Gerald Hight Title: Chief Date: 3/9/2020

December 2019

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www.nmpera.org**2019 Volunteer Firefighter
Service Credit Qualification Record**

Instructions: Please print or type in dark ink. Check one box to indicate whether or not member met minimum qualifications for service credit for the year indicated. Return this form along with the Annual Reporting Form by March 31, 2020 to PERA. Keep copies for your VFDs records.

VFD Name: QUAY FIRE DEPARTMENTPERA VFD Number (5 digit number): 09755 County: Quay

Current Active (Non-Retired) VFD Members Only					
Vol No.	Social Security Number (must be provided or no service will be credited)	Full Name of Volunteer Firefighter (Provide mailing address for each member)	Date of Birth (00/00/00)	Service Credit Eligibility Met? (Check one)	
				Yes	No
1.		Name: Hight, Daniel Address: 4314 Quay Rd 50.4, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.		Name: Hampton, Quay Address: 4545 Quay Rd 45, Tucumcari, NM 88401		<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
4.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
5.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
6.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
7.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
8.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
9.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
10.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>

Volunteer Fire Department Certification

(to be signed either by the VFD Fire Chief, District Fire Chief, County Fire Marshal or other authorized person)

Signature: Bernd Hight Title: Chief Date: 3/9/2020

December 2019

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www.nmpera.org**2019 Volunteer Firefighter
Service Credit Qualification Record**

Instructions: Please print or type in dark ink. Check one box to indicate whether or not member met minimum qualifications for service credit for the year indicated. Return this form along with the Annual Reporting Form by March 31, 2020 to PERA. Keep copies for your Volunteer Fire Department's (VFD) records.

VFD Name: QUAY FIRE DEPARTMENTPERA VFD Number (5 digit number): 09755 County: Quay**Retired VFD Members Only**

Vol No.	Social Security Number (must be provided or no service will be credited)	Full Name of Volunteer Firefighter (Provide mailing address for each member)	Date of Birth (00/00/00)	Service Credit Eligibility Met? (Check one)	
				Yes	No
1.	00000000	Name: O'Steen, Paula Address: PO Box 643, Tucumcari, NM 88401	000000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.	00000000	Name: Hight, Paul Address: 4286 Quay Rd 42, Tucumcari, NM 88401	000000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.	00000000	Name: Sidwell, Marie-Lois Address: 6237 State Hwy 209, Tucumcari, NM 88401	000000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.	00000000	Name: Sidwell, Thomas Address: 6237 State Hwy 209, Tucumcari, NM 88401	000000	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5.	00000000	Name: Gray, Rex Address: 4173 Quay Rd 46, Tucumcari, NM 88401	000000	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6.	00000000	Name: Hight, Gerald Address: 4314 Quay Rd 50.4, Tucumcari, NM 88401	000000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
8.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
9.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
10.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>

Note: PERA has a 100% reporting policy. Retired VFD Members are not eligible to accrue additional service credit once pension benefits begin.

Volunteer Fire Department Certification

(to be signed either by the VFD Fire Chief, District Fire Chief, County Fire Marshal or other authorized person)

Signature: Gerald Hight Title: Chief Date: 3/9/2020

December 2019

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www.nmpera.org**2019 Volunteer Firefighters Annual Reporting Form****SECTION A – VOLUNTEER FIRE DEPARTMENT – GENERAL INFORMATION**

1. Volunteer Fire Department (VFD) Name: CONSERVANCY QUAY FIRE DISTRICT # 3
2. VFD Mailing Address: P.O. BOX 1246
City, State: TUCUMCARI, NEW MEXICO Zip Code: 88401
3. PERA VFD Number (5 digit number): 09638 4. County Fire Marshal: 575-403-6479
5. VFD Fire Chief: DEL CHOATE 6. Email Address: rural3@plateautel.net
7. Phone (work): (575) 403-7391 (home/cell): (575--) 576-2307

SECTION B – DEPARTMENT TOTALS

1.	New VFD Members reported in 2019	0
2.	Current Active (Non-Retired) VFD Members reported in 2019	10
3.	Retired VFD Members reported in 2019	6
4.	Total number of Volunteer Firefighters reported in 2019:	

SECTION C - CERTIFICATION

I, DEL CHOATE, Fire Chief of the CONSERVANCY QUAY FIRE DISTRICT # 3
Volunteer Fire Department, affirm that the records submitted to PERA are true and correct and reflect 100% of my VFDs 2019 roster.

Del Choate Chief
Signature of VFD Fire Chief

3-4-2020
Date

State of New Mexico

County of Quay

On this 4th day of March, 2020, known to me to be the person described in and who executed the above and foregoing instrument and acknowledged to me that they executed the same as their free act and deed.

Elle L. White
(Notary Public)

My commission expires 3/21/2023

Franklin McCasland
Municipal Mayor or Chair of County Commission

3/4/2020
Date

Return this form along with the appropriate Qualification Record Form(s) by March 31, 2020 to PERA. Strikethroughs and white-out edits are not permitted. Keep copies for your VFDs records.

October 2019



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**2019 Volunteer Fire Department (VFD)
Fire Chief, Reporter and County Fire Marshal
Contact Information**

SECTION A – CONTACT INFORMATION (COMPLETE ALL SECTIONS)

1. VFD Name: CONSERVANCY QUAY FIRE DISTRICT # 3
2. PERA VFD Number (5 digit number): 09638
3. Fire Chief Name: DEL CHOATE Telephone Number: 575-403-7391
4. Reporter Name: BEVERLY CHOATE Telephone Number: 575-403-8017
5. County Fire Marshal Name: LUCAS BUGG Telephone Number: 575-403-6479
6. VFD Email Address/es: rural3@plateautel.net
7. VFD Telephone Number(s): 575-403-7391
8. VFD Mailing Address: P.O. BOX 1246
TUCUMCARI, NEW MEXICO Zip Code: 88401

SECTION B – AUTHORIZATION

Name of VFD Fire Chief (print): DEL CHOATE

Signature of VFD Fire Chief: *Del Choate* chief

Please return this form on or before March 31 of each calendar year or as the VFDs administration changes. The form must be completed in its entirety and returned to PERA for processing. Please keep a copy for your VFDs records.

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www.nmpera.org**2019 Volunteer Firefighter
Service Credit Qualification Record**

Instructions: Please print or type in dark ink. Check one box to indicate whether or not member met minimum qualifications for service credit for the year indicated. Return this form along with the Annual Reporting Form by March 31, 2020 to PERA. Keep copies for your VFDs records.

VFD Name: CONSERVANCY QUAY FIRE DISTRICT # 3PERA VFD Number (5 digit number): 09638 County: QUAY**Current Active (Non-Retired) VFD Members Only**

Vol No.	Social Security Number (must be provided or no service will be credited)	Full Name of Volunteer Firefighter (Provide mailing address for each member)	Date of Birth (00/00/00)	Service Credit Eligibility Met? (Check one)	
				Yes	No
1.		Name: BEVELRY CHOATE Address: 6697 QUAY ROAD AD TUCUMCARI, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.		Name: JAMES D MCEWEN Address: 2801 QUAY ROAD 67 TUCUMCARI, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.		Name: R. DEL CHOATE Address: 6697 QUAY ROAD AD TUCUMCARI, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.		Name: DAVID PEACOCK Address: 3337 QUAY ROAD 71 TUCUMCARI, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.		Name: JOHN GRIFFITHS Address: PO BOX 626 TUCUMCARI, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.		Name: JUSTIN KNIGHT Address: 6831 QUAY ROAD AD TUCUMCARI, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
7.		Name: J DEVIN KANAPILLY Address: 6676 QUAY ROAD AE TUCUMCARI, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
8.		Name: JEREMY CADE FERNANDEZ Address: 2714 QUAY ROAD 65.5 TUCUMCARI, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
9.		Name: SHELBY BALDRIDGE Address: 6350 QUAY ROAD AC TUCUMCARI, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
10.		Name: ROLAND CHOATE Address: 6697 QUAY ROAD AD TUCUMCARI, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>

Volunteer Fire Department Certification

(to be signed either by the VFD Fire Chief, District Fire Chief, County Fire Marshal or other authorized person)

Signature: Dan Choate Title: Chief Date: 3-4-2020

December 2019

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www.nmpera.org**2019 Volunteer Firefighter
Service Credit Qualification Record**

Instructions: Please print or type in dark ink. Check one box to indicate whether or not member met minimum qualifications for service credit for the year indicated. Return this form along with the Annual Reporting Form by March 31, 2020 to PERA. Keep copies for your Volunteer Fire Department's (VFD) records.

VFD Name: CONSERVANCY QUAY FIRE DISTRICT # 3PERA VFD Number (5 digit number): 09638 County: QUAY**Retired VFD Members Only**

Vol No.	Social Security Number (must be provided or no service will be credited)	Full Name of Volunteer Firefighter (Provide mailing address for each member)	Date of Birth (00/00/00)	Service Credit Eligibility Met? (Check one)	
				Yes	No
1.	00000000	Name: PHILLIP GRIGGS Address: P.O. BOX 484 TUCUMCARI, NM 88401	0000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.	00000000	Name: ROBERT CURTIS Address: 3478 QUAY ROAD 72 TUCUMCARI, NM 88401	0000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.	00000000	Name: HARRY HECKENDORN Address: 7351 QUAY ROAD AI TUCUMCARI, NM 88401	0000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.	00000000	Name: TRESSIE CURTIS Address: 3478 QUAY ROAD 72 TUCUMCARI, NM 88401	0000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.	00000000	Name: DALLAS DOWELL Address: 7090 QUAY ROAD AI TUCUMCARI, NM 88401	0000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.	00000000	Name: DESMOND GRIGGS Address: 6983 QUAY ROAD AI TUCUMCARI, NM 88401	0000	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
8.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
9.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
10.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>

Note: PERA has a 100% reporting policy. Retired VFD Members are not eligible to accrue additional service credit once pension benefits begin.

Volunteer Fire Department Certification

(to be signed either by the VFD Fire Chief, District Fire Chief, County Fire Marshal or other authorized person)

Signature: Del Christe Title: Chief Date: 3-4-2020



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2019 Volunteer Fire Department (VFD) Fire Chief, Reporter and County Fire Marshal Contact Information

SECTION A – CONTACT INFORMATION (COMPLETE ALL SECTIONS)

1. VFD Name: Quay County Conservancy District #2
2. PERA VFD Number (5 digit number): 09637
3. Fire Chief Name: Danny Wallace Telephone Number: (575) 760-7794
4. Reporter Name: Michelle Farrow Telephone Number: (575) 576-2838
5. County Fire Marshal Name: Lucas Bugg Telephone Number: (575) 461-3645
6. VFD Email Address/es: Danny Wallace - rndwallace@yahoo.com or Michelle Farrow - tmjfarrow@gmail.com
7. VFD Telephone Number(s): (575) 760-7794 or (575) 357-8142
8. VFD Mailing Address: 2599 Quay Road 51
- City, State: Grady, New Mexico Zip Code: 88120

SECTION B – AUTHORIZATION

Name of VFD Fire Chief (print): Danny Wallace

Signature of VFD Fire Chief: *Danny Wallace*

Please return this form on or before March 31 of each calendar year or as the VFDs administration changes. The form must be completed in its entirety and returned to PERA for processing. Please keep a copy for your VFDs records.

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www.nmpera.org**2019 Volunteer Firefighters Annual Reporting Form****SECTION A – VOLUNTEER FIRE DEPARTMENT – GENERAL INFORMATION**

1. Volunteer Fire Department (VFD) Name: Conservancy District #2

2. VFD Mailing Address: 2599 Quay Rd 51
City, State: Grady, New Mexico Zip Code: 88120

3. PERA VFD Number (5 digit number): 09637 4. County Fire Marshal: Lucas Bugg

5. VFD Fire Chief: Danny Wallace 6. Email Address: rndwallace@yahoo.com

7. Phone (work): (575) 760-7794 (home/cell): (575) 357-8142

SECTION B – DEPARTMENT TOTALS

1.	New VFD Members reported in 2019	2
2.	Current Active (Non-Retired) VFD Members reported in 2019	16
3.	Retired VFD Members reported in 2019	5
4.	Total number of Volunteer Firefighters reported in 2019:	23

SECTION C – CERTIFICATION

I, Danny Wallace, Fire Chief of the Conservancy District #2
Volunteer Fire Department, affirm that the records submitted to PERA are true and correct and reflect 100% of my VFDs 2019 roster.

Danny Wallace
Signature of VFD Fire Chief

3-9-2020
Date

State of New Mexico

County of Quay

On this 9 day of March, 2020, known to me to be the person described in and who executed the above and foregoing instrument and acknowledged to me that they executed the same as their free act and deed.

Ellen L. Lusk
(Notary Public)

My commission expires: 3/21/2023

Franklin McIsland
Municipal Mayor or Chair of County Commission Date 3/9/2020

Return this form along with the appropriate Qualification Record Form(s) by March 31, 2020 to PERA. Strikethroughs and white-out edits are not permitted. Keep copies for your VFDs records.

October 2019



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2019 Volunteer Firefighter Service Credit Qualification Record

Instructions: Please print or type in dark ink. Check one box to indicate whether or not member met minimum qualifications for service credit for the year indicated. Return this form along with the Annual Reporting Form by March 31, 2020 to PERA. Keep copies for your Volunteer Fire Department's (VFD) records.

VFD Name: Conservancy District #2

PERA VFD Number (5 digit number): 09637 County: Quay

Retired VFD Members Only					
Vol No.	Social Security Number (must be provided or no service will be credited)	Full Name of Volunteer Firefighter (Provide mailing address for each member)	Date of Birth (00/00/00)	Service Credit Eligibility Met? (Check one)	
				Yes	No
1.		Name: Danny William Wallace Address: 2599 Quay Road 51, Grady, NM 88120		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.		Name: Tommy Morris Address: 814 Mesquite, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.		Name: Ray N. Nicoley Address: 3013 State Highway 278, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.		Name: Tommy D. Wallace Address: 5195 Quay Road AC, Grady, NM 88120		<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.		Name: Kyle Evetts Address: 3537 Quay Road 58, Tucumcari, NM 88401		<input type="checkbox"/>	<input checked="" type="checkbox"/>
6.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
7.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
8.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
9.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
10.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>

Note: PERA has a 100% reporting policy. Retired VFD Members are not eligible to accrue additional service credit once pension benefits begin.

Volunteer Fire Department Certification

(to be signed either by the VFD Fire Chief, District Fire Chief, County Fire Marshal or other authorized person)

Signature: Danny Wallace Title: Fire Chief Date: 3-4-20

December 2019



PERA

Public Employees
Retirement Association
of New Mexico

33 Plaza La Prensa
Santa Fe, New Mexico 87507
(505) 476-9300 voice
(800) 342-3422 Toll-Free
www.nmpera.org

2019 Volunteer Firefighter Service Credit Qualification Record

Instructions: Please print or type in dark ink. Check one box to indicate whether or not member met minimum qualifications for service credit for the year indicated. Return this form along with the Annual Reporting Form by March 31, 2020 to PERA. Keep copies for your VFDs records.

VFD Name: Conservancy District #2

PERA VFD Number (5 digit number): 09637 County: Quay

Current Active (Non-Retired) VFD Members Only

Vol No.	Social Security Number (must be provided or no service will be credited)	Full Name of Volunteer Firefighter (Provide mailing address for each member)	Date of Birth (00/00/00)	Service Credit Eligibility Met? (Check one)	
				Yes	No
1.	XXXXXXXXXX	Name: Robert Clarence Evans Address: 6075 Quay Road AK, Tucumcari, NM 88401	XXXX	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.	XXXXXXXXXX	Name: April M. Shipley Address: 508 W. Washington, Tucumcari, NM 88401	XXXX	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.	XXXXXXXXXX	Name: Noel Vasquez Acosta Address: 423 E. High Street, Tucumcari, NM 88401	XXXX	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.	XXXXXXXXXX	Name: Bo William TD Wallace Address: 8103 State Hwy 209, Tucumcari, NM 88401	XXXX	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.	XXXXXXXXXX	Name: Robert S. Jennings Address: 3311 Quay Road 62, Tucumcari, NM 88401	XXXX	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6.	XXXXXXXXXX	Name: Gary G. Massey Address: 5291 Quay Road AI, Tucumcari, NM 88401	XXXX	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7.	XXXXXXXXXX	Name: Roxie Lee Wallace Address: 2599 Quay Road 51, Grady, NM 88120	XXXX	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8.	XXXXXXXXXX	Name: Kreg Evetts Address: 5939 Quay Road AJ, Tucumcari, NM 88401	XXXX	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9.	XXXXXXXXXX	Name: Homer Timothy Farrow Address: 2838 State Hwy 278, Tucumcari, NM 88401	XXXX	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10.	XXXXXXXXXX	Name: Rebecca Michelle Farrow Address: 2838 State Hwy 278, Tucumcari, NM 88401	XXXX	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Volunteer Fire Department Certification

(to be signed either by the VFD Fire Chief, District Fire Chief, County Fire Marshal or other authorized person)

Signature: Danny Wallace Title: Fire Chief Date: 3-4-20

December 2019



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2019 Volunteer Firefighter Service Credit Qualification Record

Instructions: Please print or type in dark ink. Check one box to indicate whether or not member met minimum qualifications for service credit for the year indicated. Return this form along with the Annual Reporting Form by March 31, 2020 to PERA. Keep copies for your VFDs records.

VFD Name: Conservancy District #2

PERA VFD Number (5 digit number): 09637 County: Quay

Current Active (Non-Retired) VFD Members Only

Vol No.	Social Security Number (must be provided or no service will be credited)	Full Name of Volunteer Firefighter (Provide mailing address for each member)	Date of Birth (00/00/00)	Service Credit Eligibility Met? (Check one)	
				Yes	No
1.		Name: Cody Colt Massey Address: 5291 Quay Road Al, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.		Name: Kenton T. Perkins Address: P.O. Box 1021, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.		Name: Donnie Bidegain Address: 3040 Quay Road 60, Tucumcari, NM 88401		<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.		Name: Johnny Marshall Address: 2920 State Hwy 278, Tucumcari, NM 88401		<input type="checkbox"/>	<input checked="" type="checkbox"/>
5.		Name: Carlos Valverde Address: 800 W. Hancock, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.		Name: Matthew R. Evans Address: 6485 Quay Road P, San Jon, NM 88434		<input type="checkbox"/>	<input checked="" type="checkbox"/>
7.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
8.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
9.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
10.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>

Volunteer Fire Department Certification

(to be signed either by the VFD Fire Chief, District Fire Chief, County Fire Marshal or other authorized person)

Signature: Dannij Wallen Title: Fire Chief Date: 3-4-20

December 2019

**PERA**Public Employees
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of New Mexico33 Plaza La Prensa
Santa Fe, New Mexico 87507
(505) 476-9300 voice
(800) 342-3422 Toll-Free
www.nmpera.org**2019 Volunteer Firefighter
Service Credit Qualification Record**

Instructions: Please print or type in dark ink. Check one box to indicate whether or not member met minimum qualifications for service credit for the year indicated. Attach a completed Member Enrollment for Volunteer Firefighter form along with a copy of a driver's license and social security card for any Volunteer Firefighter not previously reported. Return this form along with the Annual Reporting Form by March 31, 2020 to PERA. Keep copies for your Volunteer Fire Department's (VFD) records.

VFD Name: Conservancy District #2PERA VFD Number (5 digit number): 09637County: Quay**New VFD Members Only**

Vol No.	Social Security Number (must be provided or no service will be credited)	Full Name of Volunteer Firefighter (Provide mailing address for each member)	Date of Birth (00/00/00)	Service Credit Eligibility Met? (Check one)	
				Yes	No
1.		Name: Ralph Lopez Address: 3321 State Hwy 278, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.		Name: Cody L. Byrd Address: 3544 Quay Rd 62, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
4.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
5.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
6.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
7.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
8.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
9.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
10.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>

Volunteer Fire Department Certification

(to be signed either by the VFD Fire Chief, District Fire Chief, County Fire Marshal or other authorized person)

Signature: Danny Wallace Title: Fire Chief Date: 3-4-20

December 2019



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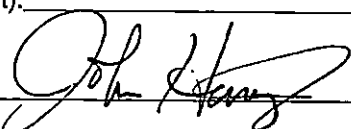
**2019 Volunteer Fire Department (VFD)
Fire Chief, Reporter and County Fire Marshal
Contact Information**

SECTION A – CONTACT INFORMATION (COMPLETE ALL SECTIONS)

1. VFD Name: Conservancy Fire District 1 Quay County
2. PERA VFD Number (5 digit number): 09636
3. Fire Chief Name: John Hinze Telephone Number: 575-403-7682
4. Reporter Name: Michelle Jaynes Telephone Number: 575-815-9015
5. County Fire Marshal Name: Lucas Bugg Telephone Number: 575-403-6479
6. VFD Email Address/es: district1fire@outlook.com
7. VFD Telephone Number(s): 575-403-7682
8. VFD Mailing Address: P.O. Box 725
- City, State: Tucumcari, NM Zip Code: 88401

SECTION B – AUTHORIZATION

Name of VFD Fire Chief (print): John Hinze

Signature of VFD Fire Chief: 

Please return this form on or before March 31 of each calendar year or as the VFDs administration changes. The form must be completed in its entirety and returned to PERA for processing. Please keep a copy for your VFDs records.



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2019 Volunteer Firefighters Annual Reporting Form

SECTION A – VOLUNTEER FIRE DEPARTMENT – GENERAL INFORMATION

- Volunteer Fire Department (VFD) Name: Conservancy Fire District 1 Quay County
- VFD Mailing Address: P.O. Box 725
City, State: Tucumcari, NM Zip Code: 88401
- PERA VFD Number (5 digit number): 09636
- County Fire Marshal: Lucas Bugg
- VFD Fire Chief: John Hinze
- Email Address: pastorjohn@fbctuc.com
- Phone (work): (575) 461-2724 (home/cell): (575) 403-7682

SECTION B – DEPARTMENT TOTALS

1.	New VFD Members reported in 2019	0
2.	Current Active (Non-Retired) VFD Members reported in 2019	11
3.	Retired VFD Members reported in 2019	1
4.	Total number of Volunteer Firefighters reported in 2019:	12

SECTION C - CERTIFICATION

I, John Hinze, Fire Chief of the Conservancy Fire District 1 Quay Co.
Volunteer Fire Department, affirm that the records submitted to PERA are true and correct and reflect 100% of my VFDs 2019 roster.

John Hinze
Signature of VFD Fire Chief

3-9-2020
Date

State of New Mexico

County of Quay

On this 9 day of March, 20, 20, known to me to be the person described in and who executed the above and foregoing instrument and acknowledged to me that they executed the same as their free act and deed.

Ellen Lee
(Notary Public)

My commission expires 3/21/2023

Municipal Mayor or Chair of County Commission

3-9-2020
Date

Return this form along with the appropriate Qualification Record Form(s) by March 31, 2020 to PERA. Strikethroughs and white-out edits are not permitted. Keep copies for your VFDs records.



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2019 Volunteer Firefighter Service Credit Qualification Record

Instructions: Please print or type in dark ink. Check one box to indicate whether or not member met minimum qualifications for service credit for the year indicated. Return this form along with the Annual Reporting Form by March 31, 2020 to PERA. Keep copies for your Volunteer Fire Department's (VFD) records.

VFD Name: Conservancy Fire District 1 Quay County

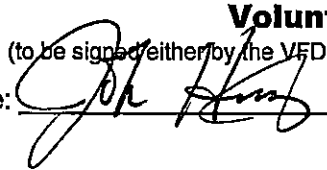
PERA VFD Number (5 digit number): 09636 County: Quay

Retired VFD Members Only					
Vol No.	Social Security Number (must be provided or no service will be credited)	Full Name of Volunteer Firefighter (Provide mailing address for each member)	Date of Birth (00/00/00)	Service Credit Eligibility Met? (Check one)	
				Yes	No
1.	012-022244	Name: John Bugg Address: P.O. Box 625, Tucumcari, NM 88401	02/27/60	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
3.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
4.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
5.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
6.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
7.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
8.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
9.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
10.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>

Note: PERA has a 100% reporting policy. Retired VFD Members are not eligible to accrue additional service credit once pension benefits begin.

Volunteer Fire Department Certification

(to be signed either by the VFD Fire Chief, District Fire Chief, County Fire Marshal or other authorized person)

Signature:  Title: Fire Chief Date: 3/9/2020

December 2019



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2019 Volunteer Firefighter Service Credit Qualification Record

Instructions: Please print or type in dark ink. Check one box to indicate whether or not member met minimum qualifications for service credit for the year indicated. Return this form along with the Annual Reporting Form by March 31, 2020 to PERA. Keep copies for your VFDs records.

VFD Name: Conservancy Fire District 1 Quay County

PERA VFD Number (5 digit number): 09636 County: Quay

Current Active (Non-Retired) VFD Members Only

Vol No.	Social Security Number (must be provided or no service will be credited)	Full Name of Volunteer Firefighter (Provide mailing address for each member)	Date of Birth (00/00/00)	Service Credit Eligibility Met? (Check one)	
				Yes	No
1.		Name: Gordon Phillip McKnight Address: 10233 State Highway 104, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.		Name: Bailey Phillip McKnight Address: 10233 State Highway 104, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.		Name: John Hinze Address: 6291 QR AQ, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.		Name: Reyes Gonzales Address: 4267 QR 62.9, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.		Name: Scot Jaynes Address: 4205 QR 63, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.		Name: Misty Smith Address: 623 S. 1st Street, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
7.		Name: Michelle Jaynes Address: 4205 QR 63, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
8.		Name: Mark Preciado Address: 2714 S. 3rd, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
9.		Name: Todd Smith Address: 623 S. 1st Street, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
10.		Name: Lucas Bugg Address: 4518 State Hwy 66, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>

Volunteer Fire Department Certification

(to be signed either by the VFD Fire Chief, District Fire Chief, County Fire Marshal or other authorized person)

Signature: Title: Fire Chief Date: 3/9/2020

December 2019



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2019 Volunteer Firefighter Service Credit Qualification Record

Instructions: Please print or type in dark ink. Check one box to indicate whether or not member met minimum qualifications for service credit for the year indicated. Return this form along with the Annual Reporting Form by March 31, 2020 to PERA. Keep copies for your VFDs records.

VFD Name: Conservancy Fire District 1 Quay County

PERA VFD Number (5 digit number): 09636

County: Quay

Current Active (Non-Retired) VFD Members Only

Vol No.	Social Security Number (must be provided or no service will be credited)	Full Name of Volunteer Firefighter (Provide mailing address for each member)	Date of Birth (00/00/00)	Service Credit Eligibility Met? (Check one)	
				Yes	No
1.		Name: Estephan Garcia Address: 623 S. 1st Street, Tucumcari, NM 88401		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
3.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
4.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
5.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
6.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
7.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
8.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
9.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>
10.		Name: Address:		<input type="checkbox"/>	<input type="checkbox"/>

Volunteer Fire Department Certification

(to be signed either by the VFD Fire Chief, District Fire Chief, County Fire Marshal or other authorized person)

Signature: Title: Fire Chief Date: 3/9/2020

December 2019

**NEW MEXICO DEPARTMENT OF FINANCE AND ADMINISTRATION
FIRST AMENDMENT TO
INTERGOVERNMENTAL GRANT AGREEMENT
NUMBER 2019-3410-ZD5037-01018**

The New Mexico Department of Finance and Administration, an executive department of the State of New Mexico ("Grantor"), and Quay County, a county and political subdivision of the State of New Mexico ("Grantee"), agree:

1. Recitals. Grantor and Grantee are parties to that certain Intergovernmental Grant Agreement Number 2019-3410-ZD5037-01018 dated October 2, 2019 whereby Grantor awarded Grantee with a Grant award for the purpose of ensuring a fair, accurate and complete count for New Mexico in the 2020 Census, thereby achieving the highest self-response rate possible of hard-to-count (HTC) communities and populations in New Mexico ("Grant Agreement"). Grantor and Grantee want to amend the Grant Agreement as provided in this First Amendment to Intergovernmental Grant Agreement Number 2019-3410-ZD5037-01018 ("First Amendment").
2. Definitions. Capitalized terms used but not defined in this First Amendment have the meanings given to them in the Grant Agreement.
3. Amendment. The Grant Agreement is amended as follows:
 - a. The third paragraph of Article I of the Grant Agreement is amended to read as follows:

This award is made from funds appropriated by the Legislature to the Grantor pursuant to N.M. Laws 2019 (54th Legislature, 1st Session), Chapter 271, Section 5(37) and N.M. Laws 2020 (54th Legislature, 2nd Session), Chapter 2, Section 1.

- b. The following is added to the end of the fourth paragraph of Article I of the Grant Agreement:

GRANTOR may provide GRANTEE with an additional award pursuant to Section II.D of this Agreement.

- c. The following is added in between the current first and second paragraphs of Section II.D of the Grant Agreement:

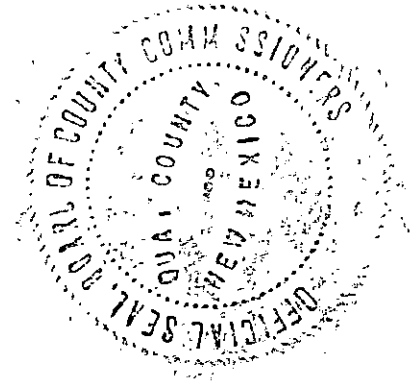
Additionally, on or after March 1, 2020, Grantor may, in such increments as Grantor may determine, award an additional \$10,973.60 to Grantee, subject to Grantor's satisfaction with Grantee's compliance with this Grant Agreement and performance of the Scope of Work, including without limitation Grantee executing its Outreach Plan and developing relationships with local community-based organizations. All terms and conditions in this Grant Agreement on Grantee's use of the original Grant award will apply to such additional Grant award. Following any such additional Grant award, Grantee will adjust its budget accordingly, subject to Grantor's approval.

- d. All references in the Grant Agreement to Paige Best and the email address paigeL.best@state.nm.us are amended to refer to Ramya Gorantla and Emma Erickson-Kery and the email addresses ramya.gorantla@state.nm.us and emma.erickson-kery@state.nm.us, respectively.
4. Approval. Grantee represents and warrants to Grantor that all actions necessary to approve of this First Amendment and to make this First Amendment a valid and binding obligation of Grantee have been completed.
5. Ratification; Survival. Except as modified by this First Amendment, Grantor and Grantee ratify and affirm the terms of the Grant Agreement. All terms of the Grant Agreement not modified by this First Amendment will survive the execution hereof, and this First Amendment is subject to those terms.
6. Miscellaneous. This First Amendment may be executed in one or more counterparts, each of which will be deemed an original and together will constitute one and the same instrument. This First Amendment is governed by the laws of the State of New Mexico and may only be modified in a writing executed by both Grantor and Grantee.

[Counterpart Signatures Follow]

IN WITNESS WHEREOF, the Grantee and Grantor do hereby execute this First Amendment as of the date last written below. This First Amendment has been approved by:

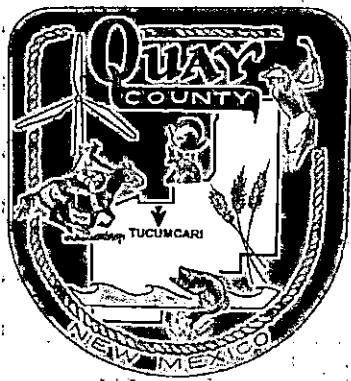
GRANTEE:



By: Franklin McCarland 3/9/2020
Authorized Person Date

FOR THE GRANTOR, THE NEW MEXICO DEPARTMENT OF FINANCE AND ADMINISTRATION:

By: _____
Olivia Padilla-Jackson, Cabinet Secretary, Grantor Date



QUAY COUNTY GOVERNMENT

FISCAL YEAR 2019-2020

RESOLUTION NO. 39

Pursuant to Section 66-6-23, NMSA Laws 1978 Chapter 35, Section 358, the Quay County Board of Commissioners hereby certify the Public Roads maintained by the County of Quay as of January 1, 2020.

The annual Certified County Maintained Mileage Report being reported to the Secretary of the Department of Transportation is 1,108.04. This mileage is hereby certified by Resolution No. 39 by the Board of Quay County Commissioners.



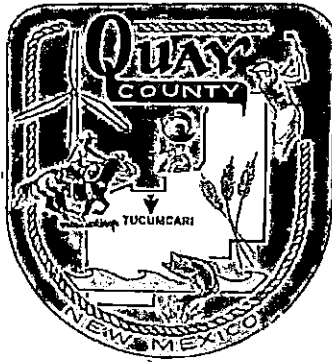

Franklin McCasland, Chairman


Sue Dowell, Member


Mike Cherry, Member

Attest:


Ellen White, Quay County Clerk



QUAY COUNTY GOVERNMENT

300 South Third Street

P.O. Box 1246

Tucumcari, NM 88401

Phone: (575) 461-2112

Fax: (575) 461-6208

March 9, 2020

Robert Young
New Mexico Department of Transportation
Office of Strategic and Asset Management, SB-2
P.O. Box 1149
Santa Fe, NM 87504-1149

Dear Mr. Young,

The following road segment has been **added** to the Quay County's Road Certification for 2020:

<u>Road</u>	<u>Block</u>	<u>Mileage</u>
Flintridge Ave	1418 – 1421	.016

Enclosed, please find the Administrative Resolution, Route Listing in alpha and numeric order with the length and maintained mileage for 2020, a 2020 County Map identifying the county maintained roads, and a CD with the road listings and map. If further information is required, please let me know.

Sincerely,

Larry J. Moore
Road Superintendent

Enc.

QUAY COUNTY ROAD CERTIFICATION

2020

MILEAGE	ROADS	BLOCK NUMBERS
1.18	QUAY RD 24	4374 TO 4498 BLOCK
7.00	QUAY RD 24	5000 TO 5700 BLOCK
6.00	QUAY RD 25	3900 TO 4500 BLOCK
1.00	QUAY RD 25	4800 TO 4900 BLOCK
6.10	QUAY RD 25	5000 TO 5600 BLOCK
0.85	QUAY RD 25.5	4500 TO 4600 BLOCK
3.00	QUAY RD 26	4900 TO 5200 BLOCK
5.00	QUAY RD 27	4500 TO 5000 BLOCK
8.20	QUAY RD 28	5700 TO 6300 BLOCK
2.00	QUAY RD 29	4900 TO 5100 BLOCK
3.00	QUAY RD 29	5400 TO 5700 BLOCK
2.00	QUAY RD 30	2700 TO 2900 BLOCK
1.00	QUAY RD 30	5000 TO 5100 BLOCK
6.00	QUAY RD 31	2900 TO 3500 BLOCK
1.00	QUAY RD 31	4100 TO 4200 BLOCK
14.00	QUAY RD 31	4300 TO 5700 BLOCK
1.00	QUAY RD 32	2800 TO 2900 BLOCK
4.00	QUAY RD 32	4200 TO 4600 BLOCK
1.00	QUAY RD 32	5000 TO 5100 BLOCK
1.25	QUAY RD 32.5	5100 TO 5200 BLOCK
2.60	QUAY RD 33	4125 TO 4400 BLOCK
10.05	QUAY RD 33	4900 TO 5900 BLOCK
9.75	QUAY RD 34	2700 TO 3675 BLOCK
1.50	QUAY RD 34	4250 TO 4400 BLOCK
5.25	QUAY RD 34.5	5900 TO 6300 BLOCK
1.01	QUAY RD 35	3000 TO 3100 BLOCK
1.02	QUAY RD 35	3200 TO 3300 BLOCK
2.00	QUAY RD 35	4200 TO 4400 BLOCK
1.00	QUAY RD 35	4800 TO 4900 BLOCK
1.10	QUAY RD 35	5100 TO 5200 BLOCK
3.00	QUAY RD 36	2100 TO 2400 BLOCK
17.00	QUAY RD 36	2700 TO 4400 BLOCK
1.00	QUAY RD 36	4700 TO 4800 BLOCK
1.80	QUAY RD 37	2400 TO 2500 BLOCK
6.13	QUAY RD 37	2700 TO 3300 BLOCK
2.00	QUAY RD 37	5900 TO 6100 BLOCK
8.00	QUAY RD 38	2100 TO 2900 BLOCK

QUAY COUNTY ROAD CERTIFICATION

2020

MILEAGE	ROADS	BLOCK NUMBERS
1.00	QUAY RD 38	3300 TO 3400 BLOCK
3.00	QUAY RD 38	3800 TO 4100 BLOCK
3.00	QUAY RD 38	4300 TO 4600 BLOCK
11.00	QUAY RD 40	2400 TO 3500 BLOCK
2.00	QUAY RD 41	2500 TO 2700 BLOCK
3.00	QUAY RD 41	2900 TO 3200 BLOCK
3.00	QUAY RD 41	5900 TO 6200 BLOCK
2.00	QUAY RD 42	1500 TO 1698 BLOCK
3.00	QUAY RD 42	2100 TO 2400 BLOCK
0.84	QUAY RD 42	4200 TO 4300 BLOCK
2.00	QUAY RD 43	1900 TO 2100 BLOCK
7.33	QUAY RD 43	4200 TO 4933 BLOCK
4.00	QUAY RD 44	1500 TO 1900 BLOCK
2.95	QUAY RD 44	3000 TO 3275 BLOCK
2.00	QUAY RD 44	4100 TO 4300 BLOCK
4.00	QUAY RD 45	1500 TO 1900 BLOCK
1.00	QUAY RD 45	3800 TO 3900 BLOCK
4.13	QUAY RD 45	4200 TO 4545 BLOCK
3.00	QUAY RD 46	1900 TO 2200 BLOCK
1.35	QUAY RD 46	2900 TO 3000 BLOCK
5.00	QUAY RD 46	3900 TO 4400 BLOCK
5.00	QUAY RD 47	1500 TO 2000 BLOCK
3.11	QUAY RD 47	4000 TO 4300 BLOCK
2.00	QUAY RD 48	1500 TO 1700 BLOCK
3.25	QUAY RD 48	2000 TO 2325 BLOCK
0.80	QUAY RD 48	4200 TO 4300 BLOCK
4.60	QUAY RD 49	0500 TO 0910 BLOCK
2.00	QUAY RD 49	2000 TO 2200 BLOCK
1.84	QUAY RD 49	4300 TO 4500 BLOCK
2.75	QUAY RD 49.5	6025 TO 6300 BLOCK
7.53	QUAY RD 50	1200 TO 1800 BLOCK
1.00	QUAY RD 50	1900 TO 2000 BLOCK
3.14	QUAY RD 50.4	4150 TO 4400 BLOCK
3.05	QUAY RD 51	0900 TO 1200 BLOCK
3.80	QUAY RD 51	2550 TO 2900 BLOCK
3.25	QUAY RD 52	3400 TO 3700 BLOCK
0.00	QUAY RD 52	REMOVED 2011

QUAY COUNTY ROAD CERTIFICATION

2020

MILEAGE	ROADS	BLOCK NUMBERS
1.25	QUAY RD 52.5	3300 TO 3400 BLOCK
0.94	QUAY RD 52.7	2900 TO 3000 BLOCK
1.10	QUAY RD 53	0500 TO 0600 BLOCK
5.96	QUAY RD 53	3700 TO 4100 BLOCK
0.32	QUAY RD 54	1750 TO 1800 BLOCK
1.83	QUAY RD 54	4100 TO 4300 BLOCK
4.57	QUAY RD 55	1800 TO 2200 BLOCK
3.15	QUAY RD 55	4100 TO 4415 BLOCK
1.53	QUAY RD 56	3400 TO 3535 BLOCK
4.00	QUAY RD 57	1800 TO 2200 BLOCK
3.20	QUAY RD 57	3070 TO 3400 BLOCK
0.30	QUAY RD 57.8	3200 TO 3230 BLOCK
0.98	QUAY RD 58	1700 TO 1800 BLOCK
5.74	QUAY RD 58	2100 TO 2674 BLOCK
0.50	QUAY RD 58	3200 TO 3250 BLOCK
3.64	QUAY RD 58	3300 TO 3700 BLOCK
1.07	QUAY RD 59	3300 TO 3419 BLOCK
0.66	QUAY RD 59	3600 TO 3670 BLOCK
0.13	QUAY RD 59.5	4050 TO 4065 BLOCK
2.44	QUAY RD 60	0875 TO 1100 BLOCK
1.52	QUAY RD 60	1670 TO 1820 BLOCK
2.50	QUAY RD 60	3000 TO 3250 BLOCK
3.13	QUAY RD 60	3350 TO 3699 BLOCK
0.74	QUAY RD 60	4000 TO 4075 BLOCK
0.20	QUAY RD 60.2	4020 TO 4049 BLOCK
1.00	QUAY RD 61	2100 TO 2200 BLOCK
3.00	QUAY RD 61	2800 TO 3100 BLOCK
1.65	QUAY RD 61	3300 TO 3465 BLOCK
0.50	QUAY RD 61	3550 TO 3600 BLOCK
0.42	QUAY RD 61	3975 TO 4050 BLOCK
2.00	QUAY RD 62	1300 TO 1500 BLOCK
6.00	QUAY RD 62	3000 TO 3600 BLOCK
0.35	QUAY RD 62.5	3870 TO 3884 BLOCK
0.25	QUAY RD 62.5	4175 TO 4200 BLOCK
1.65	QUAY RD 62.9	4150 TO 4325 BLOCK
0.94	QUAY RD 63	1000 TO 1100 BLOCK
1.00	QUAY RD 63	2100 TO 2200 BLOCK

QUAY COUNTY ROAD CERTIFICATION

2020

MILEAGE	ROADS	BLOCK NUMBERS
0.50	QUAY RD 63	2650 TO 2700 BLOCK
1.85	QUAY RD 63	3600 TO 3750 BLOCK
4.20	QUAY RD 63	4100 TO 4525 BLOCK
0.20	QUAY RD 63.2	3675 TO 3698 BLOCK
0.76	QUAY RD 63.4	3630 TO 3698 BLOCK
0.50	QUAY RD 63.5	3600 TO 3650 BLOCK
1.00	QUAY RD 63.8	3600 TO 3700 BLOCK
7.46	QUAY RD 64	1350 TO 2100 BLOCK
4.97	QUAY RD 64	2750 TO 3275 BLOCK
0.42	QUAY RD 64	3400 TO 3450 BLOCK
0.79	QUAY RD 64	3600 TO 3700 BLOCK
1.00	QUAY RD 64	3775 TO 3875 BLOCK
2.15	QUAY RD 64	4100 TO 4300 BLOCK
0.75	QUAY RD 64.2	4100 TO 4175 BLOCK
0.36	QUAY RD 64.4	4300 TO 4336 BLOCK
1.54	QUAY RD 64.5	3700 TO 3850 BLOCK
0.64	QUAY RD 64.5	4040 TO 4100 BLOCK
0.70	QUAY RD 64.5	4225 TO 4300 BLOCK
0.12	QUAY RD 64.6	4040 TO 4054 BLOCK
0.30	QUAY RD 64.7	3950 TO 3998 BLOCK
0.11	QUAY RD 64.7	4040 TO 4049 BLOCK
0.32	QUAY RD 64.8	4050 TO 4075 BLOCK
0.23	QUAY RD 64.9	4050 TO 4075 BLOCK
7.50	QUAY RD 65	1350 TO 2100 BLOCK
1.00	QUAY RD 65	2800 TO 2900 BLOCK
1.00	QUAY RD 65	3200 TO 3300 BLOCK
0.55	QUAY RD 65	3900 TO 3950 BLOCK
0.73	QUAY RD 65	4100 TO 4175 BLOCK
2.33	QUAY RD 65	4225 TO 4440 BLOCK
2.00	QUAY RD 65.5	2700 TO 2900 BLOCK
0.35	QUAY RD 65.9	1000 TO 1030 BLOCK
2.00	QUAY RD 66	0300 TO 0500 BLOCK
2.00	QUAY RD 66	1800 TO 2000 BLOCK
2.00	QUAY RD 66	2700 TO 2900 BLOCK
1.40	QUAY RD 66	4150 TO 4350 BLOCK
1.65	QUAY RD 66.5	2000 TO 2200 BLOCK
1.64	QUAY RD 66.5	4000 TO 4150 BLOCK

QUAY COUNTY ROAD CERTIFICATION

2020

MILEAGE	ROADS	BLOCK NUMBERS
1.00	QUAY RD 67	0800 TO 0900 BLOCK
1.97	QUAY RD 67	1375 TO 1600 BLOCK
2.00	QUAY RD 67	1800 TO 2000 BLOCK
3.50	QUAY RD 67	2800 TO 3150 BLOCK
1.20	QUAY RD 67	4150 TO 4250 BLOCK
0.35	QUAY RD 67.7	1350 TO 1400 BLOCK
1.00	QUAY RD 68	2800 TO 2900 BLOCK
3.00	QUAY RD 69	0500 TO 0800 BLOCK
0.51	QUAY RD 69	1750 TO 1800 BLOCK
1.00	QUAY RD 69	2000 TO 2100 BLOCK
1.00	QUAY RD 69	2700 TO 2800 BLOCK
3.00	QUAY RD 69	3100 TO 3400 BLOCK
0.38	QUAY RD 69.9	2950 TO 3000 BLOCK
1.00	QUAY RD 70	0700 TO 0800 BLOCK
4.00	QUAY RD 70	1800 TO 2200 BLOCK
1.00	QUAY RD 70	3300 TO 3400 BLOCK
3.00	QUAY RD 71	1700 TO 2000 BLOCK
1.90	QUAY RD 71	2400 TO 2600 BLOCK
1.03	QUAY RD 71	3300 TO 3400 BLOCK
1.25	QUAY RD 71.2	2300 TO 2400 BLOCK
6.86	QUAY RD 72	1100 TO 1800 BLOCK
1.89	QUAY RD 72	2200 TO 2450 BLOCK
0.90	QUAY RD 72	2475 TO 2565 BLOCK
0.66	QUAY RD 72	3225 TO 3300 BLOCK
1.54	QUAY RD 72	3375 TO 3550 BLOCK
0.29	QUAY RD 72.5	2450 TO 2475 BLOCK
0.83	QUAY RD 73	2400 TO 2500 BLOCK
0.50	QUAY RD 73	3350 TO 3400 BLOCK
2.00	QUAY RD 75	1800 TO 2000 BLOCK
1.81	QUAY RD 78	2500 TO 2675 BLOCK
6.00	QUAY RD 80.4	1400 TO 1900 BLOCK
1.35	QUAY RD 82.4	1550 TO 1700 BLOCK
2.20	QUAY RD 83	1900 TO 2100 BLOCK
1.32	QUAY RD 85	2000 TO 2100 BLOCK
4.73	QUAY RD 89	1800 TO 2100 BLOCK
2.22	QUAY RD 90	0300 TO 0500 BLOCK
6.98	QUAY RD 90	1200 TO 1850 BLOCK

QUAY COUNTY ROAD CERTIFICATION

2020

MILEAGE	ROADS	BLOCK NUMBERS
1.47	QUAY RD 92	0550 TO 0700 BLOCK
3.43	QUAY RD 92	1800 TO 2100 BLOCK
1.00	QUAY RD 92.5	0400 TO 0500 BLOCK
0.25	QUAY RD 92.5	0525 TO 0550 BLOCK
4.35	QUAY RD 93	0001 TO 0450 BLOCK
12.52	QUAY RD 93	0525 TO 1800 BLOCK
1.80	QUAY RD 95.5	100 TO 280 BLOCK
0.20	QUAY RD 95.5	490 TO 510 BLOCK
14.49	QUAY RD 96	0600 TO 2098 BLOCK
4.00	QUAY RD 98	0350 TO 0699 BLOCK
2.60	QUAY RD 98.5	0700 TO 0900 BLOCK
5.43	QUAY RD 99	1300 TO 1700 BLOCK
8.00	QUAY RD 101	0700 TO 1500 BLOCK
2.00	QUAY RD 102	1500 TO 1700 BLOCK
528.40	SUBTOTAL	
0.50	QUAY RD A	6300 TO 6350 BLOCK
1.54	QUAY RD C	6600 TO 6750 BLOCK

QUAY COUNTY ROAD CERTIFICATION

2020

MILEAGE	ROADS	BLOCK NUMBERS
6.73	QUAY RD C	8600 TO 9300 BLOCK
7.40	QUAY RD E	6600 TO 7350 BLOCK
4.20	QUAY RD E	8900 TO 9250 BLOCK
1.75	QUAY RD E.5	9550 TO 9675 BLOCK
1.00	QUAY RD F	5950 TO 6050 BLOCK
6.00	QUAY RD F	8300 TO 8900 BLOCK
3.38	QUAY RD F.5	9300 TO 9525 BLOCK
1.00	QUAY RD G	5900 TO 6000 BLOCK
1.00	QUAY RD G	6900 TO 7000 BLOCK
0.58	QUAY RD H	4800 TO 4860 BLOCK
4.02	QUAY RD H	6600 TO 7000 BLOCK
2.63	QUAY RD I	4860 TO 5100 BLOCK
1.37	QUAY RD I	6600 TO 6750 BLOCK
0.50	QUAY RD I	8400 TO 8450 BLOCK
10.37	QUAY RD J	6300 TO 7200 BLOCK
2.58	QUAY RD J	8200 TO 8400 BLOCK
2.70	QUAY RD J	9600 TO 9850 BLOCK
2.04	QUAY RD K	5900 TO 6100 BLOCK
1.16	QUAY RD K	6600 TO 6710 BLOCK
10.00	QUAY RD K	8270 TO 8800 BLOCK
3.80	QUAY RD L	4800 TO 5180 BLOCK
0.40	QUAY RD L	6600 TO 6640 BLOCK
8.55	QUAY RD L	8800 TO 9600 BLOCK
10.45	QUAY RD M	5180 TO 6225 BLOCK
5.07	QUAY RD M	9600 TO 10100 BLOCK
3.00	QUAY RD N	6500 TO 6800 BLOCK
6.16	QUAY RD O	4200 TO 4800 BLOCK
8.45	QUAY RD O	5900 TO 6775 BLOCK
2.10	QUAY RD O	9600 TO 9775 BLOCK
7.14	QUAY RD P	4200 TO 4900 BLOCK
0.25	QUAY RD P	5875 TO 5900 BLOCK
0.66	QUAY RD P	6325 TO 6400 BLOCK
3.63	QUAY RD P	6480 TO 6850 BLOCK
2.61	QUAY RD P	8750 TO 9000 BLOCK
5.23	QUAY RD Q	4300 TO 4800 BLOCK
1.26	QUAY RD Q	5900 TO 6050 BLOCK
2.50	QUAY RD Q	6375 TO 6625 BLOCK

QUAY COUNTY ROAD CERTIFICATION

2020

MILEAGE	ROADS	BLOCK NUMBERS
1.81	QUAY RD Q	8750 TO 9000 BLOCK
2.00	QUAY RD R	4500 TO 4700 BLOCK
1.32	QUAY RD R	5050 TO 5200 BLOCK
9.81	QUAY RD R	8150 TO 8750 BLOCK
4.35	QUAY RD R	9000 TO 9400 BLOCK
1.00	QUAY RD S	5400 TO 5500 BLOCK
1.55	QUAY RD S	5700 TO 5875 BLOCK
2.00	QUAY RD S	6400 TO 6600 BLOCK
1.19	QUAY RD S	9200 TO 9325 BLOCK
2.06	QUAY RD S	9600 TO 9800 BLOCK
1.00	QUAY RD T	4300 TO 4400 BLOCK
1.12	QUAY RD T	4700 TO 4800 BLOCK
13.33	QUAY RD T	6300 TO 7610 BLOCK
0.57	QUAY RD T	7975 TO 8025 BLOCK
0.20	QUAY RD T.2	9270 TO 9290 BLOCK
8.01	QUAY RD U	3600 TO 4400 BLOCK
9.50	QUAY RD U	5700 TO 6650 BLOCK
1.00	QUAY RD U	6900 TO 7000 BLOCK
0.85	QUAY RD V	3800 TO 3900 BLOCK
7.10	QUAY RD V	4200 TO 4900 BLOCK
1.50	QUAY RD V	5550 TO 5700 BLOCK
2.00	QUAY RD V	6100 TO 6350 BLOCK
0.57	QUAY RD V	7725 TO 7800 BLOCK
0.46	QUAY RD V.5	7160 TO 7200 BLOCK
0.40	QUAY RD W	3850 TO 3900 BLOCK
0.67	QUAY RD W	7730 TO 7800 BLOCK
3.00	QUAY RD X	3600 TO 3900 BLOCK
1.00	QUAY RD X	7100 TO 7200 BLOCK
1.50	QUAY RD Y	6950 TO 7100 BLOCK
2.00	QUAY RD Y	7600 TO 7800 BLOCK
0.25	QUAY RD Y.5	7650 TO 7700 BLOCK
1.00	QUAY RD Z	3800 TO 3900 BLOCK
2.00	QUAY RD Z	7600 TO 7800 BLOCK
0.30	QUAY RD Z.5	6246 TO 6275 BLOCK
4.00	QUAY RD AB	3000 TO 3400 BLOCK
2.00	QUAY RD AB	3900 TO 4100 BLOCK
2.00	QUAY RD AC	3200 TO 3400 BLOCK

QUAY COUNTY ROAD CERTIFICATION

2020

MILEAGE	ROADS	BLOCK NUMBERS
1.00	QUAY RD AC	3600 TO 3700 BLOCK
1.00	QUAY RD AC	3800 TO 3900 BLOCK
1.50	QUAY RD AC	5100 TO 5200 BLOCK
0.83	QUAY RD AC	6100 TO 6183 BLOCK
0.84	QUAY RD AC	6215 TO 6298 BLOCK
0.92	QUAY RD AC	6300 TO 6392 BLOCK
0.65	QUAY RD AC	6649 TO 6700 BLOCK
7.25	QUAY RD AC	6800 TO 7500 BLOCK
2.00	QUAY RD AD	3000 TO 3200 BLOCK
8.00	QUAY RD AD	3400 TO 4200 BLOCK
1.00	QUAY RD AD	4600 TO 4700 BLOCK
1.02	QUAY RD AD	6025 TO 6150 BLOCK
6.46	QUAY RD AD	6300 TO 6950 BLOCK
6.00	QUAY RD AE	3000 TO 3600 BLOCK
7.55	QUAY RD AE	3900 TO 4600 BLOCK
1.00	QUAY RD AE	6000 TO 6100 BLOCK
0.92	QUAY RD AE	6300 TO 6400 BLOCK
5.00	QUAY RD AE	6600 TO 7100 BLOCK
6.00	QUAY RD AF	3000 TO 3600 BLOCK
3.91	QUAY RD AF	3700 TO 4100 BLOCK
0.49	QUAY RD AF	5700 TO 5749 BLOCK
4.00	QUAY RD AF	5900 TO 6300 BLOCK
0.44	QUAY RD AF	6850 TO 6925 BLOCK
1.80	QUAY RD AF	7620 TO 7800 BLOCK
0.96	QUAY RD AF.5	5400 TO 5510 BLOCK
0.63	QUAY RD AF.5	6400 TO 6475 BLOCK
0.70	QUAY RD AF.5	6900 TO 6970 BLOCK
6.10	QUAY RD AG	3100 TO 3700 BLOCK
2.00	QUAY RD AG	3900 TO 4100 BLOCK
3.00	QUAY RD AG	5700 TO 6000 BLOCK
3.90	QUAY RD AG	6140 TO 6550 BLOCK
0.50	QUAY RD AG	6850 TO 6900 BLOCK
7.00	QUAY RD AH	3000 TO 3700 BLOCK
1.00	QUAY RD AH	3900 TO 4000 BLOCK
2.86	QUAY RD AH	6450 TO 6750 BLOCK
1.82	QUAY RD AH	7000 TO 7175 BLOCK
0.78	QUAY RD AI	3522 TO 3600 BLOCK

QUAY COUNTY ROAD CERTIFICATION

2020

MILEAGE	ROADS	BLOCK NUMBERS
3.53	QUAY RD AI	3800 TO 4175 BLOCK
7.48	QUAY RD AI	4800 TO 5400 BLOCK
3.95	QUAY RD AI	6300 TO 6690 BLOCK
6.78	QUAY RD AI	6695 TO 7375 BLOCK
1.00	QUAY RD AJ	3900 TO 4000 BLOCK
0.81	QUAY RD AJ	5925 TO 6000 BLOCK
2.50	QUAY RD AJ	6150 TO 6400 BLOCK
0.84	QUAY RD AJ	7150 TO 7250 BLOCK
1.15	QUAY RD AJ.5	6575 TO 6700 BLOCK
5.90	QUAY RD AK	5800 TO 6400 BLOCK
0.22	QUAY RD AK.4	6350 TO 6375 BLOCK
0.44	QUAY RD AL	3600 TO 3650 BLOCK
2.79	QUAY RD AL	6214 TO 6500 BLOCK
0.45	QUAY RD AL.4	6400 TO 6450 BLOCK
0.50	QUAY RD AL.5	6450 TO 6500 BLOCK
3.00	QUAY RD AM	3600 TO 3900 BLOCK
3.08	QUAY RD AM	4250 TO 4500 BLOCK
1.00	QUAY RD AM	6300 TO 6400 BLOCK
0.52	QUAY RD AM.5	6475 TO 6525 BLOCK
5.00	QUAY RD AN	2500 TO 2998 BLOCK
3.00	QUAY RD AN	3600 TO 3900 BLOCK
1.00	QUAY RD AN	4500 TO 4600 BLOCK
1.91	QUAY RD AO	2875 TO 3000 BLOCK
1.00	QUAY RD AO	3800 TO 3900 BLOCK
1.00	QUAY RD AO	4600 TO 4700 BLOCK
2.80	QUAY RD AO	6475 TO 6675 BLOCK
0.27	QUAY RD AO	6700 TO 6724 BLOCK
8.10	QUAY RD AP	2400 TO 3200 BLOCK
3.10	QUAY RD AP	3500 TO 3800 BLOCK
2.16	QUAY RD AP	6375 TO 6550 BLOCK
2.00	QUAY RD AP.5	6600 TO 6700 BLOCK
0.14	QUAY RD AP.6	6280 TO 6298 BLOCK
2.00	QUAY RD AQ	2500 TO 2700 BLOCK
1.05	QUAY RD AQ	6175 TO 6300 BLOCK
0.21	QUAY RD AQ	6578 TO 6599 BLOCK
0.23	QUAY RD AQ	6700 TO 6723 BLOCK
0.31	QUAY RD AQ.7	6199 TO 6224 BLOCK

QUAY COUNTY ROAD CERTIFICATION

2020

MILEAGE	ROADS	BLOCK NUMBERS
3.03	QUAY RD AR	2700 TO 3000 BLOCK
4.70	QUAY RD AR	4225 TO 4700 BLOCK
1.00	QUAY RD AR	4800 TO 4900 BLOCK
5.15	QUAY RD AR	6200 TO 6750 BLOCK
9.52	QUAY RD AS	3000 TO 3975 BLOCK
1.00	QUAY RD AS	4500 TO 4600 BLOCK
8.00	QUAY RD AT	2400 TO 3200 BLOCK
1.00	QUAY RD AT	3700 TO 3800 BLOCK
2.00	QUAY RD AT	4300 TO 4500 BLOCK
3.40	QUAY RD AT	5760 TO 6100 BLOCK
0.65	QUAY RD AT	6300 TO 6375 BLOCK
0.56	QUAY RD AT.2	6250 TO 6300 BLOCK
1.00	QUAY RD AU	2700 TO 2800 BLOCK
4.02	QUAY RD AU	3000 TO 3400 BLOCK
1.86	QUAY RD AU	3800 TO 3986 BLOCK
1.00	QUAY RD AV	2400 TO 2500 BLOCK
2.00	QUAY RD AV	3000 TO 3198 BLOCK
3.30	QUAY RD AV	3600 TO 3950 BLOCK
2.26	QUAY RD AW	3000 TO 3250 BLOCK
2.00	QUAY RD AW	3500 TO 3700 BLOCK
2.00	QUAY RD AX	2400 TO 2600 BLOCK
6.00	QUAY RD AX	2900 TO 3500 BLOCK
3.00	QUAY RD AY	3000 TO 3300 BLOCK
0.40	QUAY RD AY	5860 TO 5900 BLOCK
0.50	QUAY RD AY.5	3650 TO 3700 BLOCK
1.00	QUAY RD AZ	2600 TO 2700 BLOCK
4.02	QUAY RD AZ	2900 TO 3300 BLOCK
2.87	QUAY RD AZ	5950 TO 6075 BLOCK
4.39	QUAY RD BC	2400 TO 2825 BLOCK
4.00	QUAY RD BC	3300 TO 3700 BLOCK
0.67	QUAY RD BC.8	3300 TO 3375 BLOCK
0.60	QUAY RD BD.5	3700 TO 3775 BLOCK
1.00	QUAY RD BE	2400 TO 2500 BLOCK
2.00	QUAY RD BE	2700 TO 2900 BLOCK
8.02	QUAY RD BE	3300 TO 4025 BLOCK
10.10	QUAY RD BH	2700 TO 3700 BLOCK
4.00	QUAY RD BJ	3300 TO 3700 BLOCK

QUAY COUNTY ROAD CERTIFICATION

2020

MILEAGE	ROADS	BLOCK NUMBERS
7.25	QUAY RD BJ.5	4500 TO 4950 BLOCK
5.50	QUAY RD BK	5200 TO 5750 BLOCK
3.93	QUAY RD BL	3700 TO 4100 BLOCK
1.72	QUAY RD BM	3933 TO 4100 BLOCK
2.00	QUAY RD BN	3300 TO 3450 BLOCK
0.75	ALLEN LANE	6400 TO 6475 BLOCK
0.50	LEONARD DRIVE	4000 TO 4050 BLOCK
1.00	EAST MAPLE AVE	3900 TO 4000 BLOCK
14.10	ROUTE 66	0000 TO 1700 BLOCK
0.21	TERRELL DRIVE	6275 TO 6298 BLOCK
0.50	LOGAN CEMETERY	2150 TO 2200 BLOCK
569.66	SUBTOTAL	
	STREETS USING CITY	
0.25	EAST DEHONEY	0900 TO 1001 BLOCK

QUAY COUNTY ROAD CERTIFICATION

2016

MILEAGE	ROADS	BLOCK NUMBERS
0.50	EAST EVANS	0700 TO 1000 BLOCK
0.25	EAST MAIN STREET	1300 TO 1500 BLOCK
0.016	FLINTRIDGE AVE	1418 TO 1421 BLOCK
0.09	MATTHEW DRIVE	2800 TO 3200 BLOCK
1.00	NORTH ROCK ISLAND ST	1200 TO 3030 BLOCK
0.15	SOUTH 8 TH STREET	3000 TO 3100 BLOCK
0.25	SOUTH 9 TH STREET	3000 TO 3200 BLOCK
0.15	SOUTH BERRY STREET	1000 TO 1125 BLOCK
0.25	SOUTH ELDER STREET	0101 TO 0500 BLOCK
0.10	SOUTH FIG STREET	0850 TO 1000 BLOCK
0.26	SOUTH GROVE STREET	1250 TO 1400 BLOCK
0.30	SOUTH HAWTHORNE ST	1000 TO 1125 BLOCK
0.15	SOUTH LAKE STREET	1000 TO 1125 BLOCK
0.26	SOUTH PARK STREET	1250 TO 1400 BLOCK
0.30	SOUTH SARATOGA ST	1000 TO 1125 BLOCK
0.10	WEST EL CARRO	0213 TO 0233 BLOCK
0.60	WEST LA JOYA STREET	0400 TO 0900 BLOCK
0.50	WEST SIERRA AVENUE	0400 TO 1100 BLOCK
5.48	SUBTOTAL	

NARA VISA STREETS

BELKNAP STREET	NORTH 4 TH STREET
BERRY STREET	NORTH 6 TH STREET
COMMUNITY CENTER	NORTH 7 TH STREET
GONZALES STREET	RAILROAD AVENUE
HAMRICK STREET	SOUTH 2 ND STREET
KING STREET	SOUTH 4 TH STREET
MAIN STREET	SOUTH 5 TH STREET
NORTH STREET	SOUTH 6 TH STREET
	VIGIL STREET

NARA VISA STREETS

4.50

TOTAL QUAY COUNTY ROAD MILEAGE

1108.04

DATE/20	NAME	ROAD BLADED	BLOCKS	MILES	ADDITIONAL WORK TO ROAD/COMMENTS
02/03/20	LARRY	QUAY ROAD R	4500-4700	2.00	
	LARRY	QUAY ROAD 45	1500-1700	2.00	
	LOUIS	QUAY ROAD 60	1670-1820	1.52	
	LOUIS	QUAY ROAD Q	5900-6050	1.26	
	DONALD	QUAY ROAD 65	2800-2900	1.00	FIXED RUTS
	DONALD	QUAY ROAD AC	6300-6400	1.00	FIXED RUTS
	DONALD	QUAY ROAD 64	2800-2850	0.50	PREPPED ROAD FOR MILLINGS/PROJECT RD
	QUADE	QUAY ROAD AY	2900-3000	1.00	FIXED SLOPES, CLEANED TRASH
	QUADE	QUAY ROAD AV	3100		CLEANED OUT DITCH, FIXED INTERSECTION
02/04/20	DONALD	QUAY ROAD AG	6200-6450	2.50	FIXED WASHBOARD
	DONALD	QUAY ROAD AK	6300-6380	0.80	FIXED WASHBOARD
	DONALD	QUAY ROAD AP.5	6700-6800	0.50	FIXED WASHBOARD
	DONALD	QUAY ROAD 66.5	2000-2200	1.65	FIXED WASHBOARD
	LARRY	QUAY ROAD 44	1800-1900	1.00	
	LARRY	QUAY ROAD 34	3200-3350	1.50	
	LARRY	QUAY ROAD AD	3800-3900	1.00	
	QUADE	QUAY ROAD AO	2850-3000	1.50	PULLED DITCHES
	QUADE	QUAY ROAD AP	2500-3200	7.00	PULLED DITCHES
02/05/20	LARRY	QUAY ROAD Q	4300-4800	5.23	
	LARRY	QUAY ROAD 44	1700-1800	1.00	
	LARRY	QUAY ROAD 45	1600-1700	1.00	
	QUADE	QUAY ROAD AR	2600-3000	4.00	
	QUADE	QUAY ROAD 27	4700-4800	1.00	PULLED DITCHES
	QUADE	QUAY ROAD AQ	2400-2500	1.00	PULLED DITCHES
	TONY	QUAY ROAD 60	3500-3600	1.00	
	TONY	QUAY ROAD 60	3100-3300	2.00	
	TONY	QUAY ROAD AG	5900-6000	1.00	
	TONY	QUAY ROAD AJ	5950-6000	0.50	
	TONY	QUAY ROAD AF	5900-6000		
02/06/20	QUADE	QUAY ROAD AY	2900-3000	1.00	
	QUADE	QUAY ROAD 27	4800-4900	1.00	
	QUADE	QUAY ROAD 25	5000-5200	2.00	
	QUADE	QUAY ROAD 26	4900-5100	2.00	
	QUADE	QUAY ROAD AU	3000		PATCHED POTHOLES
	QUADE	QUAY ROAD 29	5000		FIXED LOWWATER CROSSING
	LARRY	QUAY ROAD 34	2900-3200	3.00	
	LARRY	QUAY ROAD 34	3300-3500	2.00	
	LARRY	QUAY ROAD 31	3300-3500	2.00	
	LOUIS	QUAY ROAD 65	1780-1800	0.20	
	LOUIS	QUAY ROAD 65	1350-1600	2.50	
	LOUIS	QUAY ROAD 64	1350-1500	1.50	
	LOUIS	QUAY ROAD O	6400-6600	2.00	
	LOUIS	QUAY ROAD 62	1380-1430	0.50	
	TONY	QUAY ROAD 65	2800-2900	1.00	
	TONY	QUAY ROAD 65.5	2800-2900	1.00	
	TONY	QUAY ROAD 68	2800-2900	1.00	
	TONY	QUAY ROAD 69	2700-2800	1.00	
	TONY	QUAY ROAD AC	6900-7000	1.00	
02/10/20	QUADE	QUAY ROAD BC	3300-3700	4.00	
	LOUIS	QUAY ROAD 63	2100-2200	1.00	
	LOUIS	QUAY ROAD 61	2100-2200	1.00	
	LOUIS	QUAY ROAD V	6100-6350	2.00	
	LOUIS	QUAY ROAD V	5550-5700	0.50	
	LOUIS	QUAY ROAD 57	2100-2200	1.00	
	KENNY	QUAY ROAD 89	1800-2100	3.00	
	LARRY	QUAY ROAD AH	3100-3400	3.00	

	LARRY	QUAY ROAD 31	3100-3300	2.00	
02/13/20	QUADE	QUAY ROAD 29	5000-5100	1.00	
	QUADE	QUAY ROAD AX	3000-3100	1.00	
	QUADE	QUAY ROAD AZ	2900-3000	1.00	
02/14/20	LOUIS	QUAY ROAD 64	1900-2100	2.00	
	LOUIS	QUAY ROAD U	5700-5950	2.50	
	LOUIS	QUAY ROAD 57	1800-2100	3.00	
	LOUIS	QUAY ROAD S	5700-5875	1.55	
02/18/20	DONALD	QUAY ROAD 65	2800-2900	1.00	PULL DITCH, FIX HOLES AND RUTS
	DONALD	QUAY ROAD 64	2900-3275	3.75	
	DONALD	QUAY ROAD AE	6300-6400	0.92	
	DONALD	QUAY ROAD 65	3200-3300	1.00	
	DONALD	QUAY ROAD AH	6450-6750	3.00	
02/20/20	DONALD	QUAY ROAD 56	3400-3500	1.00	PULL DITCHES
	DONALD	QUAY ROAD 52.5	3300-3400	1.25	PULL DITCHES
	DONALD	QUAY ROAD AI	5100-5400	3.00	PULL DITCHES
	DONALD	QUAY ROAD 58	3400-3500	1.00	PULL DITCHES
	QUADE	QUAY ROAD 27	4800-5000	2.00	
02/21/20	LOUIS	QUAY ROAD I	6600-6750	1.37	
	LOUIS	QUAY ROAD 67	0800-0900	1.00	
	LOUIS	QUAY ROAD K	6600-6650	0.50	
	LOUIS	QUAY ROAD L	6600-6640	0.40	
02/22/20	ARMANDO	QUAY ROAD 57	3070-3400	3.20	
02/25/20	DONALD	QUAY ROAD AG	6200-6300	1.00	WORK DITCHES, FIXED WASHBOARD RD
02/28/20	LOUIS	QUAY ROAD O	6600-6775	1.45	
	LOUIS	QUAY ROAD 67	1375-1600	1.97	
	LOUIS	QUAY ROAD P	6325-6400	0.66	
			TOTAL	129.18	