

Bob Dixon  
Presiding Commissioner

Rusty MacLachlan  
1<sup>st</sup> District Commissioner

John C. Russell  
2<sup>nd</sup> District Commissioner



Shane Schoeller  
Clerk of the Commission

Christopher J. Coulter, AICP  
County Administrator

Megan Applegate  
Executive Assistant

**COUNTY COMMISSION**  
**Greene County, Missouri**  
**(417) 868-4112**

**Greene County Commission  
Commission Briefing Minutes**

**Thursday, April 29, 2021**  
**9:30 AM**  
Commission Conference Room  
1443 N. Robberson, 10<sup>th</sup> Floor



The Greene County Commission is now offering an alternative to attending the meeting. Please join our meeting from your computer, tablet or smartphone. <https://www.gotomeet.me/GCCommissionOffice>. You can also dial in using your phone. United States: +1 (872) 240-3412. You will be prompted for a PIN number where you will hit the '#' key and be prompted for an access code: 675-853-269

**Attendees:** Bob Dixon, Rusty MacLachlan, John Russell, Chris Coulter, Lyle Foster, Randy Foster, Donna Barton and Larry Woods.

**Teleconference Attendees:** Jeff Scott, Tins Phillips, Shawn Sando, Jeff Bassham, Justin Hill, Royce Denny, Andrea Stewart, Jeff Avers Allen Icet, Jim Arnott, Franz Williams, Rob Rigdon, Cindy Stein and Kevin Barnes.

**Informational Items**

**Health Department-Jon Mooney**

- 21 cases daily average.
- 41 individuals currently hospitalized.
- 38% one dose of vaccine 32% fully vaccinated.
- Hoping for 50% vaccination rates by Memorial Day.

**Resource Management-Kevin Barnes**

- Jail Project update.
- Haseltine and EE bid opening today.
- PSC boiler issue will be replacing.
- Heat and cooling issues in the judicial building working on replacing pumps.
- HVAC work around campus is up, will be posting HVAC application online.

**CARES Update-Chris Coulter, Lyle Foster, Justin Hill, Jeff Scott,**

- **Chris Coulter**-Working to disperse all CARES funds so that we don't have to return unused funds. Audits have been taking place.
- **Lyle Foster**-Lots of emails received about questions of new ARP funding. Mr. Foster has been sending emails to clarify there isn't clear direction on how to use the funds.
- **Justin Hill**-Currently 4 million left in unspent funds that his office is holding.

**Cox Medical Tower • 1443 North Robberson Avenue, 10<sup>th</sup> Floor • Springfield, Missouri 65802**  
**Mailing Address 940 Boonville Avenue • Springfield, Missouri 65802**  
**[www.greenecountymo.gov](http://www.greenecountymo.gov)**

- **Jeff Scott** - \$ 3,819,329.10 Commission has awarded thought the budget office, \$2,215,384.67 Budget Office has submitted to Auditor's Office \$1,482,774.05 Confirmed and paid by Auditor's Office, \$732,610.62 Not paid by the Auditor yet-primarily submission #5- which is chiefly OEM salary, Firehouse equipment. 1,603,944.43 not submitted to auditor's office yet.

#### Items for Consideration and Action by the Commission

- EX1** Discussion and Possible Vote: Regional Homeland Security Oversight Committee Grant, OEM  
Commissioner John Russell moved to approve the regional homeland security oversight committee grant. Commissioner Rusty MacLachlan seconded the motion and it passed unanimously. Yes: Dixon, MacLachlan and Russell.
- EX2** Discussion and Possible Vote: Real Estate Purchase Agreement, Highway  
Commissioner Rusty MacLachlan moved to approve the real estate purchase agreement located at 1943 W. Farm Road 186 in Springfield. Commissioner John Russell seconded the motion and it passed unanimously. Yes: Dixon, MacLachlan and Russell.
- EX3** Discussion and Possible Vote: Warranty Deed, Highway  
Commissioner John Russell moved to approve the warranty deed between Greene County and Michael Ngo and Sow Chee Cheah. Commissioner Rusty MacLachlan seconded the motion and it passed unanimously. Yes: Dixon, MacLachlan and Russell.
- EX4** Discussion and Possible Vote: Warranty Deed, Highway  
Commissioner Rusty MacLachlan moved to approve the warranty deed between Greene County and Stanley Haseltine. Commissioner John Russell seconded the motion and it passed unanimously. Yes: Dixon, MacLachlan and Russell.
- EX5** Discussion and Possible Vote: Homeland Security Grant Application, Sheriff  
Commissioner John Russell moved to approve the Homeland Security Grant Application. Commissioner Rusty MacLachlan seconded the motion and it passed unanimously. Yes: Dixon, MacLachlan and Russell.
- EX6** Discussion and Possible Vote: CLEO Consortium Agreement  
Commissioner John Russell moved to approve the CLEO consortium agreement by allowing the Presiding Commissioner to sign the agreement. Commissioner MacLachlan seconded the motion and it passed unanimously. Yes: Dixon, MacLachlan and Russell.

#### Other:

- EX7** Shawn Sando: One-Year-in-Operation Burrell Center Update, Burrell

Bob Dixon  
*Presiding Commissioner*

Rusty MacLachlan  
*1<sup>st</sup> District Commissioner*

John C. Russell  
*2<sup>nd</sup> District Commissioner*



Shane Schoeller  
*Clerk of the Commission*

Christopher J. Coulter, AICP  
*County Administrator*

Megan Applegate  
*Executive Assistant*

**COUNTY COMMISSION**  
**Greene County, Missouri**  
**(417) 868-4112**

**REVISED: Greene County Commission  
Commission Briefing Agenda**

**Thursday, April 29, 2021**  
**9:30 AM**  
**Commission Conference Room**  
**1443 N. Robberson, 10<sup>th</sup> Floor**

The Greene County Commission is now offering an alternative to attending the meeting. Please join our meeting from your computer, tablet or smartphone. <https://www.gotomeet.me/GCCommissionOffice>. You can also dial in using your phone. United States: +1 (872) 240-3412. You will be prompted for a PIN number where you will hit the "#" key and be prompted for an access code: 675-853-269

Informational Items  
Health Department  
Resource Management  
CARES Update

Items for Consideration and Action by the Commission  
Discussion and Possible Vote: Regional Homeland Security Oversight Committee Grant, OEM

Discussion and Possible Vote: Real Estate Purchase Agreement, Highway

Discussion and Possible Vote: Warranty Deed, Highway

Discussion and Possible Vote: Warranty Deed, Highway

Discussion and Possible Vote: Homeland Security Grant Application, Sheriff

Discussion and Possible Vote: CLEO Consortium Agreement

Other:  
One-Year-in-Operation Burrell Center Update, Burrell

Revised on 4/27/2021 @ 10:00 AM

**Cox Medical Tower • 1443 North Robberson Avenue, 10<sup>th</sup> Floor • Springfield, Missouri 65802**  
**Mailing Address 940 Boonville Avenue • Springfield, Missouri 65802**  
**[www.greenecountymo.gov](http://www.greenecountymo.gov)**

Missouri Department of  
**Public Safety**

Application

124236 - FY 2021 SHSP Region D

124280 - MO Region D Field Command Post Sustainment

State Homeland Security Program (SHSP)

Status:

Editing

Submitted Date:

---

### Primary Contact

Name:\*

Ms

Robbin

Sawyer

Title

First Name

Last Name

Job Title:

Administrative Services Manager

Email:

rsawyer@greencountymo.gov

Mailing Address:

330 W Scott Street

Street Address 1:

Street Address 2:

\*

Springfield

Missouri

65802

City

State/Province

Postal Code/Zip

Phone:\*

417-869-6040

Fax:

417-869-6654

Ext.

---

### Organization Information

Applicant Agency:

Greene County Emergency Management Agency

Organization Type:

Government

Federal Tax ID#:

446000506

DUNS #:

095831228

SAM/CCR CAGE Code:

3QMR3

11/23/2011

Valid Until Date

Organization Website:

greenecountymo.gov/oem

Mailing Address:

330 W Scott Street

Street Address 1:

Street Address 2:

City\*

Springfield

Missouri

65802

3859

City

State/Province

Postal Code/Zip

+ 4

County:

Greene

Congressional District:

07

Phone:\*

417-869-6040

Ext.

Fax:

417-869-6654

## Contact Information

### Authorized Official

The Authorized Official is the individual who has the authority to legally bind the applicant into a contract and is generally the applicants elected or appointed chief executive. For example:

If the applicant agency is a city, the Mayor or City Administrator shall be the Authorized Official

If the applicant agency is a county, the Presiding County Commissioner or County Executive shall be the Authorized Official

If the applicant agency is a State Department, the Director shall be the Authorized Official

If the applicant agency is a college/university, the President shall be the Authorized Official

If the applicant agency is a nonprofit, the Board Chair/President shall be the Authorized Official, this includes Fire Protection Districts

If the applicant agency is an Regional Planning Commission or Council of Government, the Executive Director shall be the Authorized Official

\*\*This is not an all-inclusive list. If your agency does not fall into the above categories or you are unsure of who the Authorized Official should be for your agency, please contact the Missouri Office of Homeland Security at (573) 522-6125\*\*

Authorized Official:\*

Mr

Bob

Dixon

Title (Mr.Ms.etc)

First Name

Last Name

Job Title:

Presiding Commissioner

Agency:

Greene County

Mailing Address:

1443 N Robberson Avenue, 10th Floor

Street Address 1:

Street Address 2:

\*

Springfield

Missouri

65802

City

State

Zip Code

Email:

bdixon@greenecountymo.gov

Phone:\*

417-868-4112

Office

Ext.

Cell

Fax:

417-868-4818

**Applicant Project Director**

**Applicant Project Director:\***

**Mr**

**Larry**

**Woods**

Title (Mr.Ms.etc)

First Name

Last Name

**Job Title:**

**Director**

**Agency:**

**Greene County Emergency Management**

**Mailing Address:**

**330 W Scott Street**

**Street Address 1:**

**Street Address 2:**

\*

**Springfield**

**Missouri**

**65802**

City

State

Zip Code

**Email:**

**lwoods@greenecountymo.gov**

**Phone:\***

**417-869-6040**

**Fax**

Office

Ext.

Cell

**Fiscal Officer**

**417-869-6654**

**Fiscal Officer:\***

**Ms**

**Robbin**

**Sawyer**

Title (Mr.Ms.etc)

First Name

Last Name

**Job Title:**

**Administrative Services Manager**

**Agency:**

**Greene County Emergency Management**

**Mailing Address:**

**330 W Scott Street**

**Street Address 1:**

**Street Address 2:**

\*

**Springfield**

**Missouri**

**65802**

City

State

Zip Code

**Email:**

**rsawyer@greenecountymo.gov**

**Phone:\***

**417-869-6040**

**Fax**

Office

Ext.

Cell

**Project Contact Person**

**417-869-6654**

**Project Contact Person:**

**Mr**

**Brandon**

**Backlin**

Title (Mr.Ms.etc)

First Name

Last Name

**Job Title:**

**Network Administrator**

**Agency:**

**Greene County Emergency Management**

**Mailing Address:**

**330 W Scott Street**

Street Address 1:

Street Address 2:

Email:

Phone:

Fax:

Springfield

City

Missouri

State

65802

Zip Code

bbacklin@greenecountymo.gov

417-869-6040

Office

Ext.

Cell

417-869-6654

## Section A.1 through B.2

### A. Project Worksheet

A.1 Project Title:

A.2 Agency Name:

A.3 Region:

A.4 County:

A.5 Project Location Zip Code:

A.6 Project Activity Type:

A.7 Was this project previously funded with State Homeland Security Program (SHSP) funds?

A.7.a If you answered yes to Question # A.7, please give a brief description of the year and the project that was previously funded.

A.8 Does this project increase capabilities (build/enhance), or does this project sustain capabilities at the current level?

A.8.a If you answered Build/Enhance to question A.8 provide an answer to the following question. Has your agency coordinated with other agencies to determine if the resources requested are currently available within the region/state?

*Coordination example: contacted other agencies within your region to see if this capability/asset currently exists and is available.*

A.8.b If answered yes to A.8.a, explain coordination efforts made by your agency, as well as the outcome of the coordination efforts.

A.9.a Project Description

A.9.b Provide a summary of specific project actions/items that will be purchased with grant funds:

MO Region D Field Command Post Sustainment

Greene County Emergency Management

D

Greene

65802

Develop/enhance interoperable communications systems

Yes

This program has been funded since approximately 2011 through the Regional Homeland Security Program.

Sustain

Sustain continued resource operations by replacement of end-of-life information technology equipment used during regional field deployments for command post activities.

The equipment is to replace existing end-of-life equipment originally funded by the RHSOC.

**A.9.c Provide estimated duration of the project (how long will it take to complete this project):**

The project will be completed within 60 days of the arrival of equipment.

**A.9.d What are the objectives this project is designed to accomplish? (the purpose of the project)**

This project will sustain operations and capabilities to field deployment for regional command and IST personnel. Sustains integrated technology connectivity with both regional communications vehicles.

**A.9.e How does this project align with/increase terrorism preparedness for your agency/region/state?**

Provides for effective tactical and strategic decision-making capabilities for homeland security, which requires incident commanders to receive timely information and have the tools at their disposal that allow them to make informed command level decisions.

**A.9.f Why is this project necessary for the region/state?**

This regional asset assists incident commanders in facilitating the management of on-scene operations. This is accomplished by giving them the tools that provide them with real-time information and the facilities to manage an incident.

**A.10 Please discuss the future sustainment plan for the requested item(s) in the application.**

Sustainment will continue to be requested through additional future years' SHSP programs.

## **B. Project Capability, THIRA and Dual Use**

*Please review the State FY 2019 MO THIRA and FY 2020 MO SPR to determine the following:*

**B.1 Which Primary Core Capability best aligns to this project?**

Operational Coordination

**B.2 How does this project impact the Capability Target listed on the State THIRA/SPR for the Core Capability chosen in B.1?**

This project sustains the capability to provide field response for command and control of virtually any hazard requiring such a response.

*1000 Character Limit*

**B.3 If this project is dual use, please describe how this project supports terrorism preparedness, and how this project increases preparedness for other hazards unrelated to terrorism: (both terrorism preparedness, and other unrelated hazards)?**

The Field Command Post is a regional all-hazards resource, allowing users to respond to any hazard that would require the support of a field command and control platform. This use includes both unplanned and planned events.

*Dual use are activities, which support the achievement of target capabilities related to terrorism preparedness may simultaneously support enhanced preparedness for other hazards unrelated to acts of terrorism.*

*Funding for activities not explicitly focused on terrorism preparedness must demonstrate Dual Use.*

*1000 Character Limit*

B.4 Please review the National Priorities in the FY 2021 SHSP Notice of Funding Opportunity or FY 2021 SHSP LETPA Notice of Funding Opportunity.

1. Enhancing Cybersecurity
2. Enhancing the Protection of Soft Targets/Crowded Places
3. Enhancing Information and Intelligence Sharing and Cooperation with Federal Agencies including DHS
4. Addressing Emergent Threats
5. Combating Domestic Violent Extremism

If this project aligns to a National priority, please select the priority below. (If your project does not align to a National priority, please select Not Applicable.)

National Priority: Not Applicable (N/A)

Core Capability: Not Applicable (N/A)

### C. Project Background

Complete Project Background Investment Justification alignment and Prior Accomplishments for each year ONLY if proposed project was also funded with prior grant funds.

C.1 Was any portion of the proposed project funded with FY 2020 funds?: Yes

C.2 FY 2020 Investment Justification Building and Sustaining Regional Collaboration via Regional Homeland Security Oversight

If funded with FY 2020 Federal Grant Award what was the last major accomplishment/milestone that was completed with FY 2020 funds?

C.3 FY 2020 Prior Accomplishments: Replaced aged and end-of-life computer and printer on Field Command Post to sustain operational life.

250 Character Limit

C.4 Was any portion of the proposed project funded with FY 2019 funds?: No

C.7 Was any portion of the proposed project funded with FY 2018 funds?: No

### D. Deployable/Sharable Resources

**Deployable Resource:** Identifies the availability and utility of an asset to multiple jurisdictions, regions, and the Nation; provides information on mobility of assets in an area. An asset that is physically mobile and can be used anywhere in the United States and territories via Emergency Management Assistance Compacts or other mutual aid/assistance agreements.

**Shareable Resource:** Provides information on the utility of a non-deployable shared asset in a region; identifies the asset's ability to augment and sustain a reinforced response within a region. An asset that can be utilized as a local, state, regional, or national capability, but is not physically deployable (i.e., fusion centers).

D.1 Does this project fund resources that are: Deployable Resource

If answered Deployable in question D.1 complete questions D.2-D.8.

If answered Shareable in question D.1 complete questions D.2-D.4.

If answered NA in question D.1 skip to Section E.

D.2 Item Name: Region D Field Command Post (FCP)

D.3 If sustaining deployable/sharable Homeland Security resource(s), describe how the project sustains each resource(s)?:

250 Character Limit

**Sustain continued resource operations by replacement of end-of-life information technology equipment used during regional field deployments for command post activities.**

D.4 Special conditions/requirements on sharing the deployable/shareable resource(s):

**Must contact owning jurisdiction to request resource. Owning agency employee must pull resource to and from deployment location using jurisdiction prime mover for insurance purposes.**

*Example: Specific requirements of equipment, operator, etc.*  
250 Character Limit

*FEMA Resource Typing Library Tool is located at <https://rtlt.preptoolkit.org/Public>.*

D.5 Is deployable resource NIMS Kind & Typed?:

**Yes**

D.6 Deployable Resources  
Kind & Type Name(s):

**Mobile EOC**

*Example: Mass Casualty Support Vehicle*  
250 Character Limit

D.7 Deployable Resources

Kind & Type ID(s):  
(ID x-xxx-xxxx)

**2-508-1053**

*Example: ID 3-508-1032 Vehicle*  
250 Character Limit

D.8 If not NIMS Kind & Typed, explain how the item further supports the Homeland Security Initiative:

**N/A**

250 Character Limit

## **E. Audit Details**

E.1 Has the Applicant Agency exceeded the federal expenditure threshold of \$750,000 in federal funds during agency's last fiscal year?: **Yes**

*If the applicant agency exceeded the federal expenditure threshold in their last fiscal year, they must have their Single Audit or Program Specific Audit completed and submitted to the OHS within nine (9) months after the end of the audited fiscal year.*

E.2 Date last audit completed:  
MM/DD/YYYY

**07/21/2020**

*If an agency has never had an audit, please enter the date of their last annual financial statement.*

E.3 By checking this box the applicant agency understands they are required to upload a copy of the agency's most recent completed audit (or annual financial statement) in the Named Attachments section of this application: **Yes**

## **F. Risk Assessment**

F.1 Does the applicant agency have new personnel that will be working on this award?: **No**

*New personnel is defined as working with this award type less than 12 months.*

F.2 Does the applicant agency have a new fiscal or time accounting system that will be used on this award?: **No**

*New fiscal or time accounting system is defined as a system being utilized less than 12 months within the applicant agency.*

F.3 Does the applicant agency receive any direct Federal awards?: **Yes**

*Direct grants are grants that you apply directly to the federal government for and there is no intermediary agency such as OHS.*

F.3.a If you answered yes to Question # F.3, please list the direct Federal awards the agency receives. **EMPG**

F.4 Did the applicant agency receive any Federal monitoring on a direct federal award in their last fiscal year?: **No**

### G. National Incident Management System (NIMS)

G.1 Has the jurisdiction formally adopted the National Incident Management System (NIMS) throughout the jurisdiction or organization to prevent, protect against, mitigate, respond to, and recover from incidents?: **Yes**

G.2 Has the jurisdiction ensured training for the incident personnel incorporates NIMS training that is pertinent to each individuals incident responsibilities in alignment with the NIMS training program?: **Yes**

G.3 Does the jurisdiction develop, maintain, and implement mutual aid agreements (to include agreements with the private sector and nongovernmental organizations)?: **Yes**

G.4 Does the jurisdiction apply ICS as the standard approach to the on-scene command, control, and coordination of incidents?: **Yes**

G.5 Does the jurisdiction enable effective and secure communications within and across jurisdictions and organizations?: **Yes**

G.6 Does the jurisdiction identify and inventory deployable incident resources consistently with national NIMS resource typing definitions and job titles/position qualifications, available through the Resource Typing Library Tool?: **Yes**

G.7 Has your agency designated a point of contact to serve as the principal coordinator for the implementation of NIMS? **Yes**

G.8 Has your agency adopted NIMS terminology for the qualification, certification, and credentialing of incident personnel? **Yes**

G.9 Does your agency use the NIMS Resource Management Process during incidents? (identify requirements, order and acquire, mobilize, track and report, demobilize, reimburse and restock) **Yes**

G.10 Does your agency implement JIS for the dissemination of incident information to the public, incident personnel, traditional and social media, and other stakeholders? **Yes**

G.11 Does your agency use MAC Groups/Policy Groups during incidents to enable decision making among elected and appointed officials and support resource prioritization and allocation? **Yes**

G.12 Does your agency organize and manage EOC's and EOC teams consistent with pertinent NIMS guidance? **Yes**

G.13 Does your agency apply plain language and clear text communications standards? **Yes**

G.14 Does your agency develop, maintain, and implement procedures for data collection, analysis, and dissemination to meet organizational needs for situational awareness? **Yes**

*If answered No to any questions G.1-G.14, please explain planned activities during grant period to strive towards being NIMS compliant.*

G.15 Planned Activities: **N/A**

## H. Certified Assurances

*To the best of my knowledge and belief, all data in this application is true and correct, the document has been duly authorized by the governing body of the applicant, and the applicant attests to and/or will comply with the following Certified Assurances if the assistance is awarded:*

### SHSP Certified Assurances

H.1 By checking this box, I have read and agree to the terms and conditions of this grant: **Yes**

*In order to be considered eligible for funding, the correct Authorized Official must be designated and have knowledge of the certified assurances associated with this funding opportunity. If the incorrect Authorized Official is listed in H.2 of the application, the application will be deemed ineligible for funding.*

*The Authorized Official is the individual who has the authority to legally bind the applicant into a contract and is generally the applicants elected or appointed chief executive. For example:*

*If the applicant agency is a city, the Mayor or City Administrator shall be the Authorized Official*

*If the applicant agency is a county, the Presiding County Commissioner or County Executive shall be the Authorized Official*

*If the applicant agency is a State Department, the Director shall be the Authorized Official*

*If the applicant agency is a college/university, the President shall be the Authorized Official*

*If the applicant agency is a nonprofit, the Board Chair/President shall be the Authorized Official, this includes Fire Protection Districts.*

*If the applicant agency is an Regional Planning Commission (RPC) or Council of Government (COG), the Executive Director shall be the Authorized Official*

*If a designee is being utilized to authorize the application, the Missouri Department of Public Safety (DPS) reserves the right to request documentation that indicates the designee has the authority to legally bind the applicant into a contract in lieu of the Authorized Official at the time of application submission.*

*\*\*The above list is not an all-inclusive list. If you do not fall into the above listed categories, or if you are unsure of who the Authorized Official is for your agency, please contact the Missouri Office of Homeland Security at (573) 522-6125.\*\**

### H.2 Authorized Official

Name and Title: Bob Dixon, Presiding Commissioner

H.3 Name and Title of person completing this proposed application:

Robbin Sawyer, Administrative Services Manager

H.4 Date:

04/29/2021

---

## Personnel

Name:	Position Title:	Position Status:	Employment Status:	%of time spent on this grant funded activities:	Requested Personnel Cost:	Discipline:	Function:	Allowable Activity:
					\$0.00			

---

## Narrative Justification - Personnel

---

## Personnel Benefits

Name:	Benefits % of Salary	Requested Benefit Cost:	Discipline:	Function:	Allowable Activity:
		\$0.00			

---

## Narrative Justification - Benefits

---

## Travel

Item Name:	Category:	Explanation of Other Travel:	Total Cost:	Discipline:	Function:	Allowable Activity:
			\$0.00			

---

## Narrative Justification - Travel

Travel Justification

---

## Equipment

Line Item Name:	AEL #:	Qty:	Unit Cost:	Total Sustainme Cost: nt:	Discipline:	Function:	Allowable Activity:
				\$0.00			

---

## Narrative Justification - Equipment

---

### Supplies/Operations

Supply/Operation Type:	Item Name:	Qty:	Unit Cost:	Total Supply or Operation Expense Cost:	Discipline:	Function:	Allowable Activity:
Other (computer, projector, chair, etc.)	Access Point Beacon HD	1.0	\$130.00	\$130.00	Emergency Management	Equipment	Interoperable Communications Equipment
Other (computer, projector, chair, etc.)	Epson WorkForce Pro WF-7820 Wide-Format Printer	1.0	\$250.00	\$250.00	Emergency Management	Equipment	Interoperable Communications Equipment
				\$380.00			

---

## Narrative Justification - Supplies/Operations

1. Access Point Beacon HD - We typically have to park our field command post within range of Skylab, and this repeater would boost the WiFi signal inside the field command post at greater distances from Skylab.
2. Epson WorkForce Pro WF-7820 Wide-Format Printer - This printer would give us the ability to print normal or large format publications (maps, posters, IAPs, etc.) in the field. This is crucial for effective information dissemination and hard-copy recordkeeping. This printer will use the wireless network for communication so anybody connected to the same network can print to it, which will greatly increase its portability and reduce the setup complication. As of now, the field command post has no large format printing capabilities.

---

## Contractual

Item Name:	Type of Contract:	Contract Amount:	Discipline:	Function:	Allowable Activity:
		\$0.00			

---

## Narrative Justification - Contractual

### Total Budget

<b>Total Personnel:</b>	\$0.00
<b>Total Benefits:</b>	\$0.00
<b>Total Travel:</b>	\$0.00
<b>Total Equipment:</b>	\$0.00
<b>Total Supplies/Operation:</b>	\$380.00
<b>Total Contractual:</b>	\$0.00
<b>Total Project Cost:</b>	\$380.00

## Named Attachments

[illegible]

## AUDIT REQUIREMENTS

---

An audit is required for the agency fiscal year, when STATE financial assistance, (which consists of funds received directly from the State of Missouri, but does not include federal pass-through funds), of \$250,000 or more is expended by the applicant agency.

☛ An audit is required for the agency fiscal year, when FEDERAL financial assistance, (which consists of funds received directly from the Federal Government or federal funds passed through state agencies), of \$750,000 or more is expended by the applicant agency.

☛ No audit of any type is required when STATE financial assistance of less than \$250,000 or FEDERAL financial assistance of less than \$750,000 is expended. However, the recipient must maintain detailed records on grant activity required for such grants.

☛ NOTE: The State Auditor of Missouri audits all state agencies, third class counties, and all judicial circuits. First, second, and fourth-class counties and other local political subdivisions and not-for-profit agencies must make arrangements with a private CPA firm to perform an audit.

---

This section must be completed **even if your agency is not required** to submit an audit to the Missouri Department of Public Safety.

1. Date of last audit: 7/21/20
2. Date(s) covered by last audit: 01/01/19 - 12/31/19
3. Last audit performed by: KPM CPAs, PC  
Phone number of auditor: 417/882-0904  
Lead Auditor: Rebecca Baker (rbaker@kpmcpa.com)
4. Date of next audit: Summer 2021
5. Date(s) to be covered by next audit: 01/01/20 - 12/31/20
6. Next audit will be performed by: KPM, CPAs, PC  
Phone number of auditor: 417/882-0904
7. Total amount of funds received from **ALL** entities **INCLUDING** the Department of Public Safety: Federal Amount: \$1,750,943 State Amount: \$68,230
8. Harvester Report ID for audit year: 848618
9. Were equitable sharing expenditures included in the SEFA: Yes

Agency: Greene County Missouri

Phone: 417/868-4120

Signed: \_\_\_\_\_

*Chris A. Steu*

Date: 09/19/20

*Effective 2016*

exl

# Missouri Department of Public Safety

Application

124236 - FY 2021 SHSP Region D

124281 - Communications Support Vehicle Sustainment Greene County State Homeland Security Program (SHSP)  
State Homeland Security Program (SHSP)

Status:

Editing

Submitted Date:

---

## Primary Contact

Name:*	Ms	Robbin	Sawyer
	Title	First Name	Last Name
Job Title:	Administrative Services Manager		
Email:	rsawyer@greencountymo.gov		
Mailing Address:	330 W Scott Street		
Street Address 1:			
Street Address 2:			
*	Springfield	Missouri	65802
	City	State/Province	Postal Code/Zip
Phone:*	417-869-6040		
		Ext.	
Fax:	417-869-6654		

---

## Organization Information

Applicant Agency:	Greene County Emergency Management Agency
Organization Type:	Government
Federal Tax ID#:	446000506
DUNS #:	095831228

SAM/CCR CAGE Code:

3QMR3

11/23/2011

Valid Until Date

Organization Website:

greenecountymo.gov/oem

Mailing Address:

330 W Scott Street

Street Address 1:

Street Address 2:

City\*

Springfield

Missouri

65802

3859

City

State/Province

Postal Code/Zip

+ 4

County:

Greene

Congressional District:

07

Phone:\*

417-869-6040

Ext.

Fax:

417-869-6654

## Contact Information

### Authorized Official

*The Authorized Official is the individual who has the authority to legally bind the applicant into a contract and is generally the applicants elected or appointed chief executive. For example:*

*If the applicant agency is a city, the Mayor or City Administrator shall be the Authorized Official*

*If the applicant agency is a county, the Presiding County Commissioner or County Executive shall be the Authorized Official*

*If the applicant agency is a State Department, the Director shall be the Authorized Official*

*If the applicant agency is a college/university, the President shall be the Authorized Official*

*If the applicant agency is a nonprofit, the Board Chair/President shall be the Authorized Official, this includes Fire Protection Districts*

*If the applicant agency is an Regional Planning Commission or Council of Government, the Executive Director shall be the Authorized Official*

*\*\*This is not an all-inclusive list. If your agency does not fall into the above categories or you are unsure of who the Authorized Official should be for your agency, please contact the Missouri Office of Homeland Security at (573) 522-6125\*\**

Authorized Official:\*

Mr

Bob

Dixon

Title (Mr.Ms.etc)

First Name

Last Name

Job Title:

Presiding Commissioner

Agency:

Greene County

Mailing Address:

1443 N Robberson Avenue, 10th Floor

Street Address 1:

Street Address 2:

\*

Springfield

Missouri

65802

City

State

Zip Code

Email:

bdixon@greenecountymo.gov

Phone:\*

417-868-4112

Office

Ext.

Cell

Fax: 417-868-4818

**Applicant Project Director**

**Applicant Project Director:\***

Mr	Larry	Woods
<small>Title (Mr.Ms.etc)</small>	<small>First Name</small>	<small>Last Name</small>

**Job Title:** Director

**Agency:** Greene County Emergency Management

**Mailing Address:** 330 W Scott Street

**Street Address 1:**

**Street Address 2:**

*	Springfield	Missouri	65802
	<small>City</small>	<small>State</small>	<small>Zip Code</small>

**Email:** lwoods@greencountymo.gov

<b>Phone:*</b>	417-869-6040		
	<small>Office</small>	<small>Ext.</small>	<small>Cell</small>

**Fax** 417-869-6654

**Fiscal Officer**

<b>Fiscal Officer:*</b>	Ms	Robbin	Sawyer
	<small>Title (Mr.Ms.etc)</small>	<small>First Name</small>	<small>Last Name</small>

**Job Title:** Administrative Services Manager

**Agency:** Greene County Emergency Management

**Mailing Address:** 330 W Scott Street

**Street Address 1:**

**Street Address 2:**

*	Springfield	Missouri	65802
	<small>City</small>	<small>State</small>	<small>Zip Code</small>

**Email:** rsawyer@greencountymo.gov

<b>Phone:*</b>	417-869-6040		
	<small>Office</small>	<small>Ext.</small>	<small>Cell</small>

**Fax** 417-869-6654

**Project Contact Person**

<b>Project Contact Person:</b>	Mr	Brandon	Backlin
	<small>Title (Mr.Ms.etc)</small>	<small>First Name</small>	<small>Last Name</small>

**Job Title:** Network Administrator

**Agency:** Greene County Emergency Management

**Mailing Address:** 330 W Scott Street

Street Address 1:

Street Address 2:

Springfield Missouri 65802  
City State Zip Code

Email:

bbacklin@greencountymo.gov

Phone:

417-869-6040

Office Ext. Cell

Fax:

417-869-6654

---

## Section A.1 through B.2

### A. Project Worksheet

A.1 Project Title:

MO Region D Communications Support Vehicle Sustain

A.2 Agency Name:

Greene County Emergency Management

A.3 Region:

D

A.4 County:

Greene

A.5 Project Location Zip Code:

65802

A.6 Project Activity Type:

Develop/enhance interoperable communications systems

A.7 Was this project previously funded with State Homeland Security Program (SHSP) funds?

Yes

A.7.a If you answered yes to Question # A.7, please give a brief description of the year and the project that was previously funded.

This program has been funded since approximately 2011 through the Regional Homeland Security Program.

A.8 Does this project increase capabilities (build/enhance), or does this project sustain capabilities at the current level?

Sustain

A.8.a If you answered Build/Enhance to question A.8 provide an answer to the following question. Has your agency coordinated with other agencies to determine if the resources requested are currently available within the region/state?

No

*Coordination example: contacted other agencies within your region to see if this capability/asset currently exists and is available.*

A.8.b If answered yes to A.8.a, explain coordination efforts made by your agency, as well as the outcome of the coordination efforts.

A.9.a Project Description

This project will sustain the Missouri Region D Communications Support vehicle, based in Springfield, for capabilities and operations.

A.9.b Provide a summary of specific project actions/items that will be purchased with grant funds:

Sustaining interoperable communication capabilities through mobile communications platforms.

A.9.c Provide estimated duration of the project (how long will it take to complete this project):

This is for continuing sustainment operations.

A.9.d What are the objectives this project is designed to accomplish? (the purpose of the project)

This project will sustain operations and capabilities, to deploy, in support of regional interoperable communications. The project sustains integrated technology support of regional mobile platforms and communications facilities.

A.9.e How does this project align with/increase terrorism preparedness for your agency/region/state?

The project increases preparedness by providing an interoperable communications support platform for regional partners.

A.9.f Why is this project necessary for the region/state?

The project is necessary in order to provide the subscription services the platform uses to access internet, satellite, telecommunications, and television resources.

A.10 Please discuss the future sustainment plan for the requested item(s) in the application.

Sustainment will continue to be requested through additional future years' SHSP programs.

## B. Project Capability, THIRA and Dual Use

*Please review the State FY 2019 MO THIRA and FY 2020 MO SPR to determine the following:*

B.1 Which Primary Core Capability best aligns to this project?

Operational Communications

B.2 How does this project impact the Capability Target listed on the State THIRA/SPR for the Core Capability chosen in B.1?

Within 3 hours, establish interoperable voice and data communications between local responders, EOCs, and state agencies. Within 12 hours, establish and implement an incident communications plan for entities and responders.

1000 Character Limit

B.3 If this project is dual use, please describe how this project supports terrorism preparedness, and how this project increases preparedness for other hazards unrelated to terrorism: (both terrorism preparedness, and other unrelated hazards)?

In addition to fulfilling a key component of the THIRA, the availability of the communications vehicle is important to the region for natural disaster incidents, planned events, exercises, and other local public safety activities.

*Dual use are activities, which support the achievement of target capabilities related to terrorism preparedness may simultaneously support enhanced preparedness for other hazards unrelated to acts of terrorism. Funding for activities not explicitly focused on terrorism preparedness must demonstrate Dual Use.*  
1000 Character Limit

*B.4 Please review the National Priorities in the FY 2021 SHSP Notice of Funding Opportunity or FY 2021 SHSP LETPA Notice of Funding Opportunity.*

- 1. Enhancing Cybersecurity*
- 2. Enhancing the Protection of Soft Targets/Crowded Places*
- 3. Enhancing Information and Intelligence Sharing and Cooperation with Federal Agencies including DHS*
- 4. Addressing Emergent Threats*
- 5. Combating Domestic Violent Extremism*

*If this project aligns to a National priority, please select the priority below. (If your project does not align to a National priority, please select Not Applicable.)*

National Priority: Not Applicable (N/A)

Core Capability: Not Applicable (N/A)

### C. Project Background

*Complete Project Background Investment Justification alignment and Prior Accomplishments for each year ONLY if proposed project was also funded with prior grant funds.*

C.1 Was any portion of the proposed project funded with FY 2020 funds?: Yes

C.2 FY 2020 Investment Justification Building and Sustaining Regional Collaboration via Regional Homeland Security Oversight

*If funded with FY 2020 Federal Grant Award what was the last major accomplishment/milestone that was completed with FY 2020 funds?*

C.3 FY 2020 Prior Accomplishments: Replaced end-of-life equipment and sustained subscription based contractual services.

*250 Character Limit*

C.4 Was any portion of the proposed project funded with FY 2019 funds?: Yes

C.5 FY 2019 Investment Justification: Building and Sustaining Interoperable Communication Capabilities

*If funded with FY 2019 Federal Grant Award what was the last major accomplishment/milestone that was completed with FY 2019 funds?*

C.6 FY 2019 Prior Accomplishments: Replaced end-of-life equipment and sustained subscription based contractual services.

*250 Character Limit*

C.7 Was any portion of the proposed project funded with FY 2018 funds?: Yes

C.8 FY 2018 Investment Justification: Building and Sustaining Interoperable Communication Capabilities

*If funded with FY 2018 Federal Grant Award what was the last major accomplishment/milestone that was completed with FY 2018 funds?*

C.9 FY 2018 Prior Accomplishments: Replaced end-of-life equipment and sustained subscription based contractual services.

*250 Character Limit*

### D. Deployable/Sharable Resources

*Deployable Resource: Identifies the availability and utility of an asset to multiple jurisdictions, regions, and the Nation; provides information on mobility of assets in an area. An asset that is physically mobile and can be used anywhere in the United States and territories via Emergency Management Assistance Compacts or other mutual aid/assistance agreements.*

*Shareable Resource: Provides information on the utility of a non-deployable shared asset in a region; identifies the asset's ability to augment and sustain a reinforced response within a region. An asset that can be utilized as a local, state, regional, or national capability, but is not physically deployable (i.e., fusion centers).*

D.1 Does this project fund resources that are:

**Deployable Resource**

*If answered Deployable in question D.1 complete questions D.2-D.8.*

*If answered Shareable in question D.1 complete questions D.2-D.4.*

*If answered NA in question D.1 skip to Section E.*

D.2 Item Name:

**MO Region D Communication Support Vehicle "Skylab"**

D.3 If sustaining deployable/sharable Homeland Security resource(s), describe how the project sustains each resource(s)?:

**This project will sustain the resource by maintaining subscription based services and replacing end-of-life equipment to maintain interoperable communication capabilities.**

*250 Character Limit*

D.4 Special conditions/requirements on sharing the deployable/shareable resource(s):

**Must contact owning jurisdiction to request resource. Owning agency employee must drive and remain with vehicle at all times, for insurance purposes.**

*Example: Specific requirements of equipment, operator, etc.  
250 Character Limit*

*FEMA Resource Typing Library Tool is located at <https://rtlt.preptoolkit.org/Public>.*

D.5 Is deployable resource NIMS Kind & Typed?:

**Yes**

D.6 Deployable Resources

Kind & Type Name(s):

**Mobile Communications Center**

*Example: Mass Casualty Support Vehicle  
250 Character Limit*

D.7 Deployable Resources

Kind & Type ID(s):

(ID x-xxx-xxxx)

**2-508-1053**

*Example: ID 3-508-1032 Vehicle  
250 Character Limit*

D.8 If not NIMS Kind & Typed, explain how the item further supports the Homeland Security Initiative:

**N/A**

*250 Character Limit*

## **E. Audit Details**

E.1 Has the Applicant Agency exceeded the federal expenditure threshold of \$750,000 in federal funds during agency's last fiscal year?: **Yes**

*If the applicant agency exceeded the federal expenditure threshold in their last fiscal year, they must have their Single Audit or Program Specific Audit completed and submitted to the OHS within nine (9) months after the end of the audited fiscal year.*

E.2 Date last audit completed:  
MM/DD/YYYY

07/21/2020

*If an agency has never had an audit, please enter the date of their last annual financial statement.*

E.3 By checking this box the applicant agency understands they are required to upload a copy of the agency's most recent completed audit (or annual financial statement) in the Named Attachments section of this application: **Yes**

#### F. Risk Assessment

F.1 Does the applicant agency have new personnel that will be working on this award?: **No**

*New personnel is defined as working with this award type less than 12 months.*

F.2 Does the applicant agency have a new fiscal or time accounting system that will be used on this award?: **No**

*New fiscal or time accounting system is defined as a system being utilized less than 12 months within the applicant agency.*

F.3 Does the applicant agency receive any direct Federal awards?: **Yes**

*Direct grants are grants that you apply directly to the federal government for and there is no intermediary agency such as OHS.*

F.3.a If you answered yes to Question # F.3, please list the direct Federal awards the agency receives. **EMPG**

F.4 Did the applicant agency receive any Federal monitoring on a direct federal award in their last fiscal year?: **No**

#### G. National Incident Management System (NIMS)

G.1 Has the jurisdiction formally adopted the National Incident Management System (NIMS) throughout the jurisdiction or organization to prevent, protect against, mitigate, respond to, and recover from incidents?: **Yes**

G.2 Has the jurisdiction ensured training for the incident personnel incorporates NIMS training that is pertinent to each individuals incident responsibilities in alignment with the NIMS training program?: **Yes**

G.3 Does the jurisdiction develop, maintain, and implement mutual aid agreements (to include agreements with the private sector and nongovernmental organizations)?: **Yes**

G.4 Does the jurisdiction apply ICS as the standard approach to the on-scene command, control, and coordination of incidents?: **Yes**

G.5 Does the jurisdiction enable effective and secure communications within and across jurisdictions and organizations?: **Yes**

G.6 Does the jurisdiction identify and inventory deployable incident resources consistently with national NIMS resource typing definitions and job titles/position qualifications, available through the Resource Typing Library Tool?: **Yes**

G.7 Has your agency designated a point of contact to serve as the principal coordinator for the implementation of NIMS? **Yes**

G.8 Has your agency adopted NIMS terminology for the qualification, certification, and credentialing of incident personnel? **Yes**

G.9 Does your agency use the NIMS Resource Management Process during incidents? (identify requirements, order and acquire, mobilize, track and report, demobilize, reimburse and restock) **Yes**

G.10 Does your agency implement JIS for the dissemination of incident information to the public, incident personnel, traditional and social media, and other stakeholders? **Yes**

G.11 Does your agency use MAC Groups/Policy Groups during incidents to enable decision making among elected and appointed officials and support resource prioritization and allocation? **Yes**

G.12 Does your agency organize and manage EOC's and EOC teams consistent with pertinent NIMS guidance? **Yes**

G.13 Does your agency apply plain language and clear text communications standards? **Yes**

G.14 Does your agency develop, maintain, and implement procedures for data collection, analysis, and dissemination to meet organizational needs for situational awareness? **Yes**

*If answered No to any questions G. 1-G.14, please explain planned activities during grant period to strive towards being NIMS compliant.*

G.15 Planned Activities: **N/A**

#### H. Certified Assurances

*To the best of my knowledge and belief, all data in this application is true and correct, the document has been duly authorized by the governing body of the applicant, and the applicant attests to and/or will comply with the following Certified Assurances if the assistance is awarded:*

##### *SHSP Certified Assurances*

H.1 By checking this box, I have read and agree to the terms and conditions of this grant: **Yes**

**In order to be considered eligible for funding, the correct Authorized Official must be designated and have knowledge of the certified assurances associated with this funding opportunity. If the incorrect Authorized Official is listed in H.2 of the application, the application will be deemed ineligible for funding.**

The Authorized Official is the individual who has the authority to legally bind the applicant into a contract and is generally the applicants elected or appointed chief executive. For example:

*If the applicant agency is a city, the Mayor or City Administrator shall be the Authorized Official*

*If the applicant agency is a county, the Presiding County Commissioner or County Executive shall be the Authorized Official*

*If the applicant agency is a State Department, the Director shall be the Authorized Official*

*If the applicant agency is a college/university, the President shall be the Authorized Official*

*If the applicant agency is a nonprofit, the Board Chair/President shall be the Authorized Official, this includes Fire Protection Districts.*

*If the applicant agency is an Regional Planning Commission (RPC) or Council of Government (COG), the Executive Director shall be the Authorized Official*

*If a designee is being utilized to authorize the application, the Missouri Department of Public Safety (DPS) reserves the right to request documentation that indicates the designee has the authority to legally bind the applicant into a contract in lieu of the Authorized Official at the time of application submission.*

**\*\*The above list is not an all-inclusive list. If you do not fall into the above listed categories, or if you are unsure of who the Authorized Official is for your agency, please contact the Missouri Office of Homeland Security at (573) 522-6125.\*\***

#### **H.2 Authorized Official**

**Name and Title:**

Bob Dixon, Presiding Commissioner

**H.3 Name and Title of person completing this proposed application:**

Robbin Sawyer, Administrative Services Manager

**H.4 Date:**

04/29/2021

---

## **Personnel**

Name:	Position Title:	Position Status:	Employee Status:	%of time spent on this grant funded activities:	Requested Personnel Cost:	Discipline:	Function:	Allowable Activity:
					\$0.00			

---

## **Narrative Justification - Personnel**

---

## **Personnel Benefits**

Name:	Benefits % of Salary	Requested Benefit Cost:	Discipline:	Function:	Allowable Activity:
		\$0.00			

---

**Narrative Justification - Benefits**

**Travel**

Item Name:	Category:	Explanation of Other Travel:	Total Cost:	Discipline:	Function:	Allowable Activity:
			\$0.00			

**Narrative Justification - Travel**

Travel Justification

**Equipment**

Line Item Name:	AEL #:	Qty:	Unit Cost:	Total Sustainme Cost: nt:	Discipline:	Function:	Allowable Activity:
				\$0.00			

**Narrative Justification - Equipment**

**Supplies/Operations**

Supply/Ope ration Type:	Item Name:	Qty:	Unit Cost:	Total Supply or Operation Expense Cost:	Discipline:	Function:	Allowable Activity:
Other (computer, projector, chair, etc.)	Unifi Dream Machine Pro	1.0	\$380.00	\$380.00	Emergency Management	Equipment	Interoperabl e Communicati ons Equipment
Other (computer, projector, chair, etc.)	Unifi Switch Pro-48-POE Network Switches	2.0	\$722.00	\$1,444.00	Emergency Management	Equipment	Interoperabl e Communicati ons Equipment

Other (computer, projector, chair, etc.)	U6 LR Wireless Access Points	2.0	\$180.00	\$360.00	Emergency Management Equipment	Interoperabl e Communicati ons Equipment
Other (computer, projector, chair, etc.)	Clearstream 4 TV Antenna	1.0	\$100.00	\$100.00	Emergency Management Equipment	Interoperabl e Communicati ons Equipment
Other (computer, projector, chair, etc.)	Channel Master Ultra Mini 4 TV Antenna Amplifier	1.0	\$50.00	\$50.00	Emergency Management Equipment	Interoperabl e Communicati ons Equipment
Other (computer, projector, chair, etc.)	15W FM Transmitter	1.0	\$160.00	\$160.00	Emergency Management Equipment	Interoperabl e Communicati ons Equipment
						<b>\$2,494.00</b>

## Narrative Justification - Supplies/Operations

The wireless internet equipment in Skylab is starting to show its age. While wireless-N is still supported and good for "bite-sized" data transmission, the wireless infrastructure in the vehicle needs to be upgraded in preparation for a more "media-ready" future, which would include pushing high-bandwidth video calls and video productions through the internet. This would include upgrading the infrastructure to "Wireless-AE" or Wi-Fi 6, the latest standard. All versions of Wi-Fi are backwards-compatible, so there is no need to worry about communications capability loss for older devices.

The Springfield - Greene County Office of Emergency Management has been a responsible steward of this regional equipment and has also expanded General Revenue funding to maintain these vehicles and regional response capabilities.

**1. Unifi Dream Machine Pro** - The current Wi-Fi infrastructure on Skylab needs to be upgraded. The Dream Machine Pro is the "heart" of that upgrade; offering 10 Gigabit per second fiber, built-in file storage capabilities, Wi-Fi 6, cloud management, and easier administration.

**2. Unifi Switch Pro-48-POE Network Switches** - These switches provide 48 ports per unit, for 96 total additional Ethernet ports. Ethernet ports are used to provide a more reliable connection to the network on Skylab and are preferred for intense data activities such as video streaming. Also, having 96 total ports would allow for a backup phone solution in case our dedicated VoIP hardware would fail.

**3. U6 LR Wireless Access Points** - These are Wi-Fi antennas designed for outdoor and event use and will extend effective wireless coverage and range.

**4. Clearstream 4 TV Antenna** - This will be used to receive local television reception from over-the-air television stations in the event that satellite service would be interrupted.

**5. Channel Master Ultra Mini 4 TV Antenna Amplifier** - This will be used in conjunction with the TV antenna to receive television stations in the "fringe" or outer-area of reception where digital television signal drop-out is common.

**6. 15W FM Transmitter** - This will be used for broadcasting information locally "on the scene" over low-power FM frequencies and can be used to "live broadcast" or play an audio file on loop.

---

## Contractual

Item Name:	Type of Contract:	Contract Amount:	Discipline:	Function:	Allowable Activity:
Communications Support Vehicle- Satellite Television Services	Subscriber Fees	\$1,700.00	Emergency Management	Equipment	Interoperable Communications Equipment
Communications Support Vehicle- Data Service- Cellular- AT&T	Subscriber Fees	\$750.00	Emergency Management	Equipment	Interoperable Communications Equipment
Communications Support Vehicle- Data Service- Cellular- Verizon	Subscriber Fees	\$750.00	Emergency Management	Equipment	Interoperable Communications Equipment
Communications Support Vehicle- Data Service- Satellite Data	Subscriber Fees	\$9,200.00	Emergency Management	Equipment	Interoperable Communications Equipment
Communications Support Vehicle- Voice Service- Satellite Voice Services	Subscriber Fees	\$975.00	Emergency Management	Equipment	Interoperable Communications Equipment
Communications Support Vehicle - VoiSip	Subscriber Fees	\$250.00	Emergency Management	Equipment	Interoperable Communications Equipment
		\$13,625.00			

---

## Narrative Justification - Contractual

#### **Subscriber Services:**

**Communications Support Vehicle - Satellite Television Services:** This item is being requested to sustain the satellite television capabilities of the Regional Communications vehicle for situational awareness and media monitoring.

**Communications Support Vehicle - Data Service - Cellular:** This item is being requested to sustain the data connectivity capabilities of the Regional Communications vehicle.

**Communications Support Vehicle - Data Service - Cellular:** This item is being requested to sustain the data connectivity capabilities of the Regional Communications vehicle.

**Communications Support Vehicle - Data Service - Satellite Data:** This item is being requested to sustain the data connectivity capabilities of the Regional Communications vehicle.

**Communications Support Vehicle - Voice Service - Satellite Voice Services:** This item is being requested to sustain the voice connectivity capabilities of the Regional Communications vehicle.

**Communications Support Vehicle - VoiSip - Phone Service over Internet:** This item is being requested to sustain the phone trunk service of the Regional Communications vehicle.

---

### **Total Budget**

<b>Total Personnel:</b>	<b>\$0.00</b>
<b>Total Benefits:</b>	<b>\$0.00</b>
<b>Total Travel:</b>	<b>\$0.00</b>
<b>Total Equipment:</b>	<b>\$0.00</b>
<b>Total Supplies/Operation:</b>	<b>\$2,494.00</b>
<b>Total Contractual:</b>	<b>\$13,625.00</b>
<b>Total Project Cost:</b>	<b>\$16,119.00</b>

---

### **Named Attachments**

[illegible]

## AUDIT REQUIREMENTS

---

An audit is required for the agency fiscal year, when STATE financial assistance, (which consists of funds received directly from the State of Missouri, but does not include federal pass-through funds), of \$250,000 or more is expended by the applicant agency.

☞ An audit is required for the agency fiscal year, when FEDERAL financial assistance, (which consists of funds received directly from the Federal Government or federal funds passed through state agencies), of \$750,000 or more is expended by the applicant agency.

☞ No audit of any type is required when STATE financial assistance of less than \$250,000 or FEDERAL financial assistance of less than \$750,000 is expended. However, the recipient must maintain detailed records on grant activity required for such grants.

☞ NOTE: The State Auditor of Missouri audits all state agencies, third class counties, and all judicial circuits. First, second, and fourth-class counties and other local political subdivisions and not-for-profit agencies must make arrangements with a private CPA firm to perform an audit.

---

This section must be completed **even if your agency is not required** to submit an audit to the Missouri Department of Public Safety.

1. Date of last audit: 7/21/20
2. Date(s) covered by last audit: 01/01/19 - 12/31/19
3. Last audit performed by: KPM CPAs, PC  
Phone number of auditor: 417/882-0904  
Lead Auditor: Rebecca Baker (rbaker@kpmcpa.com)
4. Date of next audit: Summer 2021
5. Date(s) to be covered by next audit: 01/01/20 - 12/31/20
6. Next audit will be performed by: KPM, CPAs, PC  
Phone number of auditor: 417/882-0904
7. Total amount of funds received from **ALL** entities **INCLUDING** the Department of Public Safety: Federal Amount: \$1,750,943 State Amount: \$68,230
8. Harvester Report ID for audit year: 848618
9. Were equitable sharing expenditures included in the SEFA: Yes

Agency: Greene County Missouri

Phone: 417/868-4120

Signed:   
*Effective 2016*

Date: 09/19/20

ext

# Missouri Department of Public Safety

## Application

124236 - FY 2021 SHSP Region D

125235 - FY21 - Missouri Region D WebEOC Program Sustainment

State Homeland Security Program (SHSP)

Status:

Editing

Submitted Date:

---

## Primary Contact

Name:\*

Mr.

Jonathan

Ayres

Title

First Name

Last Name

Job Title:

Region D WebEOC Administrator

Email:

jayres@regiondwebeoc.org

Mailing Address:

330 W Scott

Street Address 1:

330 W Scott

Street Address 2:

\*

Springfield

Missouri

65802

City

State/Province

Postal Code/Zip

Phone:\*

417-869-6040

Ext.

Fax:

417-869-6654

---

## Organization Information

Applicant Agency:

Greene County Emergency Management Agency

Organization Type:

Government

Federal Tax ID#:

446000506

DUNS #:

095831228

SAM/CCR CAGE Code:

3QMR3

11/23/2011

Valid Until Date

Organization Website:

greenecountymo.gov/oem

Mailing Address:

330 W Scott Street

Street Address 1:

Street Address 2:

City\*

Springfield

Missouri

65802

3859

City

State/Province

Postal Code/Zip

+ 4

County:

Greene

Congressional District:

07

Phone:\*

417-869-6040

Ext.

Fax:

417-869-6654

## Contact Information

### Authorized Official

*The Authorized Official is the individual who has the authority to legally bind the applicant into a contract and is generally the applicants elected or appointed chief executive. For example:*

*If the applicant agency is a city, the Mayor or City Administrator shall be the Authorized Official*

*If the applicant agency is a county, the Presiding County Commissioner or County Executive shall be the Authorized Official*

*If the applicant agency is a State Department, the Director shall be the Authorized Official*

*If the applicant agency is a college/university, the President shall be the Authorized Official*

*If the applicant agency is a nonprofit, the Board Chair/President shall be the Authorized Official, this includes Fire Protection Districts*

*If the applicant agency is an Regional Planning Commission or Council of Government, the Executive Director shall be the Authorized Official*

*\*\*This is not an all-inclusive list. If your agency does not fall into the above categories or you are unsure of who the Authorized Official should be for your agency, please contact the Missouri Office of Homeland Security at (573) 522-6125\*\**

Authorized Official:\*

Mr.

Bob

Dixon

Title (Mr.Ms.etc)

First Name

Last Name

Job Title:

Presiding Commissioner

Agency:

Greene County

Mailing Address:

1443 N Robberson, 10th Floor

Street Address 1:

Street Address 2:

\*

Springfield

Missouri

65802

City

State

Zip Code

Email:

bdixon@greenecountymo.gov

Phone:\*

417-868-4112

Office

Ext.

Cell

Fax:

**Applicant Project Director**

**Applicant Project Director:\***

**Job Title:**

**Agency:**

**Mailing Address:**

**Street Address 1:**

**Street Address 2:**

\*

**Email:**

**Phone:\***

**Fax**

**Fiscal Officer**

**Fiscal Officer:\***

**Job Title:**

**Agency:**

**Mailing Address:**

**Street Address 1:**

**Street Address 2:**

\*

**Email:**

**Phone:\***

**Fax**

**Project Contact Person**

**Project Contact Person:**

**Job Title:**

**Agency:**

**Mailing Address:**

**Mr.**

Title (Mr.Ms.etc)

**Larry**

First Name

**Woods**

Last Name

**Director**

**Springfield/Greene County Office of Emergency Mgmt**

**330 W Scott Street**

**Springfield**

City

**Missouri**

State

**65802**

Zip Code

**lwoods@greenecountymo.gov**

**417-869-6040**

Office

Ext.

Cell

**Ms.**

Title (Mr.Ms.etc)

**Robbin**

First Name

**Sawyer**

Last Name

**Administrative Manager**

**Springfield/Greene County Office of Emergency Mgmt**

**330 W Scott Street**

**Springfield**

City

**Missouri**

State

**65802**

Zip Code

**rsawyer@greenecountymo.gov**

**417-869-6040**

Office

Ext.

Cell

**Mr.**

Title (Mr.Ms.etc)

**Jonathan**

First Name

**Ayres**

Last Name

**Region D WebEOC Administrator**

**MO Reg D WebEOC Program**

**330 W Scott Street**

Street Address 1:

Street Address 2:

Email:

Phone:

Fax:

Springfield

City

Missouri

State

65802

Zip Code

jayres@regiondwebeoc.org

Office

Ext.

417-664-3591

Cell

---

## Section A.1 through B.2

### A. Project Worksheet

A.1 Project Title:

FY2021 Missouri Region D WebEOC Sustainment

A.2 Agency Name:

Greene County Emergency Management

A.3 Region:

D

A.4 County:

Greene

A.5 Project Location Zip Code:

65802

A.6 Project Activity Type:

Develop/enhance homeland security/emergency management organization and structure

A.7 Was this project previously funded with State Homeland Security Program (SHSP) funds?

Yes

A.7.a If you answered yes to Question # A.7, please give a brief description of the year and the project that was previously funded.

This program has been funded since approximately 2011 through the Regional Homeland Security Program.

A.8 Does this project increase capabilities (build/enhance), or does this project sustain capabilities at the current level?

Sustain

A.8.a If you answered Build/Enhance to question A.8 provide an answer to the following question. Has your agency coordinated with other agencies to determine if the resources requested are currently available within the region/state?

No

*Coordination example: contacted other agencies within your region to see if this capability/asset currently exists and is available.*

A.8.b If answered yes to A.8.a, explain coordination efforts made by your agency, as well as the outcome of the coordination efforts.

The only other WebEOC programs that exist in the State are the State of Missouri and the Kansas City Metro systems, which Region D is interoperable and cooperative with.

A.9.a Project Description

This project will sustain the operations and capabilities of the Missouri Region D

WebEOC Program.

	Purchases include: annual maintenance contract for software updates and support,
A.9.b Provide a summary of specific project actions/items that will be purchased with grant funds:	training materials for use within Region D, funding for mileage for trainers and staff to attend meetings/trainings, and funding to attend WebEOC conference and travel.
A.9.c Provide estimated duration of the project (how long will it take to complete this project):	N/A - This is a continuing effort.
A.9.d What are the objectives this project is designed to accomplish? (the purpose of the project)	This project will sustain the operations and capabilities of the Missouri Region D WebEOC Program.
A.9.e How does this project align with/increase terrorism preparedness for your agency/region/state?	This project increases preparedness by providing a common operating picture and networkable framework of communications between all entities in the Region.
A.9.f Why is this project necessary for the region/state?	This project is necessary for information sharing, resource requests, and providing incident documentation for incidents.
A.10 Please discuss the future sustainment plan for the requested item(s) in the application.	Sustainment will continue to be requested through additional future years' SHSP programs.
<b>B. Project Capability, THIRA and Dual Use</b>	
<i>Please review the State FY 2019 MO THIRA and FY 2020 MO SPR to determine the following:</i>	
B.1 Which Primary Core Capability best aligns to this project?	Situational Assessment
B.2 How does this project impact the Capability Target listed on the State THIRA/SPR for the Core Capability chosen in B.1?	Maintain investments in WebEOC and continue to look for ways to leverage technology.
1000 Character Limit	
<hr/>	
B.3 If this project is dual use, please describe how this project supports terrorism preparedness, and how this project increases preparedness for other hazards unrelated to terrorism: (both terrorism preparedness, and other unrelated hazards)?	The Missouri Region D WebEOC Program is an all-hazards platform, allowing use for response to terrorism incidents, as well as severe weather, pandemic, and other types of emergent and preplanned events.

Dual use are activities, which support the achievement of target capabilities related to terrorism preparedness may simultaneously support enhanced preparedness for other hazards unrelated to acts of terrorism. Funding for activities not explicitly focused on terrorism preparedness must demonstrate Dual Use.  
1000 Character Limit

**B.4 Please review the National Priorities in the FY 2021 SHSP Notice of Funding Opportunity or FY 2021 SHSP LETPA Notice of Funding Opportunity.**

1. Enhancing Cybersecurity
2. Enhancing the Protection of Soft Targets/Crowded Places
3. Enhancing Information and Intelligence Sharing and Cooperation with Federal Agencies including DHS
4. Addressing Emergent Threats
5. Combating Domestic Violent Extremism

*If this project aligns to a National priority, please select the priority below. (If your project does not align to a National priority, please select Not Applicable.)*

National Priority: Enhancing information and intelligence sharing and cooperation with federal agencies, including DHS

Core Capability: Intelligence and information sharing

### C. Project Background

*Complete Project Background Investment Justification alignment and Prior Accomplishments for each year ONLY if proposed project was also funded with prior grant funds.*

C.1 Was any portion of the proposed project funded with FY 2020 funds?: Yes

C.2 FY 2020 Investment Justification Building and Sustaining Regional Collaboration via Regional Homeland Security Oversight

*If funded with FY 2020 Federal Grant Award what was the last major accomplishment/milestone that was completed with FY 2020 funds?*

C.3 FY 2020 Prior Accomplishments: Sustaining the operations of the software platform and providing training.

250 Character Limit

C.4 Was any portion of the proposed project funded with FY 2019 funds?: Yes

C.5 FY 2019 Investment Justification: Building and Sustaining Regional Collaboration via Regional Homeland Security Oversight

*If funded with FY 2019 Federal Grant Award what was the last major accomplishment/milestone that was completed with FY 2019 funds?*

C.6 FY 2019 Prior Accomplishments: Sustaining the operations of the software platform and providing training.

250 Character Limit

C.7 Was any portion of the proposed project funded with FY 2018 funds?: Yes

C.8 FY 2018 Investment Justification: Building and Sustaining Regional Collaboration via Regional Homeland Security Oversight Committees

*If funded with FY 2018 Federal Grant Award what was the last major accomplishment/milestone that was completed with FY 2018 funds?*

C.9 FY 2018 Prior Accomplishments:

**Sustaining the operations of the software platform and providing training.**

*250 Character Limit*

#### D. Deployable/Sharable Resources

*Deployable Resource: Identifies the availability and utility of an asset to multiple jurisdictions, regions, and the Nation; provides information on mobility of assets in an area. An asset that is physically mobile and can be used anywhere in the United States and territories via Emergency Management Assistance Compacts or other mutual aid/assistance agreements.*

*Shareable Resource: Provides information on the utility of a non-deployable shared asset in a region; identifies the asset's ability to augment and sustain a reinforced response within a region. An asset that can be utilized as a local, state, regional, or national capability, but is not physically deployable (i.e., fusion centers).*

D.1 Does this project fund resources that are:

**Shareable Resource**

*If answered Deployable in question D.1 complete questions D.2-D.8.*

*If answered Shareable in question D.1 complete questions D.2-D.4.*

*If answered NA in question D.1 skip to Section E.*

D.2 Item Name:

**Missouri Region D WebEOC System**

**This project will sustain the operations and capabilities of the Missouri Region D**

D.3 If sustaining deployable/sharable Homeland Security resource(s), describe how the project sustains each resource(s)?:

**WebEOC Program, to include servers, software maintenance, and training.**

*250 Character Limit*

D.4 Special conditions/requirements on sharing the deployable/shareable resource(s):

**N/A**

*Example: Specific requirements of equipment, operator, etc.*

*250 Character Limit*

*FEMA Resource Typing Library Tool is located at <https://rtlt.preptoolkit.org/Public>.*

D.5 Is deployable resource NIMS Kind & Typed?:

**No**

D.6 Deployable Resources

Kind & Type Name(s):

**N/A**

*Example: Mass Casualty Support Vehicle*

*250 Character Limit*

D.7 Deployable Resources

Kind & Type ID(s):

(ID x-xxx-xxxx)

**N/A**

*Example: ID 3-508-1032 Vehicle*

*250 Character Limit*

D.8 If not NIMS Kind & Typed, explain how the item further supports the Homeland Security Initiative:

**N/A**

*250 Character Limit*

#### E. Audit Details

E.1 Has the Applicant Agency exceeded the federal expenditure threshold of \$750,000 in federal funds during agency's last fiscal year? **Yes**

*If the applicant agency exceeded the federal expenditure threshold in their last fiscal year, they must have their Single Audit or Program Specific Audit completed and submitted to the OHS within nine (9) months after the end of the audited fiscal year.*

E.2 Date last audit completed:

MM/DD/YYYY

07/21/2020

*If an agency has never had an audit, please enter the date of their last annual financial statement.*

E.3 By checking this box the applicant agency understands they are required to upload a copy of the agency's most recent completed audit (or annual financial statement) in the Named Attachments section of this application: **Yes**

#### F. Risk Assessment

F.1 Does the applicant agency have new personnel that will be working on this award?: **No**

*New personnel is defined as working with this award type less than 12 months.*

F.2 Does the applicant agency have a new fiscal or time accounting system that will be used on this award?: **No**

*New fiscal or time accounting system is defined as a system being utilized less than 12 months within the applicant agency.*

F.3 Does the applicant agency receive any direct Federal awards?: **Yes**

*Direct grants are grants that you apply directly to the federal government for and there is no intermediary agency such as OHS.*

F.3.a If you answered yes to Question # F.3, please list the direct Federal awards the agency receives. **N/A**

F.4 Did the applicant agency receive any Federal monitoring on a direct federal award in their last fiscal year?: **No**

#### G. National Incident Management System (NIMS)

G.1 Has the jurisdiction formally adopted the National Incident Management System (NIMS) throughout the jurisdiction or organization to prevent, protect against, mitigate, respond to, and recover from incidents?: **Yes**

G.2 Has the jurisdiction ensured training for the incident personnel incorporates NIMS training that is pertinent to each individuals incident responsibilities in alignment with the NIMS training program?: **Yes**

G.3 Does the jurisdiction develop, maintain, and implement mutual aid agreements (to include agreements with the private sector and nongovernmental organizations)?: **Yes**

G.4 Does the jurisdiction apply ICS as the standard approach to the on-scene command, control, and coordination of incidents?: **Yes**

G.5 Does the jurisdiction enable effective and secure communications within and across jurisdictions and organizations?: **Yes**

G.6 Does the jurisdiction identify and inventory deployable incident resources consistently with national NIMS resource typing definitions and job titles/position qualifications, available through the Resource Typing Library Tool?: **Yes**

G.7 Has your agency designated a point of contact to serve as the principal coordinator for the implementation of NIMS? **Yes**

G.8 Has your agency adopted NIMS terminology for the qualification, certification, and credentialing of incident personnel? **Yes**

G.9 Does your agency use the NIMS Resource Management Process during incidents? (identify requirements, order and acquire, mobilize, track and report, demobilize, reimburse and restock) **Yes**

G.10 Does your agency implement JIS for the dissemination of incident information to the public, incident personnel, traditional and social media, and other stakeholders? **Yes**

G.11 Does your agency use MAC Groups/Policy Groups during incidents to enable decision making among elected and appointed officials and support resource prioritization and allocation? **Yes**

G.12 Does your agency organize and manage EOC's and EOC teams consistent with pertinent NIMS guidance? **Yes**

G.13 Does your agency apply plain language and clear text communications standards? **Yes**

G.14 Does your agency develop, maintain, and implement procedures for data collection, analysis, and dissemination to meet organizational needs for situational awareness? **Yes**

*If answered No to any questions G.1-G.14, please explain planned activities during grant period to strive towards being NIMS compliant.*

G.15 Planned Activities:

#### H. Certified Assurances

*To the best of my knowledge and belief, all data in this application is true and correct, the document has been duly authorized by the governing body of the applicant, and the applicant attests to and/or will comply with the following Certified Assurances if the assistance is awarded:*

##### *SHSP Certified Assurances*

H.1 By checking this box, I have read and agree to the terms and conditions of this grant: **Yes**

**In order to be considered eligible for funding, the correct Authorized Official must be designated and have knowledge of the certified assurances associated with this funding opportunity. If the incorrect Authorized Official is listed in H.2 of the application, the application will be deemed ineligible for funding.**

*The Authorized Official is the individual who has the authority to legally bind the applicant into a contract and is generally the applicants elected or appointed chief executive. For example:*

*If the applicant agency is a city, the Mayor or City Administrator shall be the Authorized Official*

*If the applicant agency is a county, the Presiding County Commissioner or County Executive shall be the Authorized Official*

*If the applicant agency is a State Department, the Director shall be the Authorized Official*

*If the applicant agency is a college/university, the President shall be the Authorized Official*

*If the applicant agency is a nonprofit, the Board Chair/President shall be the Authorized Official, this includes Fire Protection Districts.*

*If the applicant agency is an Regional Planning Commission (RPC) or Council of Government (COG), the Executive Director shall be the Authorized Official*

*If a designee is being utilized to authorize the application, the Missouri Department of Public Safety (DPS) reserves the right to request documentation that indicates the designee has the authority to legally bind the applicant into a contract in lieu of the Authorized Official at the time of application submission.*

*\*\*The above list is not an all-inclusive list. If you do not fall into the above listed categories, or if you are unsure of who the Authorized Official is for your agency, please contact the Missouri Office of Homeland Security at (573) 522-6125.\*\**

#### **H.2 Authorized Official**

**Name and Title:**

Bob Dixon, Presiding Commissioner

**H.3 Name and Title of  
person completing this  
proposed application:**

Jonathan Ayres, Region D WebEOC Administrator

**H.4 Date:**

04/21/2021

---

## **Personnel**

<b>Name:</b>	<b>Position Title:</b>	<b>Position Status:</b>	<b>Employee nt Status:</b>	<b>%of time spent on this grant funded activities:</b>	<b>Requested Personnel Cost:</b>	<b>Discipline:</b>	<b>Function:</b>	<b>Allowable Activity:</b>
					\$0.00			

---

## **Narrative Justification - Personnel**

---

### **Personnel Benefits**

<b>Name:</b>	<b>Benefits % of Salary</b>	<b>Requested Benefit Cost:</b>	<b>Discipline:</b>	<b>Function:</b>	<b>Allowable Activity:</b>
		\$0.00			

---

## Narrative Justification - Benefits

### Travel

Item Name:	Category:	Explanation of Other Travel:	Total Cost:	Discipline:	Function:	Allowable Activity:
WebEOC Conference	Lodging, Per Diem/Meals, Vehicle Rental, Other (Parking, taxi, airfare, etc.)	Airfare, Parking, Registration	\$6,991.08	Emergency Management	Training	Training workshops and conferences
Region D WebEOC Trainings and Meetings	Lodging, Mileage	Mileage and Lodging	\$1,650.00	Emergency Management	Training	Travel
			<b>\$8,641.08</b>			

## Narrative Justification - Travel

### Travel Justification

*Region D WebEOC End Trainings and Meetings:* This item is being requested for Missouri Region D WebEOC trainers that travel across the region to deliver enduser training to jurisdictions. Many of these trainers do so with personal vehicles; taking time off from their primary employer to deliver this training across the region. Also included in this category is mileage to attend meetings of the administrators of the Missouri Region D, Kansas City Metro, and State of Missouri and other WebEOC Systems for planning and coordination of interoperability between the systems.

*WebEOC Conference:* Airfare, Lodging, Meals, Parking, Rental Car, and Rental Car Fuel funding is requested for training at the WebEOC Administrator Training / Conference that is conducted annually. The airfare, lodging, meals, parking, rental car and rental car fuel are listed for the Missouri Region D WebEOC Administration Team and the Missouri Region D WebEOC Advisory Committee to attend the conference. The Missouri Region D WebEOC Administration Team is a 4 member group; which maintains the Missouri Region D WebEOC System through programming, creation of new boards, user and permissions administration, reporting functions, development and coordinating enduser training. The Missouri Region D WebEOC Advisory Committee is a 5 person committee that sets policy and direction for WebEOC use within the Region. Travel is for 5 personnel, total, to attend the conference. The 2020 and 2021 Conferences had been cancelled due to Covid, and those funds returned to the RHSOC for redistribution.

At the time of the grant application, we have not been provided the location for the 2022 conference. (Cost basis for this request was based upon costs incurred from the 2018 Conference.)

## Equipment

Line Item Name:	AEL #:	Qty:	Unit Cost:	Total Sustainme Cost:	Discipline:	Function:	Allowable Activity:
-----------------	--------	------	------------	-----------------------	-------------	-----------	---------------------

\$0.00

---

## Narrative Justification - Equipment

---

## Supplies/Operations

Supply/Operation Type:	Item Name:	Qty:	Unit Cost:	Total Supply or Operation Expense Cost:	Discipline:	Function:	Allowable Activity:
Other (computer, projector, chair, etc.)	WebEOC Annual Maintenance	1.0	\$26,000.00	\$26,000.00	Emergency Management	Equipment	Information Technology
Other (computer, projector, chair, etc.)	WebEOC Training Supplies	1.0	\$450.00	\$450.00	Emergency Management	Training	Supplies
				\$26,450.00			

---

## Narrative Justification - Supplies/Operations

*WebEOC Training Manual Printing:* This item is being requested for printing of training manuals for instructing end-users on operations of the Missouri Region D WebEOC System. New manuals will be required this year, as a significant upgrade will be occurring and user manuals outdated.

*WebEOC Annual Maintenance:* Items in this category include:

- \* Annual support and maintenance contract for WebEOC
- \* Web SSL (Security Certificates)
- \* Domain Name Renewal, public webspace and email services
- \* Web servers are hosted by Amazon AWS Cloud Infrastructure; which is also how the FEMA WebEOC deployment has been performed. This line item will sustain the costs to host the servers within Amazon AWS Cloud. This would also remove the future costs of upgrading any hardware, as this is a virtualized / cloud environment. Cost basis was determined based upon estimate from Amazon AWS Cloud Services.

---

## Contractual

Item Name:	Type of Contract:	Contract Amount:	Discipline:	Function:	Allowable Activity:
\$0.00					

---

### Narrative Justification - Contractual

### Total Budget

<b>Total Personnel:</b>	\$0.00
<b>Total Benefits:</b>	\$0.00
<b>Total Travel:</b>	\$8,641.08
<b>Total Equipment:</b>	\$0.00
<b>Total Supplies/Operation:</b>	\$26,450.00
<b>Total Contractual:</b>	\$0.00
<b>Total Project Cost:</b>	\$35,091.08

## Named Attachments

[illegible]

## AUDIT REQUIREMENTS

---

An audit is required for the agency fiscal year, when STATE financial assistance, (which consists of funds received directly from the State of Missouri, but does not include federal pass-through funds), of \$250,000 or more is expended by the applicant agency.

➤ An audit is required for the agency fiscal year, when FEDERAL financial assistance, (which consists of funds received directly from the Federal Government or federal funds passed through state agencies), of \$750,000 or more is expended by the applicant agency.

➤ No audit of any type is required when STATE financial assistance of less than \$250,000 or FEDERAL financial assistance of less than \$750,000 is expended. However, the recipient must maintain detailed records on grant activity required for such grants.

➤ NOTE: The State Auditor of Missouri audits all state agencies, third class counties, and all judicial circuits. First, second, and fourth-class counties and other local political subdivisions and not-for-profit agencies must make arrangements with a private CPA firm to perform an audit.

---

This section must be completed **even if your agency is not required** to submit an audit to the Missouri Department of Public Safety.

1. Date of last audit: 7/21/20
2. Date(s) covered by last audit: 01/01/19 - 12/31/19
3. Last audit performed by: KPM CPAs, PC  
Phone number of auditor: 417/882-0904  
Lead Auditor: Rebecca Baker (rbaker@kpmcpa.com)
4. Date of next audit: Summer 2021
5. Date(s) to be covered by next audit: 01/01/20 - 12/31/20
6. Next audit will be performed by: KPM, CPAs, PC  
Phone number of auditor: 417/882-0904
7. Total amount of funds received from **ALL** entities **INCLUDING** the Department of Public Safety: Federal Amount: \$1,750,943 State Amount: \$68,230
8. Harvester Report ID for audit year: 848618
9. Were equitable sharing expenditures included in the SEFA: Yes

Agency: Greene County Missouri

Phone: 417/868-4120

Signed: \_\_\_\_\_

*Effective 2016*

Date: 09/19/20

REAL ESTATE PURCHASE AGREEMENT

THIS AGREEMENT, made and entered into this 26<sup>th</sup> day of April, 2021, by and between Deanna Lea Kreider, Trustee of the D.L. Kreider Family Trust dated 10/30/96, as amended and formerly known as the Revocable Living Trust of Deanna Lea Kreider dated 10/30/96, and not individually, whose address is 1943 W. Farm Road 186, Springfield, Missouri 65810 (hereinafter referred to as "Seller") and GREENE COUNTY, MISSOURI, a county of the first class without a charter form of government (hereinafter referred to as "Buyer").

**WITNESSETH:**

WHEREAS, Seller is the owner of certain real property (hereinafter referred to as the "Property") located in Springfield, Greene County, Missouri, and more particularly described as follows: See Exhibit A attached hereto and incorporated herein by reference.

WHEREAS, Buyer desires to acquire said real property with all improvements thereon, and Seller desires to convey all of Seller's right, title and interest in the real estate, pursuant to this Agreement on the date and at the time provided for herein, hereinafter referred to as the "Closing"; and

WHEREAS, the parties hereto desire to set forth certain representations, warranties and covenants made by each to the other as an inducement to the consummation of the sale and certain **additional agreements relating to the sale.**

NOW, THEREFORE, in consideration of promises and mutual representations, warranties, and covenants herein contained, the Sellers and Buyer hereby agree as follows:

1. **Transfer of Real Estate.** For the promises herein provided, Seller shall transfer and convey to Greene County, by Trustee's Warranty Deed, the property, adhering to the terms and conditions herein set forth, all of the Seller's right, title and interest in and to the property legally

described above thereon, free and clear of any and all liens and encumbrances. Notwithstanding anything contained in this Agreement to the contrary, the conveyance by Seller to Buyers shall be subject to any covenants, restrictions and easements of record, tenancies and zoning laws, to any encroachments, overlaps, boundary line disputes and other matters which would be disclosed by the public records, an accurate survey or inspection of the above-described real property and to the lien of taxes and assessments, general and special, for the year 2021 and subsequent years.

2. **Purchase Price.** The base purchase price for the real property shall be the sum of ONE MILLION TWO HUNDRED SEVENTY THOUSAND AND No/ 100 DOLLARS (\$1,270,000.00).

The purchase price shall be paid by Buyer as follows:

- a. In cash at Closing, less the prorations for taxes for the year 2021 and any prior years which are unpaid.
- b. Seller hereby waives any requirements or procedural steps provided by Missouri law pursuant Chapter 523 Revised Statutes of Missouri and its individual sections.

3. **Possession of Premises.** The Property includes a ten (10) acre tract legally described on Exhibit B attached hereto, with a residence and shop building located thereon, (hereinafter referred to as the "Premises"). Possession of the Property excluding the Premises shall be delivered by Seller to Buyer at Closing. Possession of the Premises shall be delivered by Seller to Buyer no later than twelve months from the date of Closing subject to Seller's right to continue to reside on and occupy the Premises: (i) rent free for a period of one year from the date of Closing; and (ii) if the Seller wishes to reside and occupy the Premises beyond the initial one year term, then Buyer shall rent the property to Seller on a month to month basis ("Rental Period") at an amount of \$1,500.00per month, which month to month tenancy may be terminated by either party after giving

60days' notice of termination. The right of Seller to occupy the Premises shall require compliance with all laws and regulations regarding the use and occupancy of the Premises. Seller shall be responsible for all routine maintenance of the home. Greene County shall maintain the driveway at the discretion of the Highway Administrator. Seller shall pay all utilities and Seller's rental insurance expenses associated with residing on the Premises. Seller shall maintain insurance on all of Seller's property located upon the Premises with an insurance company licensed to sell insurance in the State of Missouri.

4. **Indemnification.** Seller shall indemnify Greene County, its agents, employees , and officeholders from any and all third-party suits, claims and demands based upon a condition of the Premises or liability associated with Seller's use and enjoyment of the Premises.

All permanently attached fixtures, appliances and amenities including window treatments shall remain in the home and outbuildings excluding personal items and furniture, and shall be maintained in the same condition as of the date of Closing reasonable wear and tear excepted.

Possession of the Premises shall be delivered at such time as (i) Seller elects to move from the Premises, or (ii) Deanna Kreider is unable to physically reside therein, or (iii) expiration of the term of twelve months from the date of Closing without Seller having continued to occupy the Premises and to pay rent, or (iv) after either party giving notice at least sixty days' notice of termination within the Rental Period.

5. **Obligations of Buyer.** The obligations of Buyer under this Agreement to purchase the Property are subject to the rights of Buyer to inspect the Premises by any persons or firms it selects to determine whether the Premises and all improvements are suitable and satisfactory to Buyer, in Buyer's sole discretion. Buyer shall have a period of twenty (30) days from the date of this Agreement to inspect the Premises and notify the Seller of any unacceptable condition and state

whether it intends to proceed with the Closing of the transaction. In the event repair of such condition the parties agree to participate in mediation, each party acting in good faith, to reach agreement upon an adjustment in the purchase price of the property reflecting the cost to repair and condition unacceptable to Buyer. Provided Buyer proceeds with Closing, Buyer accepts the Property, including the Premises, AS IS, WHERE IS.

6. **Title Insurance.** Seller, at Seller's expense and within 20 days of the date of this Agreement, shall furnish a title insurance commitment issued by a title insurance company reasonably acceptable to Buyer (the "Title Company") on the now current ALTA standard form "B" policy. The commitment shall certify Seller has good and merchantable fee simple title to the above-described Property as of the date of the Closing and transfer of title under this Agreement, subject to the standard commitment exceptions. In the event any easements of record are showing which interfere with the purpose for which this transaction is contemplated, Buyer, in Buyer's reasonable discretion, shall have the right to terminate this Agreement in the event Seller is not able to have the easement terminated or otherwise make reasonable accommodation therefor.

7. **Fees and Expenses.** All customary closing costs and expenses associated in connection with the completion and Closing of this transaction shall be paid one-half by Seller and one-half by Buyer. The purchase price of a title insurance policy and the recording fees shall be paid by Buyer.

8. **Broker's Commissions.** The parties hereto independently and separately warrant that neither has received the services of a real estate agent, and therefore, no real estate commission of any kind shall be due upon the sale of this property.

9. **Environmental Matters.** Within 30 days of the date of this Agreement, Buyer shall have the right to inspect, conduct engineering and structural and mechanical studies and investigate the

premises and the structure thereon to determine any physical, structural, mechanical or topographic conditions which would impede the Buyer's intended use and development of the Property, or the presence of hazardous substances on the Property, all at Buyer's own expense. An environmental assessment company, on Buyer's behalf, will conduct a risk assessment concerning the Property to determine the presence of any hazardous substances on or under the Property, and supply Buyer with all environmental tests results and risk assessment reports pertaining to all hazardous substances or any required remediation that may be required to the structures on the Property or in the soil or groundwater under the Property. Seller shall give Buyer and its inspector's reasonable access to the Property to complete the required inspections and investigations. Buyer shall restore the Property to its pre-inspection condition upon completion of Buyer's investigations.

The Seller, to the best of its knowledge and belief, states that:

- a. There are no abandoned wells, agriculture drainage wells, solid waste disposal areas or underground storage tanks (as defined in Revised Statutes of Missouri) located in, on or about the Property.
- b. There is and has been no hazardous waste stored, generated, treated, transported, installed, dumped, handled or placed in, on or about the Property;
- c. At no time have any federal or state hazardous waste cleanup funds been expended with respect to any of the Property;
- d. There has never been any solid waste disposal site or underground storage tanks located in, on or about the Property, nor has there been any release from any underground storage tank in real property contiguous to the Property which has resulted in any hazardous substance coming in contact with the Property;

- e. The Seller has not received any directive, citation, notice, letter or other communication, whether written or oral, from the Environmental Protection Agency, the Missouri Department of Natural Resources, any other governmental agency with authority under any environmental laws, or any other person or entity regarding the release, disposal, discharge or presence of any hazardous waste on the Property, or any violation of any environmental laws; and
- f. Neither the Property nor any real property contiguous to the Property nor any predecessors in title to the Property are in violation of or subject to any existing, pending or threatened investigation or inquiry by any governmental authority or to any removal or remedial obligations under any environmental laws.

The foregoing representations and warranties of Seller are based on Seller's knowledge and belief.

10. **Leases.** Seller represents and warrants to the Buyer that there is an existing month to month lease in force for the shop building located on the southern portion of the Property, and Seller agrees to assign the lease to Greene County. The lease payment for the building is \$900.00 per month. Seller represents and warrants that there are no other leases in force, and such representation and warranty shall survive the Closing. Seller shall hold harmless and indemnify the Buyer from and against any claims which may arise or be based upon any alleged leasehold interest, tenancy or other right of occupancy or use of any portion of the Property other than the lease disclosed herein.

11. **Representations.** If it is determined prior to Closing that any of the representations contained in paragraphs 8 and 9 are found to be inaccurate, Buyer may declare this Agreement to be null and void, in which case all monies deposited under this Agreement by Buyer, plus any

accrued interest thereon, if any, shall be promptly returned to Buyer. Notwithstanding the foregoing, if at any time prior to Closing there shall be filed by or against Seller, in any court, a petition in bankruptcy or insolvency or for reorganization or for the appointment of a receiver or trustee of all or a portion of Seller's property, and within thirty (30) days thereafter Seller fails to secure discharge thereof, or if Seller makes an assignment for the benefit of creditors or petitions for or enter into an agreement or arrangement with their creditors, then Buyer, by giving seven (7) days prior written notice of any such default to Seller, may terminate this Agreement; and if either party fails to perform the obligations of that party required by this Agreement, the non-defaulting party, by giving seven (7) days prior written notice of default to the defaulting party during which time the defaulting party shall have the right to cure the default, and if not cured, the non-defaulting party may terminate this Agreement. In such event all money deposited under this Agreement, plus any accrued interest thereon, if any, shall be refunded promptly to Buyer, and neither party shall have any further obligation to the other.

12. **Closing.** The Closing shall be conducted at Preferred Title Company on or before June 18, 2021, upon full compliance by Seller of all the provisions of this Agreement, satisfaction of all contingencies of this Agreement and the Title Company becoming obligated to deliver its title insurance policy to Buyer. Buyer shall be entitled to reinspect the Property ten (10) days before Closing and shall not be obligated to proceed with Closing if there are any material breaches of Seller's warranties heretofore stated or any physical or topographical deficiencies in the Property are noted by County inspectors. At Closing, Seller shall deliver to Buyer at the office of the Title Company a properly executed Trustees Warranty Deed conveying the Property to Buyer free and clear of all liens and encumbrances.

13. **Remedies Upon Default.** Seller or Buyer shall be in default under this Agreement if either fails to comply with any material provision within the time limits required by this Agreement. If either party defaults, the party claiming a default shall notify the other party, in writing, of the nature of the default and terminate this Agreement or extend the time for performance by written documents signed by all parties. The notifying party may, but is not required to, provide the defaulting party with a deadline for curing the default. In the event of such a default by either party hereto, the non-defaulting party shall have all rights granted under the laws of Missouri, in order to enforce non-defaulting party's rights, including specific performance, unless this Agreement is terminated, in which event neither party shall have any further obligations to the other. If legal action is brought arising out of such a default, the prevailing party shall be entitled to a reasonable attorney fee. Notwithstanding anything contained in this Agreement to the contrary, Seller's liability under this Agreement and under any deed delivered by Seller at Closing, including liability with respect to any covenants and warranties, is specifically limited to the assets of the Trust Estate held by Seller as Trustee under the Trust created by Deanna Lea Kreider, dated October 30, 1996, as amended.

14. **Execution.** The execution and delivery of facsimile transmissions of this Agreement shall constitute legal and binding obligations of the parties. To facilitate execution, this Agreement may be executed in as many counterparts as may be required, and it shall not be necessary that the signatures of, or on behalf of, each party, or that the signatures of the persons required to bind any party, appear on more than one counterpart. All counterparts shall collectively constitute a single Agreement.

15. **Time is of the Essence.** Time is of the Essence in the performance of each provision of this contract by the parties. All references to a specific time shall mean central time. All references to periods of days shall mean calendar days, unless otherwise provided.

16. **Binding Effect.** This Agreement shall be binding upon and inure to the benefit of the parties, and shall be construed and enforced in accordance with the laws of the State of Missouri.

17. **Entire Agreement.** This Agreement and all attachments hereto constitute the entire Agreement between the parties and there are no representations, warranties, or understandings, written or oral, except as set forth herein, relating to the subject matter of this Agreement, which supersedes all prior Agreements, and this Agreement may not be changed, modified or amended, in whole or in part, except by written documents signed by all parties.

18. **Survival of Provisions.** To the extent necessary to carry out the intent of this Agreement, the provisions herein shall survive the Closing of this transaction.

19. **Assignment.** Seller may not assign this Agreement or any rights or obligations hereunder without the prior written consent of Buyer.

20. **Governing Law.** This contract shall be governed by the laws of the State of Missouri. This contract is to be deemed to have been jointly prepared by the parties hereto, and any uncertainty or ambiguity existing herein shall not be interpreted against any of the parties, but according to the application of the rules and interpretation of contract.

21. **Tax Deferred Sale.** Buyer shall give full cooperation to the Seller in effecting a tax deferred sale of the Property. This cooperation shall include a like-kind exchange under Section 1031 of the Internal Revenue Code. Buyer shall undertake such accommodations as the Seller and Seller's attorneys may reasonably request to accomplish the exchange in a tax deferred manner (including, without limitation, executing such documents as are reasonably necessary for the Seller

to effect such exchange and/or deferral); provided, that Buyer shall not be obligated to incur any expenses directly resulting from the Seller's exchange unless the Seller agrees to reimburse Buyer for such expense.

IN WITNESS WHEREOF, the parties hereto have set their hands the day and year first above written.

"SELLER"



Deanna Lea Kreider, Trustee of the  
D.L. Kreider Family Trust dated 10/30/96,  
as amended

GREENE COUNTY, MISSOURI



Bob Dixon, Presiding Commissioner



Rusty MacLachlan, Commissioner 1st District



John Russell, Commissioner 2nd District

GREENE COUNTY CLERK:

Shane Schoeller  
Greene County Clerk

Auditor Certification

I certify that the expenditure contemplated by this document is within the purpose of the appropriation to which it is to be charged and that there is an unencumbered balance of anticipated revenue appropriated for payment of same.

\_\_\_\_\_  
CINDY STEIN, Greene County Auditor

APPROVED AS TO FORM

\_\_\_\_\_  
Greene County Counselor

ATTACHMENT "A"  
(PAGE 1 OF 2)

A TRACT OF LAND IN THE NORTHWEST QUARTER OF THE NORTHEAST QUARTER OF SECTION 27, TOWNSHIP 28 NORTH, RANGE 22 WEST IN GREENE COUNTY, MISSOURI, DESCRIBED AS FOLLOWS: COMMENCING AT AN EXISTING IRON PIN AT THE NORTH QUARTER CORNER OF SECTION 27, TOWNSHIP 28 NORTH, RANGE 22 WEST AS REFERENCED IN MISSOURI CERTIFIED LAND CORNER DOCUMENT NO. 600-73020; THENCE S89°15'21"E ALONG THE NORTH LINE OF SAID SECTION 27, A DISTANCE OF 40.06 FEET TO THE EASTERLY BOUNDARY OF FARM ROAD 141 FOR THE POINT OF BEGINNING OF THE TRACT DESCRIBED HEREIN; THENCE ALONG THE EASTERLY BOUNDARY OF FARM ROAD 141 THE FOLLOWING SIX COURSES: S10°35'57"W, 267.28 FEET; S14°28'35"E, 104.62 FEET; S00°39'38"E, 99.97 FEET; S10°39'19"W, 202.36 FEET; S16°22'48"E, 106.81 FEET; AND S02°10'02"W, 530.93 FEET TO A POINT 120 FEET LEFT OF THE NEW FARM ROAD 190 CENTER LINE STATION 24+72.96 AS DESCRIBED IN THE DEED TO GREENE COUNTY FILED IN BOOK 2021, PAGE 008052-21 AT THE GREENE COUNTY RECORDER'S OFFICE; THENCE ALONG THE NORTHERN BOUNDARY OF NEW FARM ROAD 190 THE FOLLOWING THREE COURSES: S76°11'43"E, 125.67 FEET; N89°59'38"E, 550.00 FEET; AND N78°45'50"E, 405.66 FEET TO A POINT 185 FEET RIGHT OF THE NEW KANSAS EXPRESSWAY CENTER LINE STATION 144+90 AS DESCRIBED IN SAID BOOK 2021, PAGE 008052-21; THENCE ALONG THE WESTERN BOUNDARY OF NEW KANSAS EXPRESSWAY THE FOLLOWING THREE COURSES: N02°18'18"E, 135.00 FEET; N05°46'17"E, 802.34 FEET; AND N00°33'39"E, 299.20 FEET TO THE NORTH LINE OF SAID SECTION 27; THENCE N89°15'21"W ALONG SAID NORTH LINE, 1109.83 FEET TO THE POINT OF BEGINNING.

AND,

A TRACT OF LAND IN THE SOUTHWEST QUARTER OF THE NORTHEAST QUARTER OF SECTION 27, TOWNSHIP 28 NORTH, RANGE 22 WEST IN GREENE COUNTY, MISSOURI, DESCRIBED AS FOLLOWS: COMMENCING AT AN EXISTING IRON PIN AT THE NORTH QUARTER CORNER OF SECTION 27, TOWNSHIP 28 NORTH, RANGE 22 WEST AS REFERENCED IN MISSOURI CERTIFIED LAND CORNER DOCUMENT NO. 600-73020; THENCE S89°15'21"E ALONG THE NORTH LINE OF SAID SECTION 27, A DISTANCE OF 1330.55 FEET TO AN EXISTING IRON PIN AT THE NORTHEAST CORNER OF THE NORTHWEST QUARTER OF THE NORTHEAST QUARTER OF SAID SECTION 27; THENCE S02°18'17"W ALONG THE EAST LINE OF SAID NORTHWEST QUARTER OF THE NORTHEAST QUARTER, 1327.49 FEET TO THE NORTHEAST CORNER OF THE SOUTHWEST QUARTER OF THE NORTHEAST QUARTER OF SAID SECTION 27; THENCE S02°25'43"W ALONG THE EAST LINE OF SAID SOUTHWEST QUARTER OF THE NORTHEAST QUARTER, 162.71 FEET TO A POINT 90 FEET RIGHT OF THE NEW FARM ROAD 190 CENTER LINE STATION 37+07.27 AS DESCRIBED IN THE DEED TO GREENE COUNTY FILED IN BOOK 2021, PAGE 008052-21 AT THE GREENE COUNTY RECORDER'S OFFICE FOR THE POINT OF BEGINNING OF THE TRACT DESCRIBED HEREIN; THENCE ALONG THE SOUTHERN BOUNDARY OF NEW FARM ROAD 190 THE FOLLOWING TWO COURSES: S89°59'38"W, 1247.27 FEET; AND S44°15'14"W, 27.93 FEET TO A POINT ON THE EASTERLY BOUNDARY OF FARM ROAD 141; THENCE ALONG THE EASTERLY BOUNDARY OF FARM ROAD 141 THE FOLLOWING TWO COURSES: S03°26'39"E, 34.06 FEET; AND S00°56'58"E, 202.62 FEET TO A POINT ON THE NORTHERLY BOUNDARY OF EXISTING FARM ROAD 190; THENCE ALONG THE NORTHERLY BOUNDARY OF EXISTING FARM ROAD 190 THE FOLLOWING FIVE COURSES: S43°56'38"E, 43.51 FEET; S63°29'03"E, 90.93 FEET; S74°17'45"E,

ATTACHMENT "A"  
(PAGE 2 OF 2)

75.20 FEET; S59°23'36"E, 94.25 FEET; AND S73°34'23"E, 8.87 FEET; THENCE LEAVING SAID NORTHERLY BOUNDARY, S16°25'37"W, 40.00 FEET TO THE NORTHERN-MOST CORNER OF A PARCEL OF LAND DEEDED TO THE CITY OF SPRINGFIELD AND BEING TRACT II AS DESCRIBED IN BOOK 2010, PAGE 019464-10 AT THE GREENE COUNTY RECORDER'S OFFICE, SAID CORNER BEING ON THE SOUTHERLY BOUNDARY OF EXISTING FARM ROAD 190; THENCE ALONG THE NORTHERLY BOUNDARY OF SAID CITY OF SPRINGFIELD PARCEL AND THE SOUTHERLY BOUNDARY OF EXISTING FARM ROAD 190 THE FOLLOWING TWO COURSES: S73°34'23"E, 99.12 FEET; AND S66°16'58"E, 588.07 FEET TO A POINT ON THE WESTERLY BOUNDARY OF A PARCEL OF LAND DEEDED TO GREENE COUNTY AS DESCRIBED IN BOOK 2012, PAGE 047590-12 AT THE GREENE COUNTY RECORDER'S OFFICE; THENCE NORTHERLY ALONG THE WESTERLY BOUNDARY OF SAID GREENE COUNTY PARCEL, THROUGH A CURVE TO THE LEFT HAVING A CENTRAL ANGLE OF 00°50'46", A RADIUS OF 2800.00 FEET AND A CHORD OF 41.35 FEET BEARING N09°03'09"E, AN ARC DISTANCE OF 41.35 FEET TO THE NORTHWEST CORNER OF SAID GREENE COUNTY PARCEL, SAID CORNER BEING ON THE NORTHERLY BOUNDARY OF EXISTING FARM ROAD 190; THENCE ALONG THE NORTHERLY BOUNDARY OF SAID GREENE COUNTY PARCEL AND EXISTING FARM ROAD 190 THE FOLLOWING TWO COURSES: S66°16'58"E, 30.03 FEET; AND S68°49'30"E, 321.18 FEET TO THE EAST LINE OF THE SOUTHWEST QUARTER OF THE NORTHEAST QUARTER OF SAID SECTION 27; THENCE N02°19'45"E ALONG SAID EAST LINE, 790.35 FEET TO THE POINT OF BEGINNING.

(BEARINGS ARE BASED ON GRID NORTH, MISSOURI COORDINATE SYSTEM OF 1983, CENTRAL ZONE.)

Prepared by Great River Engineering  
for Greene County, Missouri  
Project No. 4439  
Date: April 13, 2021

Great River Engineering  
2826 S. Ingram Mill, Springfield, MO 65804  
417-886-7171  
Land Surveying Corporation Certificate of Authority #2001011476



Exhibit "E"

A PARCEL OF LAND LYING IN THE NORTHWEST QUARTER OF THE NORTHEAST QUARTER OF SECTION TWENTY-SEVEN (27), TOWNSHIP TWENTY-EIGHT (28) NORTH, RANGE TWENTY-TWO (22) WEST OF THE FIFTH PRINCIPLE MERIDIAN, GREENE COUNTY, MISSOURI, BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

COMMENCING AT AN EXISTING IRON PIN AT THE NORTHWEST CORNER OF SAID NORTHWEST QUARTER OF THE NORTHEAST QUARTER; THENCE SOUTH 02 DEGREES 10 MINUTES 32 SECONDS WEST, ALONG THE WEST LINE THEREOF, A DISTANCE OF 382.86 FEET; THENCE SOUTH 87 DEGREES 49 MINUTES 28 SECONDS EAST, LEAVING SAID WEST LINE, A DISTANCE OF 31.77 FEET TO AN IRON PIN SET ON THE EASTERLY RIGHT-OF-WAY LINE OF FARM ROAD 141, AS IT NOW EXISTS; THENCE SOUTH 89 DEGREES 15 MINUTES 20 SECONDS EAST, LEAVING SAID RIGHT-OF-WAY LINE, A DISTANCE OF 808.08 FEET TO AN IRON PIN SET; THENCE SOUTH 14 DEGREES 29 MINUTES 45 SECONDS WEST, A DISTANCE OF 602.29 FEET TO AN EXISTING IRON PIN; THENCE NORTH 89 DEGREES 15 MINUTES 20 SECONDS WEST, A DISTANCE OF 672.27 FEET TO AN EXISTING IRON PIN ON SAID EASTERLY RIGHT-OF-WAY LINE OF FARM ROAD 141; THENCE ALONG SAID RIGHT-OF-WAY LINE THE NEXT FIVE (5) CALLS: NORTH 02 DEGREES 10 MINUTES 49 SECONDS EAST, A DISTANCE OF 202.85 FEET TO AN EXISTING IRON PIN; THENCE NORTH 87 DEGREES 49 MINUTES 27 SECONDS WEST, A DISTANCE OF 0.38 FEET; THENCE NORTH 16 DEGREES 10 MINUTES 53 SECONDS WEST, A DISTANCE OF 107.44 FEET TO AN EXISTING IRON PIN; THENCE NORTH 10 DEGREES 41 MINUTES 47 SECONDS EAST, A DISTANCE OF 202.24 FEET, TO AN EXISTING IRON PIN; THENCE NORTH 00 DEGREES 41 MINUTES 48 SECONDS WEST, A DISTANCE OF 80.27 FEET TO THE POINT OF BEGINNING, CONTAINING 437,004.45 SQUARE FEET, MORE OR LESS, SUBJECT TO EASEMENTS, RESTRICTIONS OF RECORD AND ANY PART TAKEN OR USED FOR PUBLIC ROADS.

EX3.

---

### WARRANTY DEED

THIS INDENTURE, made this 9<sup>th</sup> day of April, 2021 by and between **MICHAEL K. NGO and SOW CHEE CHEAH, husband and wife**, of the County of Greene, State of Missouri, hereinafter called "Grantor," and **GREENE COUNTY, STATE OF MISSOURI**, hereinafter called "Grantee" (mailing address of Grantee: 940 Boonville, Springfield, MO 65802);

**WITNESSETH**, that said Grantor, for and in consideration of the sum of One Dollar (\$1.00) and other good and valuable consideration, to it paid by the Grantee, the receipt of which is hereby acknowledged, does by these presents, **GRANT, BARGAIN AND SELL, CONVEY AND CONFIRM** unto the said Grantee, its heirs and assigns, the following described real estate and interests in real estate in the County of Greene, State of Missouri, to-wit:

(See Attachment "A")

**TO HAVE AND TO HOLD** the premises aforesaid, with all and singular the rights, privileges, appurtenances and immunities thereto belonging, or in anywise appertaining, unto the said Grantee, and unto its heirs and assigns forever.

Said Grantor hereby covenants that it is lawfully seized of an indefeasible estate in fee in the premises herein conveyed; that it has good right to convey the same; that the said premises are free and clear of any encumbrances done or suffered by it or those under whom it claims and that it will warrant and defend the title to the said premises unto the Grantee and unto its heirs and assigns forever against the lawful claims and demands of all persons whomsoever, except as follows: None.

---

IN WITNESS WHEREOF, the said Grantor has hereunto set its hand and seal the day and year first above written.

ACCEPTED: Greene County Commission  
DATE: 4/29/2021

Bob Dixon  
Bob Dixon, Presiding Commissioner

Rusty MacLachlan  
Rusty MacLachlan, Commissioner District 1

Grantor:

Michael K. Ngo  
Michael K. Ngo

Sow Chee Cheah  
Sow Chee Cheah

John C. Russell, Commissioner District 2

Rick Artman  
Rick Artman, Administrator  
Greene County Highway Department

STATE OF MISSOURI )  
COUNTY OF Greene ) SS.

ACKNOWLEDGMENT OF HUSBAND AND WIFE

On this 9<sup>th</sup> day of April, in the year 2021, before me, a Notary Public in and for said state, personally appeared Michael K. Ngo and Sow Chee Cheah, his wife, known to me to be the persons who executed the foregoing instrument, and acknowledged to me that they executed the same for the purposes therein stated.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal at my office in Springfield, Missouri the day and year first above written.

Kim M. Hicks NOTARY PUBLIC

Print Name: Kim m. Hicks

My term of office expires: April 3, 2022

"Notary Seal"

KIM M. HICKS  
Notary Public - Notary Seal  
State of Missouri  
Commissioned for Greene County  
My Commission Expires: April 03, 2022  
Commission Number: 14601102

**ATTACHMENT "A"**  
**(PAGE 1 OF 2)**

TRACT NO. 6

GRANTOR: MICHAEL K. NGO AND SOW CHEE CHEAH

A PARCEL OF LAND, BEING PART OF LOT 1 OF WOODFIELD ESTATES, A SUBDIVISION IN THE NORTHEAST QUARTER OF THE NORTHEAST QUARTER OF SECTION 22, TOWNSHIP 28 NORTH, RANGE 22 WEST IN GREENE COUNTY, MISSOURI, THE GRANTOR'S LAND AS DESCRIBED IN BOOK 2005, PAGE 39057-05 AT THE GREENE COUNTY RECORDER'S OFFICE, SAID PARCEL HEREINAFTER DESCRIBED WITH REFERENCE TO THE SURVEYED CENTER LINE OF KANSAS EXPRESSWAY AND THE SURVEYED CENTER LINE OF FARM ROAD 178 AS ESTABLISHED FOR THE KANSAS EXPRESSWAY EXTENSION PROJECT.

THE SURVEYED CENTER LINE OF KANSAS EXPRESSWAY IS DESCRIBED AS FOLLOWS:

COMMENCING AT NORTHWEST CORNER OF SECTION 23, TOWNSHIP 28 NORTH, RANGE 22 WEST; THENCE S88°32'13"E, 78.51 FEET TO KANSAS EXPRESSWAY CENTER LINE STATION 74+71.20 FOR THE POINT OF BEGINNING OF THE CENTER LINE DESCRIBED HEREIN; THENCE S02°23'33"W, 895.33 FEET TO CENTER LINE STATION 83+66.53; THENCE SOUTHERLY THROUGH A TANGENT CURVE TO THE RIGHT HAVING A CENTRAL ANGLE OF 26°21'06" AND A RADIUS OF 1100.00 FEET, AN ARC DISTANCE OF 505.92 FEET TO CENTER LINE STATION 88+72.45; THENCE S28°44'39"W, 547.39 FEET TO CENTER LINE STATION 94+19.84; THENCE SOUTHERLY THROUGH A TANGENT CURVE TO THE LEFT HAVING A CENTRAL ANGLE OF 26°33'11" AND A RADIUS OF 1100.00 FEET, AN ARC DISTANCE OF 509.78 FEET TO CENTER LINE STATION 99+29.62; THENCE S02°11'28"W, 293.72 FEET TO CENTER LINE STATION 102+23.34 FOR THE POINT OF TERMINATION, SAID POINT LYING N88°31'18"W, 383.92 FEET FROM THE EAST QUARTER CORNER OF SECTION 22, TOWNSHIP 28 NORTH, RANGE 22 WEST.

THE SURVEYED CENTER LINE OF FARM ROAD 178 IS DESCRIBED AS FOLLOWS:

COMMENCING AT THE SOUTHEAST CORNER OF SECTION 15, TOWNSHIP 28 NORTH, RANGE 22 WEST; THENCE N89°14'22"W ALONG THE SOUTH LINE OF SAID SECTION 15, A DISTANCE OF 621.50 FEET; THENCE LEAVING SAID SOUTH LINE, N00°59'32"E, 1.87 FEET TO FARM ROAD 178 CENTER LINE STATION 112+85.76 FOR THE POINT OF BEGINNING OF THE CENTER LINE DESCRIBED HEREIN; THENCE S89°00'28"E, 700.00 FEET TO FARM ROAD 178 CENTER LINE STATION 119+85.76 AT KANSAS EXPRESSWAY CENTER LINE STATION 74+71.20; THENCE CONTINUING S89°00'28"E, 700.00 FEET TO FARM ROAD 178 CENTER LINE STATION 126+85.76 FOR THE POINT OF TERMINATION.

ATTACHMENT "A"  
(PAGE 2 OF 2)

THE PARCEL OF LAND IS DESCRIBED AS FOLLOWS:

BEGINNING AT THE NORTHEAST CORNER OF LOT 1 OF WOODFIELD ESTATES, SAID CORNER BEING AT THE INTERSECTION OF THE EXISTING SOUTH RIGHT-OF-WAY LINE OF FARM ROAD 178 AND THE EXISTING WEST RIGHT-OF-WAY LINE OF KANSAS EXPRESSWAY, 78.54 FEET RIGHT OF KANSAS EXPRESSWAY CENTER LINE STATION 74+92.46; THENCE S02°29'53"W ALONG THE EAST LINE OF SAID LOT 1 AND THE EXISTING WEST RIGHT-OF-WAY LINE OF KANSAS EXPRESSWAY, 40.70 FEET TO A POINT 78.61 FEET RIGHT OF KANSAS EXPRESSWAY CENTER LINE STATION 75+33.15; THENCE LEAVING SAID EXISTING RIGHT-OF-WAY LINE, N44°55'34"W, 28.76 FEET TO A POINT 40 FEET RIGHT OF FARM ROAD 178 CENTER LINE STATION 118+85; THENCE N89°00'28"W, 264.43 FEET TO A POINT 40 FEET RIGHT OF FARM ROAD 178 CENTER LINE STATION 116+20.57, SAID POINT BEING ON THE EXISTING SOUTHEASTERLY RIGHT-OF-WAY LINE OF WOODFIELD PLACE; THENCE N32°40'48"E ALONG THE EXISTING SOUTHEASTERLY RIGHT-OF-WAY LINE OF WOODFIELD PLACE, 21.05 FEET TO THE NORTHWEST CORNER OF SAID LOT 1, SAID CORNER BEING 22.09 FEET RIGHT OF FARM ROAD 178 CENTER LINE STATION 116+31.62 ON THE EXISTING SOUTH RIGHT-OF-WAY LINE OF FARM ROAD 178; THENCE S89°35'05"E ALONG SAID EXISTING SOUTH RIGHT-OF-WAY LINE, 275.12 FEET TO THE POINT OF BEGINNING.

CONTAINING 5,613 SQUARE FEET (0.13 ACRE), MORE OR LESS.

(BEARINGS ARE BASED ON GRID NORTH, MISSOURI COORDINATE SYSTEM OF 1983, CENTRAL ZONE.)

Prepared by:  
Great River Engineering  
for Greene County, Missouri  
Project No. 3492  
Date: 06/26/2019

Great River Engineering  
2826 S. Ingram Mill, Springfield, MO 65804  
417-886-7171

Land Surveying Corporation Certificate of Authority #2001011476



P.O.T. STA  
112+85.76

N89°14'22"W 621.50'

N00°59'32"E  
1.87'

SE CORNER  
SECTION 15  
T28N, R22W

FARM ROAD 178

S89°00'28"E

EXISTING R/W LINE

119

P.O.B.  
NE CORNER  
LOT 1  
WOODFIELD  
ESTATES

74+92.46  
78.54' RT

EXISTING R/W LINE

S89°35'05"E 275.12'

N44°55'34"W 28.76'

NEW RW LINE

N89°00'28"W 264.43'

BUILDING SETBACK &  
UTILITY EASEMENT

116+31.62  
22.09' RT

116+20.57  
40' RT

N32°40'48"E

WOODFIELD PLACE

KANSAS EXPRESSWAY

119+06.73  
19.32' RT

502°29'53"W

75+33.15  
78.61' RT

118+85  
40' RT

EXISTING R/W LINE  
20' UTILITY EASEMENT

⑥

MICHAEL K. NGO & SOW CHEE CHEAH  
BOOK 2005, PAGE 39057-05

TRACT AREA 2.97 ACRES  
NEW R/W 0.13 ACRE  
REMAINING 2.84 ACRES

LOT 1 WOODFIELD ESTATES

SCALE: 1"=60'



**GRE**  
GREAT RIVER  
ENGINEERING  
3030 S. NORMAN AVE., ST. LOUIS, MO 63104  
PHONE: (314) 867-7771 FAX: (314) 867-7261  
www.gre-engineering.com



EXHIBIT "B"  
GREENE COUNTY, MO

GRE NO. 3492

Professional Engineer's Certificate of Accuracy Number:  
Engineering: 200010080, Land Surveying: 200011410, Landowner Acknowledgment: 200013970

ex 4

## WARRANTY DEED

**THIS INDENTURE**, Made on the 22<sup>nd</sup> day of April, 2021  
A.D. by and between Stanley Wayne Haseltine, parties of the first part,  
Grantor, and Greene County, State of Missouri Grantee, Mailing Address:  
Greene County Courthouse, Springfield MO 65802, of the County of Greene, in  
the State of Missouri, party of the second part.

**WITNESSTH**, That the said parties of the first part, in consideration of  
the sum of One Dollars (\$1.00) and other good and valuable consideration, to said  
party of the second part, the receipt of which is hereby acknowledged, does by  
these presents, GRANT, BARGAIN AND SELL, CONVEY AND CONFIRM, unto the  
said party of the second part, its heirs and assigns, the following described lots, tracts or  
parcels of land lying, being and situated in the County of Greene and State of Missouri,  
to-wit:

*(See Attachment A)*

**TO HAVE AND TO HOLD** the premises aforesaid, with all and singular the  
rights, privileges, appurtenances and immunities thereto belonging, or in anywise  
appertaining, unto the said party of the second part, and unto its heirs and assigns forever,  
the said parties of the first part hereby covenanting that they are lawfully seized of an  
indefeasible estate in fee in the premises herein conveyed; that they have good right to  
convey the same; that the said premises are free and clear of any encumbrances done or  
suffered by it or those under whom it claims and that it will warrant and defend the title  
to the said premises unto the said party of the second part and unto its heirs and assigns  
forever against the lawful claims and demands of all persons whomsoever,  
except as follows: None.

IN WITNESS WHEREOF, the said Grantor has hereunto set its hand and seal the day and year first above written.

ACCEPTED: Greene County Commission

DATE: 4/29/2021

[Signature]  
Presiding Commissioner Bob Dixon

[Signature]  
Commissioner 1st District, Rusty MacLachlan

[Signature]  
Commissioner 2nd District, John C. Russell

[Signature]  
Rick Artman, Administrator  
Greene County Highway Department

Grantor:

[Signature]  
Stanley Wayne Haseltine

STATE OF MISSOURI )  
COUNTY OF Greene ) ss.

On the 22nd day of April, 2021,  
before me personally appeared Stanley Wayne Haseltine, Stanley Wayne Haseltine,  
to me known to be the person(s) described in and who executed the foregoing instrument, and acknowledged  
he/she executed the same as him/her free act and deed.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal, at my office in  
Springfield, Missouri, the day and year first above written.

[Signature] Notary Public  
Kim M. Hicks  
My Commission Expires: April 3, 2022

KIM M. HICKS  
Notary Public - Notary Seal  
State of Missouri  
Commissioned for Greene County  
My Commission Expires: April 03, 2022  
Commission Number: 14601102

**EXHIBIT "A"**

**PERPETUAL STREET RIGHT OF WAY DESCRIBED AS FOLLOWS:**

ALL THAT PART OF A TRACT OF LAND RECORDED IN BOOK 2108 PAGE 406, GREENE COUNTY, MISSOURI RECORDERS OFFICE; LOCATED IN THE SOUTHWEST QUARTER OF THE SOUTHWEST QUARTER OF SECTION 19, TOWNSHIP 29 NORTH, RANGE 22 WEST, AND PART OF A TRACT OF LAND LYING IN SECTION 30, TOWNSHIP 29 NORTH, RANGE 22 WEST LYING BETWEEN THE NORTH LINE OF SAID SECTION 30 AND THE NORTH RIGHT OF WAY LINE OF FARM ROAD 140, ALL IN GREENE COUNTY, MISSOURI, BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

**BEGINNING AT THE SOUTHWEST CORNER OF SAID SECTION 19;**

**THENCE NORTH 02°21'54" WEST, ALONG THE WEST LINE OF SAID SECTION 19, A DISTANCE OF 616.75 FEET;**

**THENCE SOUTH 87°38'06" EAST, LEAVING SAID WEST LINE, A DISTANCE OF 15.59 FEET;**

**THENCE SOUTH 36°18'37" EAST, A DISTANCE OF 19.99 FEET;**

**THENCE SOUTH 02°23'44" WEST, A DISTANCE OF 188.59 FEET;**

**THENCE SOUTH 02°27'58" EAST, A DISTANCE OF 56.31 FEET;**

**THENCE SOUTHEASTERLY 234.81 FEET ALONG A 310.00 FOOT RADIUS CURVE TO THE LEFT, HAVING A CHORD BEARING AND DISTANCE OF SOUTH 24°09'55" EAST, 229.24 FEET;**

**THENCE SOUTH 45°51'53" EAST, A DISTANCE OF 32.89 FEET;**

**THENCE SOUTH 68°30'06" EAST, A DISTANCE OF 295.32 FEET;**

**THENCE SOUTHEASTERLY 95.17 FEET ALONG A 376.00 FOOT RADIUS CURVE TO THE LEFT, HAVING A CHORD BEARING AND DISTANCE OF SOUTH 75°45'11" EAST, 94.92 FEET;**

**THENCE SOUTH 83°00'16" EAST, A DISTANCE OF 37.76 FEET;**

**THENCE SOUTH 89°09'48" EAST, A DISTANCE OF 25.00 FEET;**

**THENCE SOUTH 44°00'32" EAST, A DISTANCE OF 16.51 FEET TO A POINT ON THE APPARENT NORTH RIGHT OF WAY LINE OF FARM ROAD 140;**

**THENCE NORTH 89°00'32" WEST, ALONG SAID NORTH RIGHT OF WAY LINE AND ITS EXTENSION, A DISTANCE OF 606.29 FEET TO A POINT ON THE WEST LINE OF SECTION 30, TOWNSHIP 29 NORTH, RANGE 22 WEST;**

**THENCE NORTH 02°21'54" EAST, ALONG THE WEST LINE OF SAID SECTION 30, A DISTANCE OF 15.21 FEET TO THE POINT OF BEGINNING. (AS ILLUSTRATED IN SKETCH EXHIBIT "B")**

**EXCEPT ANY PART THEREOF PREVIOUSLY DEEDED OR DEDICATED FOR ROAD RIGHT OF WAY. CONTAINING 65,422 SQUARE FEET**

**AND**

**UTILITY EASEMENT DESCRIBED AS FOLLOWS:**

ALL THAT PART OF A TRACT OF LAND RECORDED IN BOOK 2108 PAGE 406, GREENE COUNTY, MISSOURI RECORDERS OFFICE; LOCATED IN THE SOUTHWEST QUARTER OF THE SOUTHWEST QUARTER OF SECTION 19, TOWNSHIP 29 NORTH, RANGE 22 WEST, GREENE COUNTY, MISSOURI, BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

**COMMENCING AT THE SOUTHWEST CORNER OF SAID SECTION 19;**

**THENCE NORTH 02°21'54" EAST, ALONG THE WEST LINE OF SAID SECTION 19, A DISTANCE OF 199.55 FEET;**

**THENCE SOUTH 87°36'35" EAST, LEAVING SAID WEST LINE, A DISTANCE OF 91.43 FEET TO THE POINT OF BEGINNING;**

**THENCE NORTH 65°50'06" EAST, A DISTANCE OF 15.23 FEET;**

**THENCE SOUTHEASTERLY 59.44 FEET ALONG A 295.00 FOOT RADIUS CURVE TO THE LEFT, HAVING A CHORD BEARING AND DISTANCE OF SOUTH 40°05'33" EAST, 59.34 FEET;**

**THENCE SOUTH 45°51'53" EAST, A DISTANCE OF 29.89 FEET;**

**THENCE SOUTH 68°30'06" EAST, A DISTANCE OF 292.31 FEET;**

**THENCE SOUTHEASTERLY 91.38 FEET ALONG A 361.00 FOOT RADIUS CURVE TO THE LEFT, HAVING A CHORD BEARING AND DISTANCE OF SOUTH 75°45'11" EAST, 91.13 FEET;**

**THENCE SOUTH 83°00'16" EAST, A DISTANCE OF 36.95 FEET;**

**THENCE SOUTH 89°09'48" EAST, A DISTANCE OF 30.43 FEET;**

**THENCE SOUTH 44°00'32" EAST, A DISTANCE OF 16.53 FEET;**

**THENCE NORTH 89°00'32" WEST, A DISTANCE OF 75.17 FEET;**

**THENCE NORTH 83°00'16" WEST, A DISTANCE OF 5.29 FEET;**

**THENCE NORTHWESTERLY 95.17 FEET ALONG A 376.00 FOOT RADIUS CURVE TO THE RIGHT, HAVING A CHORD BEARING AND DISTANCE OF NORTH 75°45'11" WEST, 94.92 FEET;**

**THENCE NORTH 68°30'06" WEST, A DISTANCE OF 295.32 FEET;**

**THENCE NORTH 45°51'53" WEST, A DISTANCE OF 32.89 FEET;**

**THENCE NORTHWESTERLY, 65.15 FEET ALONG A 310.00 FOOT RADIUS CURVE TO THE RIGHT, HAVING A CHORD BEARING AND DISTANCE OF NORTH 39°50'40" WEST, 65.03 FEET TO THE POINT OF BEGINNING;**

**(AS ILLUSTRATED IN SKETCH EXHIBIT "B")**

**CONTAINING 8,143 SQUARE FEET**

**AND**

**TEMPORARY CONSTRUCTION EASEMENT DESCRIBED AS FOLLOWS:**

**ALL THAT PART OF A TRACT OF LAND RECORDED IN BOOK 2108 PAGE 0406, GREENE COUNTY, MISSOURI RECORDERS OFFICE; LOCATED IN THE SOUTHWEST QUARTER OF THE SOUTHWEST QUARTER OF SECTION, TOWNSHIP 29 NORTH, RANGE 22 WEST, AND PART OF A TRACT OF LAND LYING IN SECTION 30, TOWNSHIP 29 NORTH, RANGE 22 WEST, LYING BETWEEN THE NORTH LINE OF SAID SECTION 30 AND THE NORTH RIGHT OF WAY LINE OF FARM ROAD 140, ALL IN GREENE COUNTY, MISSOURI, BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:**

**COMMENCING AT THE SOUTHWEST CORNER OF SAID SECTION 19;**

**THENCE NORTH 02°21'54" EAST, ALONG THE WEST LINE OF SAID SECTION 19, A DISTANCE OF 632.73 FEET;**

**THENCE SOUTH 87°38'06" EAST, LEAVING SAID WEST LINE, A DISTANCE OF 15.62 FEET TO THE POINT OF BEGINNING;**

**THENCE SOUTH 36°18'37" EAST, A DISTANCE OF 35.96 FEET;**

**THENCE SOUTH 02°23'44" WEST, A DISTANCE OF 184.46 FEET;**

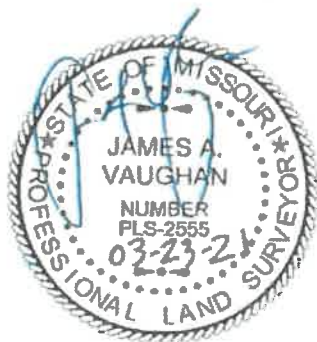
**THENCE SOUTH 84°34'29" EAST, A DISTANCE OF 37.21 FEET;**

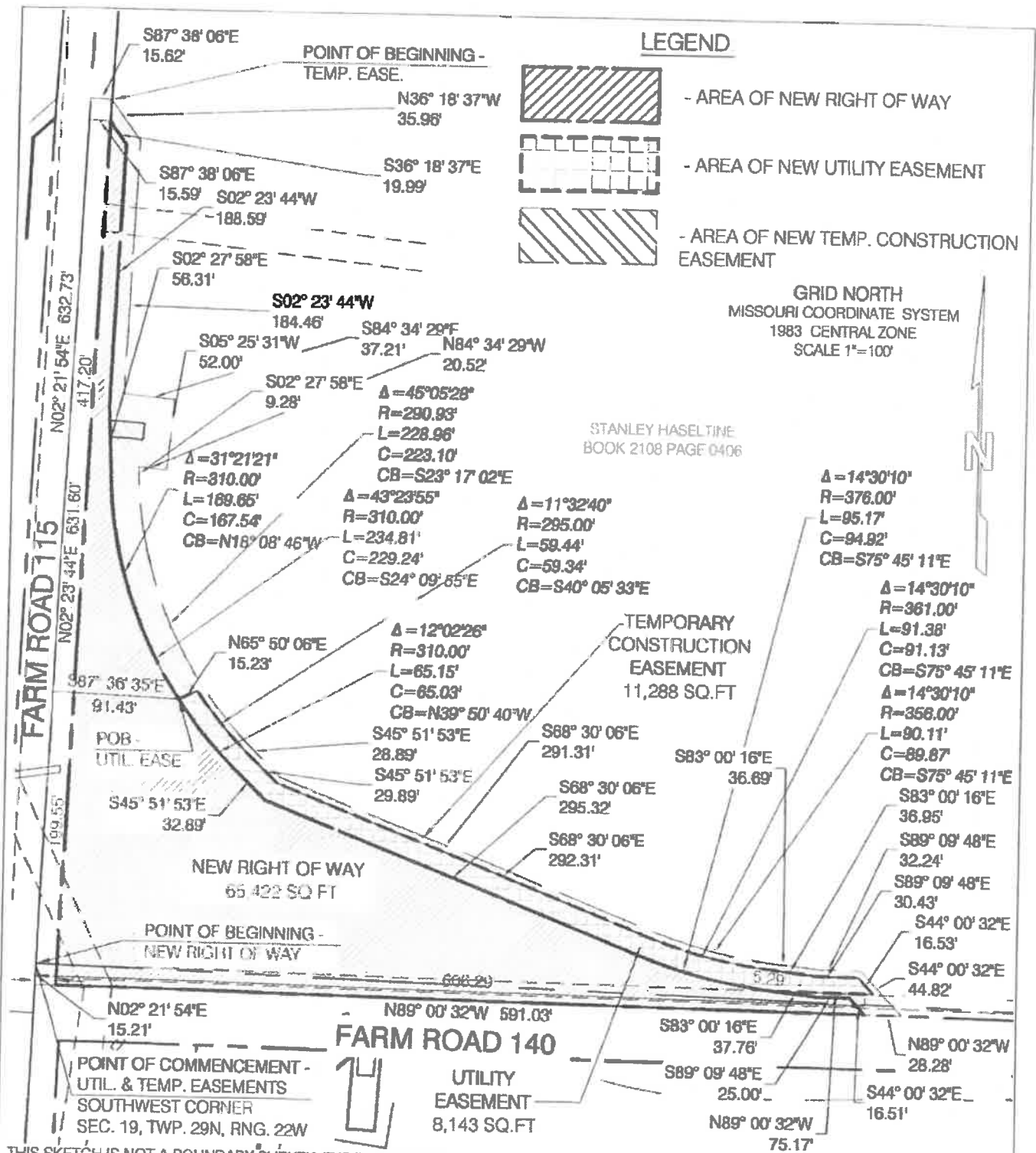
**THENCE SOUTH 05°25'31" WEST, A DISTANCE OF 52.00 FEET;**

**THENCE NORTH 84°34'29" WEST, A DISTANCE OF 20.52 FEET;**

**THENCE SOUTH 02°27'58" EAST, A DISTANCE OF 9.28 FEET;**

THENCE SOUTHEASTERLY 228.96 FEET ALONG A 290.93 FOOT RADIUS CURVE TO  
 THE LEFT, HAVING A CHORD BEARING AND DISTANCE OF SOUTH 23°17'02" EAST,  
 223.10 FEET;  
 THENCE SOUTH 45°51'53" EAST, A DISTANCE OF 28.89 FEET;  
 THENCE SOUTH 68°30'06" EAST, A DISTANCE OF 291.31 FEET;  
 THENCE SOUTHEASTERLY 90.11 FEET ALONG A 356.00 FOOT RADIUS CURVE TO  
 THE LEFT, HAVING A CHORD BEARING AND DISTANCE OF SOUTH 75°45'11" EAST,  
 89.87 FEET;  
 THENCE SOUTH 83°00'16" EAST, A DISTANCE OF 36.69 FEET;  
 THENCE SOUTH 89°09'48" EAST, A DISTANCE OF 32.24 FEET;  
 THENCE SOUTH 44°00'32" EAST, A DISTANCE OF 44.82 FEET;  
 THENCE NORTH 89°00'32" WEST, A DISTANCE OF 28.28 FEET;  
 THENCE NORTH 44°00'32" WEST, A DISTANCE OF 16.51 FEET;  
 THENCE NORTH 89°09'48" WEST, A DISTANCE OF 25.00 FEET;  
 THENCE NORTH 83°00'16" WEST, A DISTANCE OF 37.76 FEET;  
 THENCE SOUTH 89°00'32" EAST, A DISTANCE OF 75.17 FEET;  
 THENCE NORTH 44°00'32" WEST, A DISTANCE OF 16.53 FEET;  
 THENCE NORTH 89°09'48" WEST, A DISTANCE OF 30.43 FEET;  
 THENCE NORTH 83°00'16" WEST, A DISTANCE OF 36.95 FEET;  
 THENCE NORTHWESTERLY 91.38 FEET ALONG A 361.00 FOOT RADIUS CURVE TO  
 THE RIGHT, HAVING A CHORD BEARING AND DISTANCE OF NORTH 75°45'11" WEST,  
 91.13 FEET;  
 THENCE NORTH 68°30'06" WEST, A DISTANCE OF 292.31 FEET;  
 THENCE NORTH 45°51'53" WEST, A DISTANCE OF 29.89 FEET;  
 THENCE NORTHWESTERLY 59.44 FEET ALONG A 295.00 FOOT RADIUS CURVE TO  
 THE RIGHT, HAVING A CHORD BEARING AND DISTANCE OF NORTH 40°05'33" WEST,  
 59.34 FEET;  
 THENCE SOUTH 65°50'06" WEST, A DISTANCE OF 15.23 FEET;  
 THENCE NORTHWESTERLY 169.65 FEET ALONG A 310.00 FOOT RADIUS CURVE TO  
 THE RIGHT, HAVING A CHORD BEARING AND DISTANCE OF NORTH 18°08'46" WEST,  
 167.54 FEET;  
 THENCE NORTH 02°27'58" WEST, A DISTANCE OF 56.31 FEET;  
 THENCE NORTH 02°23'44" EAST, A DISTANCE OF 188.59 FEET;  
 THENCE NORTH 36°18'37" WEST, A DISTANCE OF 19.99 FEET;  
 THENCE NORTH 02°26'54" EAST, A DISTANCE OF 15.97 FEET TO THE POINT OF  
 BEGINNING (AS ILLUSTRATED IN SKETCH EXHIBIT "B")  
 CONTAINING 11,288 SQUARE FEET  
 THESE DESCRIPTIONS WERE PREPARED BY CJW TRANSPORTATION  
 CONSULTANTS, LLC; CORPORATE LAND SURVEY NUMBER 2007008003.





THIS SKETCH IS NOT A BOUNDARY SURVEY IT IS INTENDED TO SHOW THE CONFIGURATION OF A NEW RIGHT-OF-WAY, TEMPORARY CONSTRUCTION EASEMENT IT DOES NOT MEET THE MISSOURI STANDARDS FOR PROPERTY BOUNDARY SURVEYS.

DATE 02/02/21 CJW PROJECT No. 20047

5051 S. National  
Suite 7A  
Springfield, MO 65810  
Tel: 417.889.3400  
Fax: 417.889.3402  
www.GoCJW.com

**SKETCH EXHIBIT "B"**  
**STANLEY HASELTINE**  
**NEW RIGHT OF WAY, UTILITY EASEMENT,**  
**TEMPORARY CONSTRUCTION EASEMENT**  
PART OF THE SW1/4 SW1/4 S1, T28N, R22W &  
SPRINGFIELD, GREENE COUNTY, MISSOURI

Prepared by:  
**CJW**  
CJW Transportation  
Consultants, L.L.C.  
MO C.A. #2007008003

# Missouri Department of Public Safety

## Application

124236 - FY 2021 SHSP Region D

125292 - Region D Mobile Command Vehicle Sustainment and Radio Replacement

State Homeland Security Program (SHSP)

Status: Editing

Submitted Date:

---

## Primary Contact

Name:*	Deputy	Randy	Foster
	Title	First Name	Last Name
Job Title:	Deputy Sheriff		
Email:	rfoster@greenecountymo.gov		
Mailing Address:	1010 N. Boonville		
Street Address 1:			
Street Address 2:			
*	Springfield	Missouri	65802
	City	State/Province	Postal Code/Zip
Phone:*	816-550-6023		
		Ext.	
Fax:	417-868-4040		

---

## Organization Information

Applicant Agency:	Greene County, Sheriff's Office
Organization Type:	Government
Federal Tax ID#:	446000506
DUNS #:	095831228

Fax:

**Applicant Project Director**

**Applicant Project Director:**\*

**Job Title:**

**Agency:**

**Mailing Address:**

**Street Address 1:**

**Street Address 2:**

\*

**Email:**

**Phone:**\*

**Fax**

**Fiscal Officer**

**Fiscal Officer:**\*

**Job Title:**

**Agency:**

**Mailing Address:**

**Street Address 1:**

**Street Address 2:**

\*

**Email:**

**Phone:**\*

**Fax**

**Project Contact Person**

**Project Contact Person:**

**Job Title:**

**Agency:**

**Mailing Address:**

**Sheriff**

Title (Mr.Ms.etc)

**Jim**

First Name

**Arnott**

Last Name

**Sheriff**

**Greene County Sheriff's Office**

**1010 N Boonville**

**Springfield**

City

**Missouri**

State

**65802**

Zip Code

**jarnott@greencountymo.gov**

**417-868-4040**

Office

Ext.

Cell

**Mr**

Title (Mr.Ms.etc)

**Jeff**

First Name

**Bassham**

Last Name

**Finance Coordinator**

**Greene County Sheriff's Office**

**1010 N Boonville**

**Springfield**

City

**Missouri**

State

**65802**

Zip Code

**jbassham@greencountymo.gov**

**417-829-6008**

Office

Ext.

Cell

**Mr**

Title (Mr.Ms.etc)

**Randy**

First Name

**Foster**

Last Name

**Deputy**

**Greene County Sheriff's Office**

**1010 N Boonville**

**A.9.b Provide a summary of specific project actions/items that will be purchased with grant funds:**

This project will provide funding to pay for monthly data and satellite subscription services for the Mobile Command Vehicle. It will provide funding to replace an on board battery charger for the vehicle's batteries and will replace a mobile radio.

**A.9.c Provide estimated duration of the project (how long will it take to complete this project):**

It will take 2-3 months to complete the project, depending on lead time from the manufacturer/vendors to obtain replacement parts. Subscription services will be paid monthly through the duration of the grant.

**A.9.d What are the objectives this project is designed to accomplish? (the purpose of the project)**

This project will keep data and satellite subscription services active on the Mobile Command Vehicle. It will replace the on board vehicle battery charger. It will replace one mobile radio.

**A.9.e How does this project align with/increase terrorism preparedness for your agency/region/state?**

Operational Coordination: Within 12 hours, mobilize critical resources, establish NIMS compliant command and control, and essential coordination structures within the affected area; and maintain as needed throughout the duration of the incident.

**A.9.f Why is this project necessary for the region/state?**

This project is necessary to maintain the highest level of operational readiness for this resource should it be requested.

**A.10 Please discuss the future sustainment plan for the requested item(s) in the application.**

The future sustainment plan is to use funding from this project to provide the requested services through the grant term.

## **B. Project Capability, THIRA and Dual Use**

*Please review the State FY 2019 MO THIRA and FY 2020 MO SPR to determine the following:*

**B.1 Which Primary Core Capability best aligns to this project?**

Operational Communications

**B.2 How does this project impact the Capability Target listed on the State THIRA/SPR for the Core Capability chosen in B.1?**

This project impacts capability gaps in operable and interoperable communications capabilities as well as technology deficiency that hinders advanced response initiatives to human caused terrorist/criminal acts

C.6 FY 2019 Prior Accomplishments:

**Replacement of the on-board generator, one mobile radio, and maintained all subscription services.**

*250 Character Limit*

C.7 Was any portion of the proposed project funded with FY 2018 funds?:

**Yes**

C.8 FY 2018 Investment Justification:

**Building and Sustaining Interoperable Communication Capabilities**

*If funded with FY 2018 Federal Grant Award what was the last major accomplishment/milestone that was completed with FY 2018 funds?*

C.9 FY 2018 Prior Accomplishments:

**Replacement of the on-board portable radio cache, addition of scanners, a dual carrier modem, additional network infrastructure, and maintained all subscription services**

*250 Character Limit*

#### **D. Deployable/Sharable Resources**

*Deployable Resource: Identifies the availability and utility of an asset to multiple jurisdictions, regions, and the Nation; provides information on mobility of assets in an area. An asset that is physically mobile and can be used anywhere in the United States and territories via Emergency Management Assistance Compacts or other mutual aid/assistance agreements.*

*Shareable Resource: Provides information on the utility of a non-deployable shared asset in a region; identifies the asset's ability to augment and sustain a reinforced response within a region. An asset that can be utilized as a local, state, regional, or national capability, but is not physically deployable (i.e., fusion centers).*

D.1 Does this project fund resources that are:

**Deployable Resource**

*If answered Deployable in question D.1 complete questions D.2-D.8.*

*If answered Shareable in question D.1 complete questions D.2-D.4.*

*If answered NA in question D.1 skip to Section E.*

D.2 Item Name:

**Mobile Command Vehicle**

D.3 If sustaining deployable/sharable Homeland Security resource(s), describe how the project sustains each resource(s)?:

**The project will sustain the resource by maintaining subscription based services and replacing older equipment to maintain capabilities**

*250 Character Limit*

D.4 Special conditions/requirements on sharing the deployable/shareable resource(s):

**Must contact owning jurisdiction to request resource. Owning agency personnel must remain with vehicle at all times. Refueling plan in place for deployment longer than 12 hours.**

*Example: Specific requirements of equipment, operator, etc.*

*250 Character Limit*

*FEMA Resource Typing Library Tool is located at <https://rttk.preptoolkit.org/Public>.*

D.5 Is deployable resource NIMS Kind & Typed?:

**Yes**

G.2 Has the jurisdiction ensured training for the incident personnel incorporates NIMS training that is pertinent to each individuals incident responsibilities in alignment with the NIMS training program?:	Yes
G.3 Does the jurisdiction develop, maintain, and implement mutual aid agreements (to include agreements with the private sector and nongovernmental organizations)?:	Yes
G.4 Does the jurisdiction apply ICS as the standard approach to the on-scene command, control, and coordination of incidents?:	Yes
G.5 Does the jurisdiction enable effective and secure communications within and across jurisdictions and organizations?:	Yes
G.6 Does the jurisdiction identify and inventory deployable incident resources consistently with national NIMS resource typing definitions and job titles/position qualifications, available through the Resource Typing Library Tool?:	No
G.7 Has your agency designated a point of contact to serve as the principal coordinator for the implementation of NIMS?	Yes
G.8 Has your agency adopted NIMS terminology for the qualification, certification, and credentialing of incident personnel?	Yes
G.9 Does your agency use the NIMS Resource Management Process during incidents? (identify requirements, order and acquire, mobilize, track and report, demobilize, reimburse and restock)	Yes
G.10 Does your agency implement JIS for the dissemination of incident information to the public, incident personnel, traditional and social media, and other stakeholders?	Yes
G.11 Does your agency use MAC Groups/Policy Groups during incidents to enable decision making among elected and appointed officials and support resource prioritization and allocation?	Yes
G.12 Does your agency organize and manage EOC's and EOC teams consistent with pertinent NIMS guidance?	Yes
G.13 Does your agency apply plain language and clear text communications standards?	Yes
G.14 Does your agency develop, maintain, and implement procedures for data collection, analysis, and dissemination to meet organizational needs for situational awareness?	Yes

*If answered No to any questions G.1-G.14, please explain planned activities during grant period to strive towards being NIMS compliant.*

G.15 Planned Activities:

**G6 - Due to changes in the Tier 1 NIMS National Resource Typing Definitions we have not completed retyping all jurisdictional resources.**

H. Certified Assurances

---

## Personnel Benefits

Name:	Benefits % of Salary	Requested Benefit Cost:	Discipline:	Function:	Allowable Activity:
		\$0.00			

---

## Narrative Justification - Benefits

---

### Travel

Item Name:	Category:	Explanation of Other Travel:	Total Cost:	Discipline:	Function:	Allowable Activity:
			\$0.00			

---

## Narrative Justification - Travel

Travel Justification

---

### Equipment

Line Item Name:	AEL #:	Qty:	Unit Cost:	Total Cost:	Sustainment:	Discipline:	Function:	Allowable Activity:
Mobile Radio	06CP-01-MOBL	1.0	\$6,164.70	\$6,164.70	Yes	Law Enforcement	Equipment	Interoperable Communications Equipment
				\$6,164.70				

---

## Narrative Justification - Equipment

**Mobile Radio -** This item will replace the oldest radio on board, that is at the end of its useful life. This radio is in the driver's position. It is used every time the vehicle is deployed by the driver to coordinate vehicle positioning and placement at a scene. It is also capable of being tied into the patch device and used in conjunction with other radios on board. The cost basis for this radio is a vendor quote.

---

### Supplies/Operations

Attachment	Description	File Name	File Size	Type
Audit/Financial Statement (REQUIRED)*	Audit report	2019_Greene_County_Audit_Report.pdf	111.5 MB	pdf
Federal Fund Schedule (REQUIRED if not included in Audit)			111.5 MB	
Quote or other costs basis	Radio quote	QUOTE-1429192-1 MSU.pdf	111.5 MB	pdf
Training Request Form			111.5 MB	
Other Supporting Information	Audit notes	Audit Notes fy21.pdf	111.5 MB	pdf
Other Supporting Information	Audit requirement information	2019 Audit Requirements 09.19.20.pdf	111.5 MB	pdf
Other Supporting Information			111.5 MB	
Other Supporting Information			111.5 MB	
Other Supporting Information			111.5 MB	

**MOTOROLA SOLUTIONS****DRAFT**

QUOTE-1429192

Billing Address:  
 MISSOURI STATE UNIVERSITY  
 901 S NATIONAL  
 SPRINGFIELD, MO 65898  
 US

Quote Date:03/03/2021  
 Expiration Date:06/01/2021  
 Quote Created By:  
 Evan Allen  
 evan@radiophonewireless.com

End Customer:  
 MISSOURI STATE UNIVERSITY

End Customer Address:  
 GREENE COUNTY SHERIFF'S  
 OFFICE  
 1010 N BOONVILLE  
 SPRINGFIELD, MO 65802  
 US

Contract: 22897 - STATE OF MISSOURI  
 LOCALS

Line #	Item Number	Description	Qty	List Price	Sale Price	Ext. Sale Price
APX™ 8500						
1	M37TSS9PW1AN	APX8500 ALL BAND MP MOBILE	1	\$4,770.00	\$2,862.00	\$2,862.00
1a	QA01648AA	ADD: HW KEY SUPPLEMENTAL DATA*	1	\$5.00	\$3.00	\$3.00
1b	G851AG	ADD: AES/DES-XL/DES-OFB ENCRYPT APX AND ADP	1	\$799.00	\$479.40	\$479.40
1c	G832AD	ADD: SPKR 7.5W WTR RST APEX	1	\$60.50	\$36.30	\$36.30
1d	GA00250AA	ADD: WIFI/GNSS STUBBY ANTENNA LMR240	1	\$100.00	\$60.00	\$60.00
1e	G67DG	ADD: REMOTE MOUNT 07 MP	1	\$297.00	\$178.20	\$178.20
1f	GA01513AB	ADD: ALL BAND MOBILE ANTENNA (7/8/V/U)	1	\$95.00	\$57.00	\$57.00
1g	GA01515AA	ADD: J600 ADAPTER CABLE	1	\$95.00	\$57.00	\$57.00
1h	G51AT	ENH:SMARTZONE	1	\$1,500.00	\$900.00	\$900.00
1i	G78AT	ENH: 3 YEAR ESSENTIAL SVC	1	\$176.40	\$176.40	\$176.40



Any sales transaction following Motorola's quote is based on and subject to the terms and conditions of the valid and executed written contract between Customer and Motorola (the "Underlying Agreement") that authorizes Customer to purchase equipment and/or services or license software (collectively "Products"). If no Underlying Agreement exists between Motorola and Customer, then Motorola's Standard Terms of Use and Motorola's Standard Terms and Conditions of Sales and Supply shall govern the purchase of the Products.

## Purchase Order Checklist

Marked as PO/ Contract/ Notice to Proceed on Company Letterhead  
(PO will not be processed without this)

PO Number/ Contract Number

PO Date

Vendor = Motorola Solutions, Inc.

Payment (Billing) Terms/ State Contract Number

Bill-To Name on PO must be equal to the *Legal* Bill-To Name

Bill-To Address

Ship-To Address (If we are shipping to a MR location, it must be documented on PO)

Ultimate Address (If the Ship-To address is the MR location then the Ultimate Destination address must be documented on PO )

PO Amount must be equal to or greater than Order Total

Non-Editable Format (Word/ Excel templates cannot be accepted)

Bill To Contact Name & Phone # and EMAIL for customer accounts payable dept

Ship To Contact Name & Phone #

Tax Exemption Status

Signatures (As required)

## AUDIT REQUIREMENTS

---

An audit is required for the agency fiscal year, when STATE financial assistance, (which consists of funds received directly from the State of Missouri, but does not include federal pass-through funds), of \$250,000 or more is expended by the applicant agency.

☛ An audit is required for the agency fiscal year, when FEDERAL financial assistance, (which consists of funds received directly from the Federal Government or federal funds passed through state agencies), of \$750,000 or more is expended by the applicant agency.

☛ No audit of any type is required when STATE financial assistance of less than \$250,000 or FEDERAL financial assistance of less than \$750,000 is expended. However, the recipient must maintain detailed records on grant activity required for such grants.

☛ NOTE: The State Auditor of Missouri audits all state agencies, third class counties, and all judicial circuits. First, second, and fourth-class counties and other local political subdivisions and not-for-profit agencies must make arrangements with a private CPA firm to perform an audit.


---

This section must be completed **even if your agency is not required** to submit an audit to the Missouri Department of Public Safety.

1. Date of last audit: 7/21/20
2. Date(s) covered by last audit: 01/01/19 - 12/31/19
3. Last audit performed by: KPM CPAs, PC  
Phone number of auditor: 417/882-0904  
Lead Auditor: Rebecca Baker (rbaker@kpmcpa.com)
4. Date of next audit: Summer 2021
5. Date(s) to be covered by next audit: 01/01/20 - 12/31/20
6. Next audit will be performed by: KPM, CPAs, PC  
Phone number of auditor: 417/882-0904
7. Total amount of funds received from **ALL** entities **INCLUDING** the Department of Public Safety: Federal Amount: \$1,750,943 State Amount: \$68,230
8. Harvester Report ID for audit year: 848618
9. Were equitable sharing expenditures included in the SEFA: Yes

Agency: Greene County Missouri

Phone: 417/868-4120

Signed:   
*Effective 2016*

Date: 09/19/20

# Missouri Department of Public Safety

## Application

124236 - FY 2021 SHSP Region D

125292 - Region D Mobile Command Vehicle Sustainment and Radio Replacement

State Homeland Security Program (SHSP)

Status:

Editing

Submitted Date:

---

## Primary Contact

Name:\*

Deputy

Randy

Foster

Title

First Name

Last Name

Job Title:

Deputy Sheriff

Email:

rfoster@greencountymo.gov

Mailing Address:

1010 N. Boonville

Street Address 1:

Street Address 2:

\*

Springfield

Missouri

65802

City

State/Province

Postal Code/Zip

Phone:\*

816-550-6023

Ext.

Fax:

417-868-4040

---

## Organization Information

Applicant Agency:

Greene County, Sheriff's Office

Organization Type:

Government

Federal Tax ID#:

446000506

DUNS #:

095831228

Fax:

**Applicant Project Director**

**Applicant Project Director:**\*

**Job Title:**

**Agency:**

**Mailing Address:**

**Street Address 1:**

**Street Address 2:**

\*

**Email:**

**Phone:**\*

**Fax**

**Fiscal Officer**

**Fiscal Officer:**\*

**Job Title:**

**Agency:**

**Mailing Address:**

**Street Address 1:**

**Street Address 2:**

\*

**Email:**

**Phone:**\*

**Fax**

**Project Contact Person**

**Project Contact Person:**

**Job Title:**

**Agency:**

**Mailing Address:**

**Sheriff**

Title (Mr.Ms.etc)

**Jim**

First Name

**Arnott**

Last Name

**Sheriff**

**Greene County Sheriff's Office**

**1010 N Boonville**

**Springfield**

City

**Missouri**

State

**65802**

Zip Code

**jarnott@greencountymo.gov**

**417-868-4040**

Office

Ext.

Cell

**Mr**

Title (Mr.Ms.etc)

**Jeff**

First Name

**Bassham**

Last Name

**Finance Coordinator**

**Greene County Sheriff's Office**

**1010 N Boonville**

**Springfield**

City

**Missouri**

State

**65802**

Zip Code

**jbassham@greencountymo.gov**

**417-829-6008**

Office

Ext.

Cell

**Mr**

Title (Mr.Ms.etc)

**Randy**

First Name

**Foster**

Last Name

**Deputy**

**Greene County Sheriff's Office**

**1010 N Boonville**

**A.9.b Provide a summary of specific project actions/items that will be purchased with grant funds:**

This project will provide funding to pay for monthly data and satellite subscription services for the Mobile Command Vehicle. It will provide funding to replace an on board battery charger for the vehicle's batteries and will replace a mobile radio.

**A.9.c Provide estimated duration of the project (how long will it take to complete this project):**

It will take 2-3 months to complete the project, depending on lead time from the manufacturer/vendors to obtain replacement parts. Subscription services will be paid monthly through the duration of the grant.

**A.9.d What are the objectives this project is designed to accomplish? (the purpose of the project)**

This project will keep data and satellite subscription services active on the Mobile Command Vehicle. It will replace the on board vehicle battery charger. It will replace one mobile radio.

**A.9.e How does this project align with/increase terrorism preparedness for your agency/region/state?**

Operational Coordination: Within 12 hours, mobilize critical resources, establish NIMS compliant command and control, and essential coordination structures within the affected area; and maintain as needed throughout the duration of the incident.

**A.9.f Why is this project necessary for the region/state?**

This project is necessary to maintain the highest level of operational readiness for this resource should it be requested.

**A.10 Please discuss the future sustainment plan for the requested item(s) in the application.**

The future sustainment plan is to use funding from this project to provide the requested services through the grant term.

## **B. Project Capability, THIRA and Dual Use**

*Please review the State FY 2019 MO THIRA and FY 2020 MO SPR to determine the following:*

**B.1 Which Primary Core Capability best aligns to this project?**

Operational Communications

**B.2 How does this project impact the Capability Target listed on the State THIRA/SPR for the Core Capability chosen in B.1?**

This project impacts capability gaps in operable and interoperable communications capabilities as well as technology deficiency that hinders advanced response initiatives to human caused terrorist/criminal acts

1000 Character Limit

---

C.6 FY 2019 Prior Accomplishments:

**Replacement of the on-board generator, one mobile radio, and maintained all subscription services.**

*250 Character Limit*

C.7 Was any portion of the proposed project funded with FY 2018 funds?:

**Yes**

C.8 FY 2018 Investment Justification:

**Building and Sustaining Interoperable Communication Capabilities**

*If funded with FY 2018 Federal Grant Award what was the last major accomplishment/milestone that was completed with FY 2018 funds?*

C.9 FY 2018 Prior Accomplishments:

**Replacement of the on-board portable radio cache, addition of scanners, a dual carrier modem, additional network infrastructure, and maintained all subscription services**

*250 Character Limit*

#### **D. Deployable/Sharable Resources**

*Deployable Resource: Identifies the availability and utility of an asset to multiple jurisdictions, regions, and the Nation; provides information on mobility of assets in an area. An asset that is physically mobile and can be used anywhere in the United States and territories via Emergency Management Assistance Compacts or other mutual aid/assistance agreements.*

*Shareable Resource: Provides information on the utility of a non-deployable shared asset in a region; identifies the asset's ability to augment and sustain a reinforced response within a region. An asset that can be utilized as a local, state, regional, or national capability, but is not physically deployable (i.e., fusion centers).*

D.1 Does this project fund resources that are:

**Deployable Resource**

*If answered Deployable in question D.1 complete questions D.2-D.8.*

*If answered Shareable in question D.1 complete questions D.2-D.4.*

*If answered NA in question D.1 skip to Section E.*

D.2 Item Name:

**Mobile Command Vehicle**

D.3 If sustaining deployable/sharable Homeland Security resource(s), describe how the project sustains each resource(s)?:

**The project will sustain the resource by maintaining subscription based services and replacing older equipment to maintain capabilities**

*250 Character Limit*

D.4 Special conditions/requirements on sharing the deployable/shareable resource(s):

**Must contact owning jurisdiction to request resource. Owning agency personnel must remain with vehicle at all times. Refueling plan in place for deployment longer than 12 hours.**

*Example: Specific requirements of equipment, operator, etc.*

*250 Character Limit*

*FEMA Resource Typing Library Tool is located at <https://rtlt.preptoolkit.org/Public>.*

D.5 Is deployable resource NIMS Kind & Typed?:

**Yes**

G.2 Has the jurisdiction ensured training for the incident personnel incorporates NIMS training that is pertinent to each individuals incident responsibilities in alignment with the NIMS training program?:	Yes
G.3 Does the jurisdiction develop, maintain, and implement mutual aid agreements (to include agreements with the private sector and nongovernmental organizations)?:	Yes
G.4 Does the jurisdiction apply ICS as the standard approach to the on-scene command, control, and coordination of incidents?:	Yes
G.5 Does the jurisdiction enable effective and secure communications within and across jurisdictions and organizations?:	Yes
G.6 Does the jurisdiction identify and inventory deployable incident resources consistently with national NIMS resource typing definitions and job titles/position qualifications, available through the Resource Typing Library Tool?:	No
G.7 Has your agency designated a point of contact to serve as the principal coordinator for the implementation of NIMS?	Yes
G.8 Has your agency adopted NIMS terminology for the qualification, certification, and credentialing of incident personnel?	Yes
G.9 Does your agency use the NIMS Resource Management Process during incidents? (identify requirements, order and acquire, mobilize, track and report, demobilize, reimburse and restock)	Yes
G.10 Does your agency implement JIS for the dissemination of incident information to the public, incident personnel, traditional and social media, and other stakeholders?	Yes
G.11 Does your agency use MAC Groups/Policy Groups during incidents to enable decision making among elected and appointed officials and support resource prioritization and allocation?	Yes
G.12 Does your agency organize and manage EOC's and EOC teams consistent with pertinent NIMS guidance?	Yes
G.13 Does your agency apply plain language and clear text communications standards?	Yes
G.14 Does your agency develop, maintain, and implement procedures for data collection, analysis, and dissemination to meet organizational needs for situational awareness?	Yes

*If answered No to any questions G.1-G.14, please explain planned activities during grant period to strive towards being NIMS compliant.*

G.15 Planned Activities:

**G6 - Due to changes in the Tier 1 NIMS National Resource Typing Definitions we have not completed retyping all jurisdictional resources.**

H. Certified Assurances

---

## Personnel Benefits

Name:	Benefits % of Salary	Requested Benefit Cost:	Discipline:	Function:	Allowable Activity:
		\$0.00			

---

## Narrative Justification - Benefits

---

## Travel

Item Name:	Category:	Explanation of Other Travel:	Total Cost:	Discipline:	Function:	Allowable Activity:
			\$0.00			

---

## Narrative Justification - Travel

Travel Justification

---

## Equipment

Line Item Name:	AEL #:	Qty:	Unit Cost:	Total Cost:	Sustainment:	Discipline:	Function:	Allowable Activity:
Mobile Radio	06CP-01-MOBL	1.0	\$6,164.70	\$6,164.70	Yes	Law Enforcement	Equipment	Interoperable Communications Equipment
				\$6,164.70				

---

## Narrative Justification - Equipment

**Mobile Radio** - This item will replace the oldest radio on board, that is at the end of its useful life. This radio is in the driver's position. It is used every time the vehicle is deployed by the driver to coordinate vehicle positioning and placement at a scene. It is also capable of being tied into the patch device and used in conjunction with other radios on board. The cost basis for this radio is a vendor quote.

---

## Supplies/Operations

Attachment	Description	File Name	File Size	Type
Audit/Financial Statement (REQUIRED)*	Audit report	2019_Greene_County_Audit_Report.pdf	111.5 MB	pdf
Federal Fund Schedule (REQUIRED if not included in Audit)			111.5 MB	
Quote or other costs basis	Radio quote	QUOTE-1429192-1 MSU.pdf	111.5 MB	pdf
Training Request Form			111.5 MB	
Other Supporting Information	Audit notes	Audit Notes fy21.pdf	111.5 MB	pdf
Other Supporting Information	Audit requirement information	2019 Audit Requirements 09.19.20.pdf	111.5 MB	pdf
Other Supporting Information			111.5 MB	
Other Supporting Information			111.5 MB	
Other Supporting Information			111.5 MB	



Billing Address:  
MISSOURI STATE UNIVERSITY  
901 S NATIONAL  
SPRINGFIELD, MO 65898  
US

Quote Date:03/03/2021  
Expiration Date:06/01/2021  
Quote Created By:  
Evan Allen  
evan@radiophonewireless.com

End Customer:  
MISSOURI STATE UNIVERSITY

End Customer Address:  
GREENE COUNTY SHERIFF'S  
OFFICE  
1010 N BOONVILLE  
SPRINGFIELD, MO 65802  
US

Contract: 22897 - STATE OF MISSOURI -  
LOCALS

Line #	Item Number	Description	Qty	List Price	Sale Price	Ext. Sale Price
APX™ 8500						
1	M37TSS9PW1AN	APX8500 ALL BAND MP MOBILE	1	\$4,770.00	\$2,862.00	\$2,862.00
1a	QA01648AA	ADD: HW KEY SUPPLEMENTAL DATA*	1	\$5.00	\$3.00	\$3.00
1b	G851AG	ADD: AES/DES-XL/DES-OFB ENCRYPT APX AND ADP	1	\$799.00	\$479.40	\$479.40
1c	G832AD	ADD: SPKR 7.5W WTR RST APEX	1	\$60.50	\$36.30	\$36.30
1d	GA00250AA	ADD: WIFI/GNSS STUBBY ANTENNA LMR240	1	\$100.00	\$60.00	\$60.00
1e	G67DG	ADD: REMOTE MOUNT 07 MP	1	\$297.00	\$178.20	\$178.20
1f	GA01513AB	ADD: ALL BAND MOBILE ANTENNA (7/8/V/U)	1	\$95.00	\$57.00	\$57.00
1g	GA01515AA	ADD: J600 ADAPTER CABLE	1	\$95.00	\$57.00	\$57.00
1h	G51AT	ENH:SMARTZONE	1	\$1,500.00	\$900.00	\$900.00
1i	G78AT	ENH: 3 YEAR ESSENTIAL SVC	1	\$176.40	\$176.40	\$176.40



Any sales transaction following Motorola's quote is based on and subject to the terms and conditions of the valid and executed written contract between Customer and Motorola (the "Underlying Agreement") that authorizes Customer to purchase equipment and/or services or license software (collectively "Products"). If no Underlying Agreement exists between Motorola and Customer, then Motorola's Standard Terms of Use and Motorola's Standard Terms and Conditions of Sales and Supply shall govern the purchase of the Products.



## Purchase Order Checklist

Marked as PO/ Contract/ Notice to Proceed on Company Letterhead  
(PO will not be processed without this)

PO Number/ Contract Number

PO Date

Vendor = Motorola Solutions, Inc.

Payment (Billing) Terms/ State Contract Number

Bill-To Name on PO must be equal to the *Legal* Bill-To Name

Bill-To Address

Ship-To Address (If we are shipping to a MR location, it must be documented on PO)

Ultimate Address (If the Ship-To address is the MR location then the Ultimate Destination address must be documented on PO )

PO Amount must be equal to or greater than Order Total

Non-Editable Format (Word/ Excel templates cannot be accepted)

Bill To Contact Name & Phone # and EMAIL for customer accounts payable dept

Ship To Contact Name & Phone #

Tax Exemption Status

Signatures (As required)

## AUDIT REQUIREMENTS

---

An audit is required for the agency fiscal year, when STATE financial assistance, (which consists of funds received directly from the State of Missouri, but does not include federal pass-through funds), of \$250,000 or more is expended by the applicant agency.

☞ An audit is required for the agency fiscal year, when FEDERAL financial assistance, (which consists of funds received directly from the Federal Government or federal funds passed through state agencies), of \$750,000 or more is expended by the applicant agency.

☞ No audit of any type is required when STATE financial assistance of less than \$250,000 or FEDERAL financial assistance of less than \$750,000 is expended. However, the recipient must maintain detailed records on grant activity required for such grants.

☞ NOTE: The State Auditor of Missouri audits all state agencies, third class counties, and all judicial circuits. First, second, and fourth-class counties and other local political subdivisions and not-for-profit agencies must make arrangements with a private CPA firm to perform an audit.

---

This section must be completed **even if your agency is not required** to submit an audit to the Missouri Department of Public Safety.

1. Date of last audit: 7/21/20
2. Date(s) covered by last audit: 01/01/19 - 12/31/19
3. Last audit performed by: KPM CPAs, PC  
Phone number of auditor: 417/882-0904  
Lead Auditor: Rebecca Baker (rbaker@kpmcpa.com)
4. Date of next audit: Summer 2021
5. Date(s) to be covered by next audit: 01/01/20 - 12/31/20
6. Next audit will be performed by: KPM, CPAs, PC  
Phone number of auditor: 417/882-0904
7. Total amount of funds received from **ALL** entities **INCLUDING** the Department of Public Safety: Federal Amount: \$1,750,943 State Amount: \$68,230
8. Harvester Report ID for audit year: 848618
9. Were equitable sharing expenditures included in the SEFA: Yes

Agency: Greene County Missouri

Phone: 417/868-4120

Signed: \_\_\_\_\_

Effective 2016

Date: 09/19/20

2x6

## COUNCIL OF LOCAL ELECTED OFFICIALS CONSORTIUM AGREEMENT

THIS AGREEMENT, made and entered into this 1st day of July 2020<sup>1</sup>, by and between the COUNTIES of: **Christian, Dallas, Greene, Polk, Stone, Taney, and Webster** in the State of Missouri (hereinafter, the Counties).

### WITNESSETH

WHEREAS, the Council Local Elected Officials of the aforementioned counties and/or cities did previously adopt resolutions authorizing the creation of a consortium, in order to administer the provisions of Public Law 105-220, the Workforce Investment Act (hereinafter "the Act"), and

WHEREAS, the Act was revised and reauthorized in July 2014 as Public Law 113-128, the Workforce Innovation and Opportunity Act (hereinafter "WIOA"), and

NOW, THEREFORE, in consideration of the above premises and the mutual covenants of the parties hereinafter set forth, each party acknowledges they do hereby agree to the following:

### AGREEMENT

**SECTION 1:** That the Counties (include Cities, if applicable) of: **Christian, Dallas, Greene, Polk, Stone, Taney, and Webster** do hereby constitute a consortium for the purposes of Section 107 (c)(1)(B) of Public Law 113-128, WIOA.

**SECTION 2:** The Council Local Elected Officials (Presiding Commissioners) of the local government entities in Section 1 shall constitute the Ozark Workforce Development Region Consortium of Council of Local Elected Officials (hereinafter, the Consortium).

**SECTION 3:** The Consortium shall adopt operational and procedural bylaws consistent with this Agreement, applicable federal and state laws, and rules or regulations promulgated pursuant thereto. Bylaws or amendments thereto may be adopted by the affirmative vote of a simple majority of the members of the Consortium.

**SECTION 4:** All actions of the Consortium shall adhere to the Bylaws adopted pursuant to Section 3 above.

**SECTION 5:** In accordance with the Bylaws, the Chair of the CLEO shall be the Presiding Commissioner of Greene County. A Vice-Chair shall be elected by the CLEO with a term consistent with the Bylaws.

**SECTION 6:** In accordance with WIOA, the CLEO shall appoint the members of the Ozark Region Workforce Development Board in compliance with DWD-OWD Issuance 10-201811-2020 Change 1 "Local Workforce Development Board Membership ~~Requirements and Orientation Requirements~~ and ~~Certification/Recertification Procedures under the Workforce Innovation and Opportunity Act.~~"

**Section 7: The CLEO shall attend an annual meeting with Ozark Region Workforce Development Board.**

**SECTION 78:** In accordance with WIOA, the Local Board with the agreement of the Consortium shall select the One-Stop (Job Center) operator.

**SECTION 89:** The Consortium, in partnership with the Local Workforce Development Board, shall approve all local plans in accordance with Section 107 of Public Law 113-128, WIOA.

**SECTION 109:** The Consortium shall perform all functions of Council Local Elected Officials specified in Public Law 113-128, WIOA.

**SECTION 101:** The Council Local Elected Officials and the Workforce Development Board, in agreement with the Governor, has designated the City of Springfield Department of Finance as the Fiscal Agent and the Department of Workforce Development as the administrator and operator of Workforce Innovation and Opportunity Act (WIOA) Adult, Dislocated Worker, Youth, and Career Services.

**SECTION 112:** In the event of misuse of grant funds that cannot be recovered, in whole or in part, from the sub-recipient or fiscal agent responsible for the misuse, the Council Elected Officials shall come together to determine how the funds shall be reimbursed utilizing the following:

- 11.1: **Determination of Disallowed Costs.** With respect to any cost associated with the Opportunity Act that has been determined by the State of Missouri Department of Higher Education and Workforce Development, Office of Workforce Development (OWD), City, State, or Federal auditors as not being allowed, the sub-recipient shall make a reasonable effort to re-coop/cover costs or exercise the right to object or appeal such determination. In the event the sub-recipient is unable to cover or re-coop the costs, the matter will be brought before the Consortium for resolution.
- 11.2: **Formula for Assessment.** In the event of a disallowed cost not covered by the sub-recipient, the Consortium shall agree to compensate the State based on each County's pro rata share of the benefits to the respective county as evidenced by the sub-recipient. In the event it is not possible to allocate the costs based on the benefit to the respective Counties, the cost shall be allocated based upon the percentage of each County's population of the total population of the Region. In the event the Consortium cannot agree upon a basis for the pro rata share of the benefits, then the disallowed costs shall be assessed between the parties who benefit based upon the population of the parties as set forth above.
- 11.3: **Arbitration.** In the event any Consortium member objects to the assessment of benefits as set forth above, they may request a third-party arbitrator determine the allocation of costs, which Determination shall be binding upon the entire Consortium to this agreement. The arbitrator shall be appointed by the Director of the City of Springfield Workforce Development Department, except in the event a party to the arbitration objects to such appointment, then the person objecting shall submit to the Director the names of three persons who are qualified to arbitrate the dispute. The Director shall pick one of the names submitted. The costs of arbitration shall be paid by the Consortium member requesting arbitration, except the arbitrator shall have the right to allocate the costs of the arbitration between the Consortium as the arbitrator so determines. The arbitration shall be conducted in accordance with applicable Rules of the American Arbitration Association, and any judgment upon the award rendered by the arbitrator may be entered in any court having jurisdiction thereof. The applicable rules of the American Arbitration Association shall apply to any arbitration under this paragraph, however, notwithstanding the foregoing, the parties agree that the American Arbitration

Association need not be utilized for the arbitration. The Consortium further agrees that they will faithfully observe this agreement and the rules and that they will abide by and will perform any award rendered by the arbitrator(s) and that a judgment of the court having jurisdiction may be entered upon the award.

**SECTION 123:** This Agreement shall be effective when approved by each member of the Consortium through their signature. The agreement shall be reviewed annually and revised as necessary. If no revisions, this Agreement shall expire on June 30, 2023, at which time a new Agreement shall be required.

**SECTION 134:** Any amendments to this Agreement may be adopted with the concurrence of each and every member of the Consortium. The Consortium may be dissolved and this Agreement may be rescinded only with the consent of the Governor.

**SECTION 145:** The original Agreement, with complete signatures, as well as any amendments thereto, shall be kept on file in the main office of the CLEO.

**SECTION 156:** Each of the undersigned Presiding Commissioners certify that prior to signing this agreement, each has received written authorization from his County Commission to sign this agreement on its behalf.

IN WITNESS WHEREOF, the party representing the government entity listed in Section 1, through his/her signatures below, have read and understand this Agreement and hereto have caused this Agreement to be executed:

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Presiding Commissioner  
(Position Title)

\_\_\_\_\_  
Christian  
(County)

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Presiding Commissioner  
(Position Title)

\_\_\_\_\_  
Dallas  
(County)

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Presiding Commissioner  
(Position Title)

\_\_\_\_\_  
Greene  
(County)

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Presiding Commissioner  
(Position Title)

\_\_\_\_\_  
Polk  
(County)

|

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
Presiding Commissioner  
(Position Title)

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
Presiding Commissioner  
(Position Title)

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
Presiding Commissioner  
(Position Title)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Stone  
(County)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Taney  
(County)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
Webster  
(County)

257

# BEHAVIORAL CRISIS CENTER

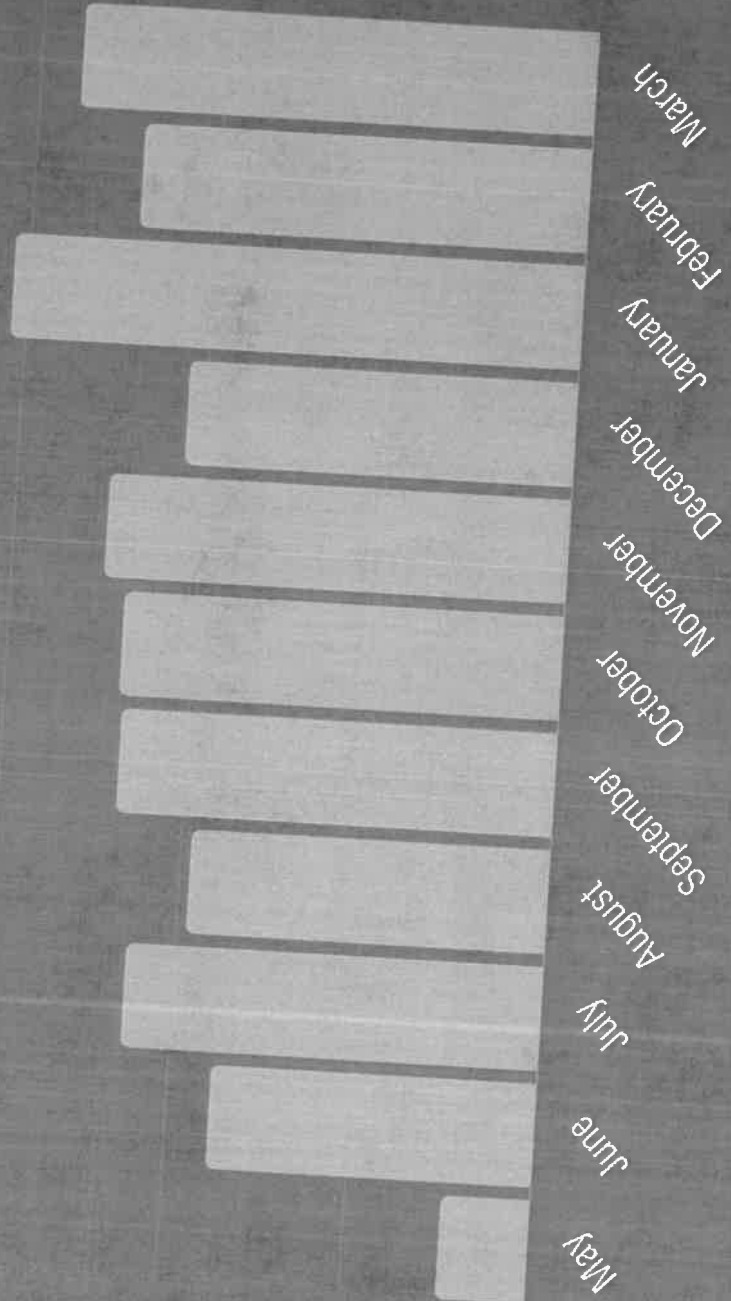
COUNTY COMMISSION REPORT



# CLIENT CONTACTS

1,026 Total

200  
150  
100  
50  
0

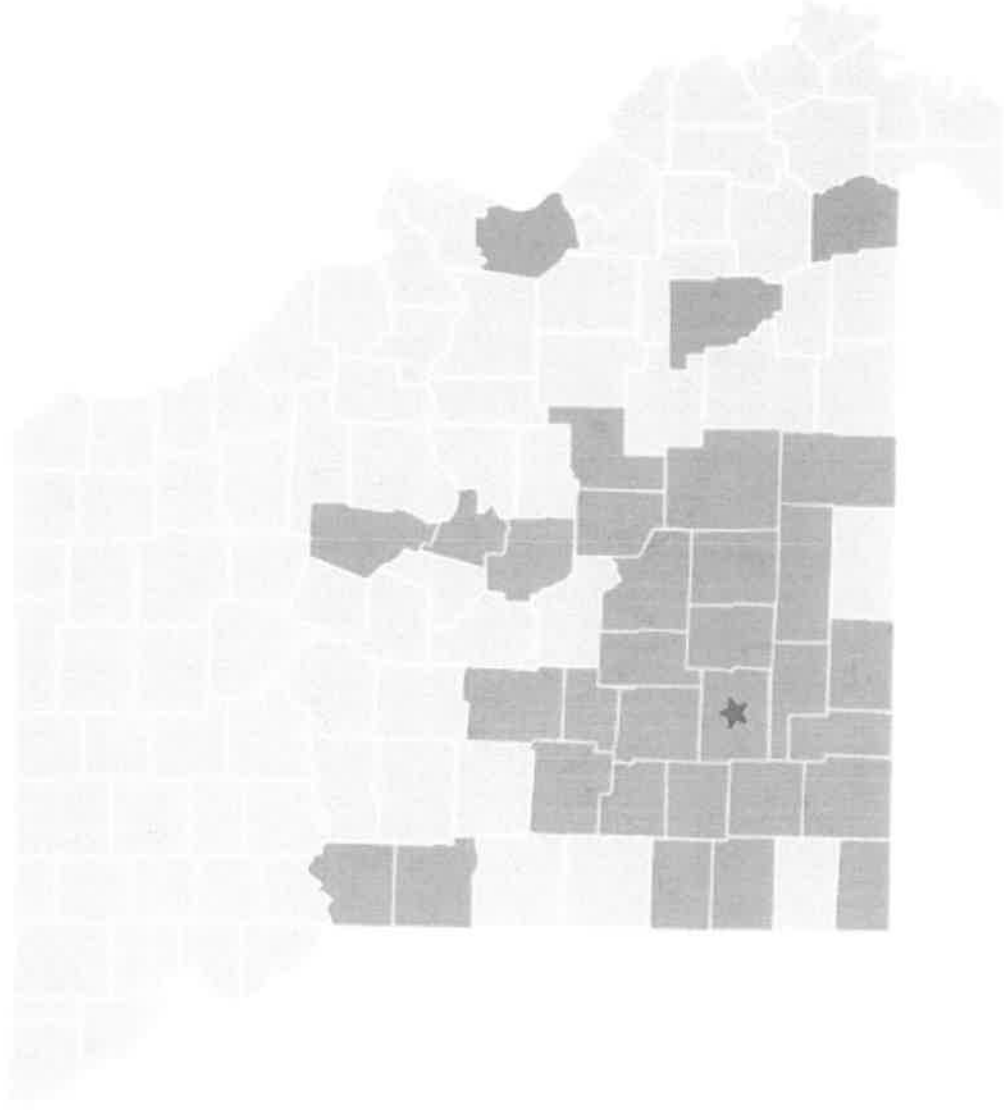


Data for June 1, 2020-March 31, 2021

# COUNTY OF RESIDENCE

- Greene (696)
- Christian (82)
- Taney (48)
- Webster (29)
- Polk (21)
- Stone (20)
- Lawrence (15)
- Dallas (12)
- Barry (11)
- Laclede (8)
- Wright (6)
- Other (60)
- Unknown/Refused (8)

Data for June 1, 2020-March 31, 2021



## Age

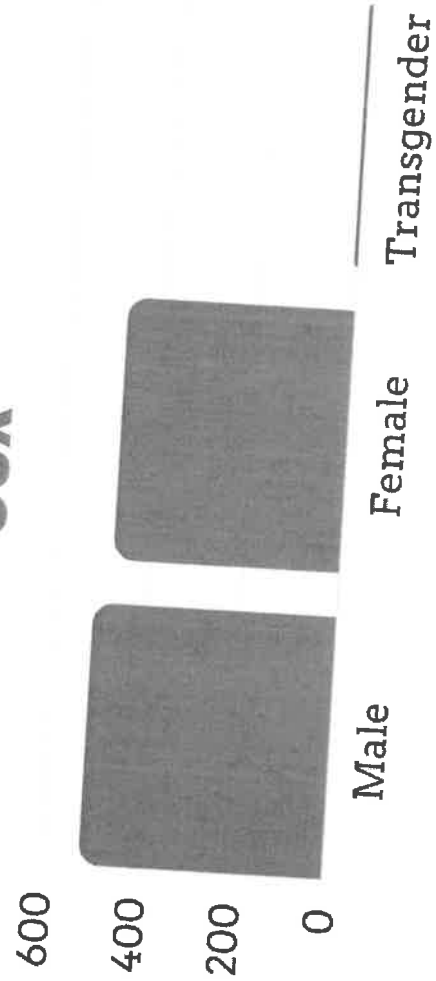
Range: 18-83

Mean: 35.06

# CLIENT DEMOGRAPHICS

Data for June 1, 2020 - March 31, 2021

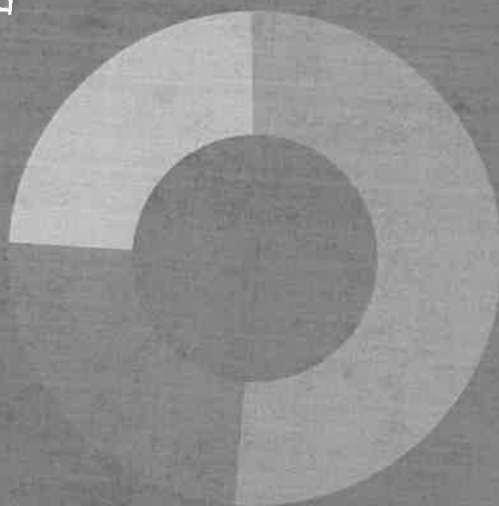
## Sex



# ADMISSION STATUS

Nonadmissions  
24.7%

Long-Term Stabilization  
23.7%



Acute Stabilization  
51.6%

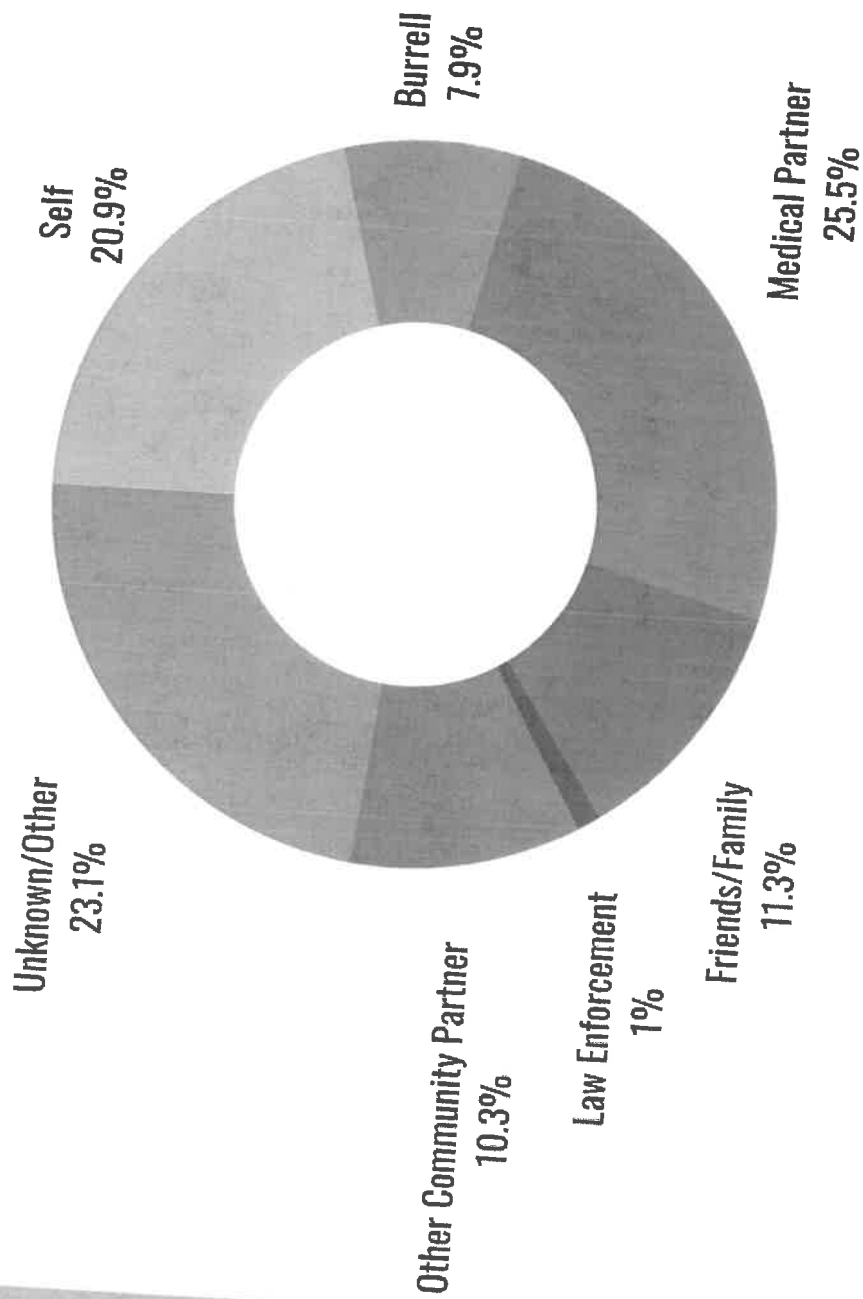
— 13 —

Of the  
nonadmissions,  
only 13 individuals  
were diverted to  
the ED due to  
safety risk or  
medical instability.

Data for June 1, 2020-March 31, 2021

# REFERRAL SOURCES

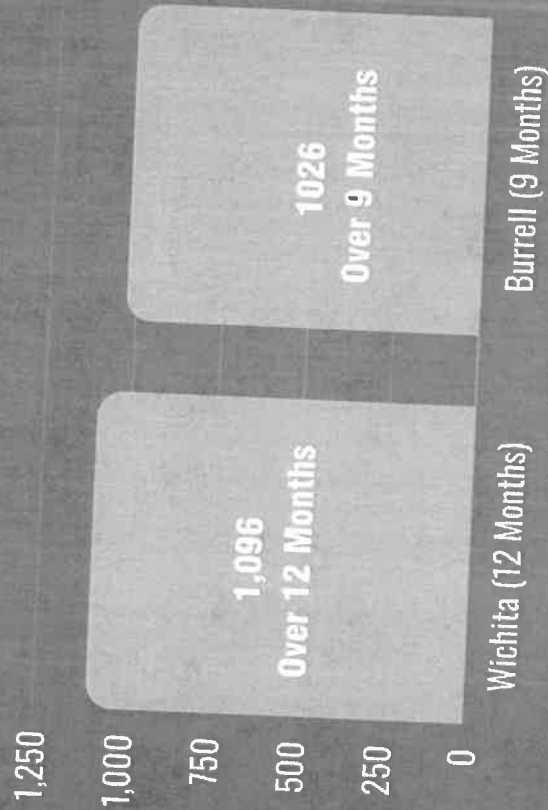
Data for June 1, 2020-March 31, 2021



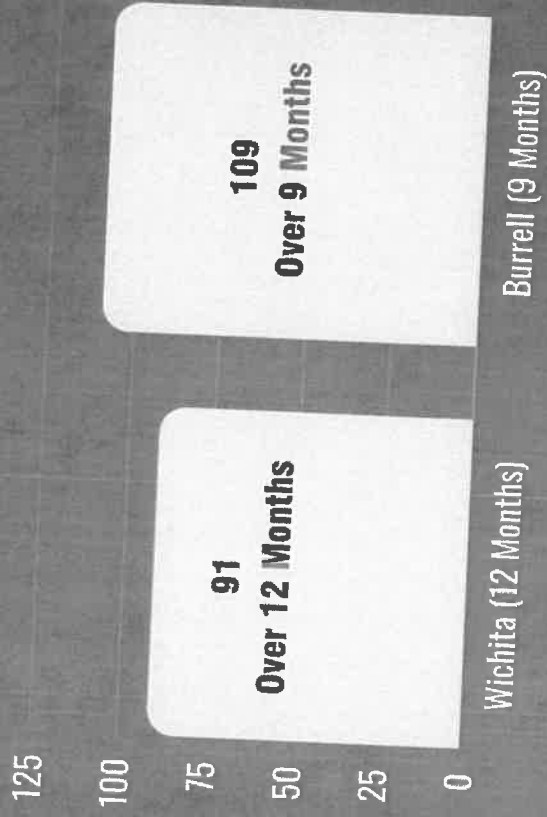
# Data Comparison

Burrell & Wichita Numbers

## Total Check-Ins



## Monthly Average Check-Ins



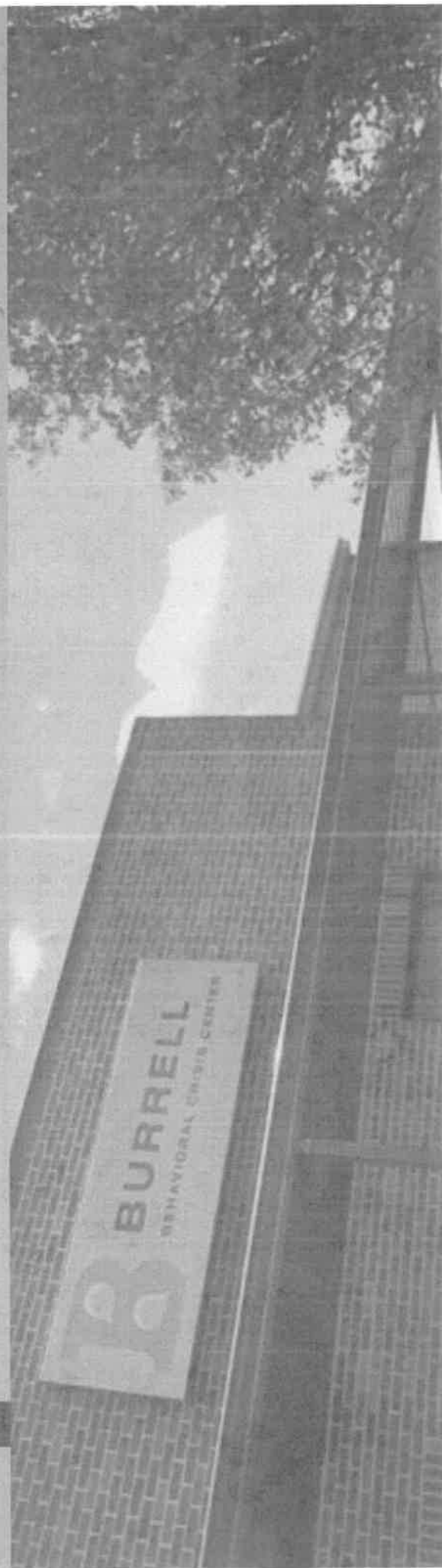
Data for June 1, 2020-March 31, 2021

# BURRELL'S INFLUENCE ON STATE CRISIS STABILIZATION UNITS

- Significant funding effort from Governor Parson
- Coalition identifying the Burrell BCC as the gold standard for 24/7 facilities and keeping us heavily involved in consultation

# GOALS

- Continue working with SPD workgroup on crisis response to ensure BCC is part of the emerging protocols
- Continue working with Missouri Coalition and state health partners to help develop Crisis Stabilization Units across the state



# QUESTIONS & DISCUSSION

**B** BURRELL<sup>®</sup>  
BEHAVIORAL HEALTH