

**AGENDA**  
**REVISED 2/28/23**  
**JEFFERSON COUNTY COMMISSION**  
**FIRST QUARTERLY SESSION - JANUARY-MARCH 2023**  
**THURSDAY, MARCH 2, 2023**  
**9:30 A.M.**  
County Commission Meeting Room  
located at the Old Charles Town Library  
200 E. Washington Street, Charles Town, WV

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**CALL TO ORDER**

**PRAYER**

**PLEDGE OF ALLEGIANCE**

**APPROVAL OF MINUTES**

- February 2, 2023 Regular Meeting
- February 16, 2023 Regular Meeting
- February 16, 2023 BORE

**APPROVAL OF ACCOUNTS PAYABLE**

- February 23, 2023
- March 2, 2023

**APPROVAL OF MANUAL CHECKS**

- February 24, 2023
- March 3, 2023

**APPROVAL OF REQUISITIONS**

- March 2, 2023

**APPROVAL OF PAYROLL**

- March 3, 2023

**ANNOUNCEMENTS**

Report if there are changes in the agenda if applicable

**PUBLIC COMMENT**

***\*\*You may participate in public comment during the virtual meeting by raising your hand. Please submit comments via email to [info@jeffersoncountywv.org](mailto:info@jeffersoncountywv.org). Your comments will be included in the minutes and agenda correspondence. Please include your name.***

**PRESENTATIONS**

1. 9:40 a.m. Angie Banks, Assessor  
- Request to Advertise Vacant Clerk Position
2. 9:45 a.m. Tina Renner, Circuit Clerk  
- Internal Budget Revision
3. 9:50 a.m. Tom Hansen, Sheriff  
- Animal Control Grant
4. 9:55 a.m. Crystal Gumble,  
- Request approval to refurbish old mail room for Recovery Closet
5. 10:10 a.m. Keith Lowry, Director, Jefferson County Community Ministries  
- Approval of Hire for the Social Services Liaison position
6. 10:20 a.m. Susanna Henderson, Economic Resilience Coordinator, Region 9  
- Request Letter of Support for the Corporation of Shepherdstown FY24 Congressional Directed Spending Request application for Shepherdstown Path Project
7. 10:25 a.m. Karen Olden, Probate Office  
- Removal of Executor for Two Estates
8. 10:40 a.m. Laura Kuhn, Director, Jefferson County Fleet and Facilities Management  
- Request approval to advertise and interview to fill vacant custodial position
9. 10:45 a.m. Jeffrey Polczynski, Director, Jefferson County Emergency Communications  
- Appointment Request – CAD Administrator  
- Appointment Request – Full Time Public Safety Dispatchers (Trainees)  
- “Signing Bonus/Training Incentive Program”
10. 10:55 a.m. Roger Goodwin, Chief County Engineer  
- Release of the \$10,000.00 site stability bond/Tolling of Bonding Agreement for Beallair Homes, LLC, for the Beallair Subdivision, Phase 2, Lots 50-133 & Residue A (File#05-41)  
- Request approval of employment offer to fill the position of Planning Clerk in the Department of Engineering, Planning, and Zoning
11. 11:05 a.m. Russell Burgess, Director, Jefferson County IT & GIS  
- CGI Video Project for Jefferson County, WV
12. 11:20 a.m. Mike Sine, Interim Director, Jefferson County Emergency Services Agency  
- Request for reimbursement to JCESA for the cost of supplies, equipment, and services for the EMS Transition during the month of January 2023 in the amount of \$30,306.41
13. 11:35 a.m. Ryan Snyder, Jefferson County Development Authority  
- Request approval to advertise for vacant Executive Director position
14. 11:40 a.m. Nathan Cochran, Assistant Prosecuting Attorney

- a. Report by counsel on opioid case and consideration of recent developments in the case.

**UNFINISHED BUSINESS**

- 15. Request funding for 2023 fireworks at Sam Michaels Park – continued from 2/16/2023
- 16. Memorandum of Understanding – Shepherd University Emergency Action Plan (SS)
- 17. County Ambulance dispatch in the CAD System (SS)

**NEW BUSINESS**

- 18. Letter to the WV Public Service Commission about West Virginia American Water’s Purchase of JUI and Rate Increase (JK)
- 19. Request to secure outside attorney/law firm to assist with human resources and personnel matters where the County attorney is conflicted out (TJ)
- 20. Letter of Support – Grant Funding Consideration for the Charles Town Utility Board Collection System Project (CA)

*\*\*\*Letters in parentheses following Unfinished/Old/ New Business items denote the initials of the commissioner making the agenda request\*\*\**

**COUNTY ADMINISTRATOR REPORTS**

**COUNTY COMMISSION REPORTS**

**21. ADJOURN**

**CORRESPONDENCE AND INFORMATION**

Notices of Intent to Appoint – Jefferson County Emergency Services, Jefferson County Planning Commission, Jefferson County Property Safety Ordinance Enforcement Agency

Jefferson County Prayer Policy

Public comments received by the following: David Tabb, Denise Nick, Marc Petitpierre

Year-to-Date Budget Report

*At all times the County Commission reserves the right to rearrange agenda times because of time constraints and to accommodate the Commission schedule or the public*



## **Pre-Minutes**

### **Jefferson County Commission**

**Thursday, February 02, 2023**

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A meeting of the Jefferson County Commission was held on Thursday, February 02, 2023 during the second quarterly session at 09:30am. The meeting was held via GoToWebinar and in-person. Present were Steve Stolipher, President, Clare Ath, Vice President, and Commissioners Tricia Jackson, Jennifer Krouse, and Jane Tabb. Also present were Cindy Rezmer, Interim County Administrator, Krista Davis, Finance Director, Jacki Shadle, County Clerk and Jessica James, Assistant Deputy County Administrator. The archived meeting of the Thursday, February 02, 2023 meeting is available on the Jefferson County Commission website.)

#### **PLEDGE OF ALLEGIANCE**

Commissioner Stolipher led the Pledge of Allegiance.

#### **APPROVAL OF MINUTES**

Motion by Mr. Stolipher to approve the January 19, 2023 regular Meeting Minutes as presented. Motion seconded and unanimously approved.

Motion by Mr. Stolipher to approve the January 26, 2023 Special Session Meeting Minutes as presented. Motion seconded and unanimously approved.

Motion by Mr. Stolipher to approve the January 26, 2023 BORE Meeting Minutes as presented. Motion seconded and unanimously approved.

#### **APPROVAL OF PAYROLL**

Motion by Mr. Stolipher to approve the Payroll for February 02, 2023 in the amount of **\$289,011.91**. Motion seconded and unanimously approved.

## APPROVAL OF REQUISITIONS

Motion by Mr. Stolipher to approve the Requisitions for February 02, 2023 in the amount of **\$298,792.91**. Motion seconded and unanimously approved.

## APPROVAL OF ACCOUNTS PAYABLE

CHECK#		VENDOR NAME		AMOUNT
87482		AMANDA MASTERS		\$ 126.26
87483		APRIL BLAKER		\$ 1,425.16
87484		CITY OF CHARLES TOWN		\$ 68.00
87485		EMILY MORROW		\$ 28.75
87486		GUTTMAN OIL CO		\$ 7,045.14
87487		HIRERIGHT		\$ 17.75
87488		MILLENIUM INSURANCE GROUP		\$ 900.00
87489		NICOLE NOBREGA		\$ 1,021.97
87490		NEOPOST USA INC.		\$ 442.62
87491		DR. ROBERT E. JONES III		\$ 1,000.00
87492		SEN COMMUNICATIONS LLC		\$ 109.90
87493		SOFTWARE SYSTEMS INC		\$ 145.00
87494		THOMAS HANSEN		\$ 61.00
87495		TINA RENNER		\$ 154.00
87496		XEROX CORPORATION		\$ 2,695.51
87497	GS/004	GENERAL CO FUND/004		\$ 7,465.10
<b>TOTAL</b>				<b>\$ 22,706.16</b>

- **Motion by Mr. Stolipher to approve the Accounts Payable for January 26, 2023 in the amount of \$22,706.16. Motion seconded and unanimously approved.**

CHECK#		VENDOR NAME		AMOUNT
87499		ADAM WARD		105.00
87500		AHA-ARTS & HUMANITIES ALLIANCE		1,059.14
87501		AMERICAN FAMILY LIFE INSURANCE COMPANY ICU		2,305.10
87502		ANGELA L BANKS		90.00
87503		AT&T MOBILITY - CC		180.00
87504		BUREAU OF CHILD SUPPORT		373.39
87505		COLONIAL LIFE		95.68
87506		COMPTROLLER OF MARYLAND		794.23

87507		DELTA DENTAL OF WV		5,823.16
87508		EFTPS IRS TAXES		98,784.87
87509		EMPOWER RETIREMENT		6,121.93
87510		ESRI		13,650.00
87511		FEDEX		72.18
87512		HIGHMARK WV		170,686.00
87513		JACQUELINE SHADLE		126.00
87514		JEFFERSON COUNTY HISTORIC LANDMARKS COMMISSION		1,568.32
87515		JEFFERSON CO CONVENTION AND VISITORS BUREAU		1,721.15
87516		JEFFERSON CO CONVENTION AND VISITORS BUREAU		26,478.46
87517		JEFF CO PARKS & RECREATION COMMISSION		23,851.00
87518		JEFFERSON SECURITY BANK		4,115.00
87519		JENNIFER KROUSE		191.67
87520		JOHN DEERE FINANCIAL		734.02
87521		LANGUAGE LINE SERVICES		132.75
87522		MAZZITTI & SULLIVAN EAP		936.00
87523		MONICA BENNETT		90.00
87524		NATIONAL VISION ADMIN.		1,616.02
87525		NATIONWIDE RETIREMENT SOLUTIONS		834.00
87526		OLD CHARLES TOWN LIBRARY		1,500.00
87527		SEN COMMUNICATIONS LLC		72.56
87528		SOFTWARE SYSTEMS INC		3,091.00
87529		STATE TAX DEPARTMENT		150.00
87530		THE HARTFORD		3,484.74
87531		THE HARTFORD		2,235.20
87532		TOWN OF BOLIVAR		1,721.15
87533		WV DEPUTY SHERIFF RETIREMENT SYSTEM		16,891.91
87534		WV EMERGENCY MEDICAL SERVICES RETIREMENT SYSTEM		280.76
87535		WV PUBLIC EMPLOYEE RETIREMENT SYSTEM		44,768.86
87536		WV PUBLIC EMPLOYEE RETIREMENT SYSTEM		166.49
87537		XEROX CORPORATION		777.62
87538		XEROX FINANCIAL SERVICES		249.81
87539	FG/009	SHERIFF OF JEFFERSON CO		\$ 4,840.20
87540	BS/011	SHERIFF OF JEFFERSON CO		\$ 8,099.12
87541	AM/053	SHERIFF OF JEFFERSON CO		\$ 1,630.81
TOTAL				452,495.30

- **Motion by Mr. Stolipher to approve the Accounts Payable for February 02, 2023 in the amount of \$452,495.30. Motion seconded and unanimously approved.**

**APPROVAL OF MANUAL CHECKS**

27-Jan-23

OTHER FUNDS				
Check#	Fund	VENDOR		Amount
1037	AV/056	MONROE		\$ 896.69
1803	CO/246	INSIGHT PUBLIC SECTOR INC		\$ 7,669.71
1804	CO/246	PAUL J RACO		\$ 962.50
955	CW/059	TOTAL ID SOLT.		\$ 587.00
<b>TOTAL</b>				<b>\$ 10,115.90</b>

- **Motion by Mr. Stolipher approve the Manual Checks for January 27, 2023, in the amount of \$10,115.90. Motion seconded and unanimously approved.**

3-Feb-23

OTHER FUNDS				
Check#	Fund	VENDOR		Amount
568	CS/2	EASTRIDGE HEALTH SYSTEM		\$ 2,200.00
569	CS/2	BENDA HINKLE		\$ 249.40
835	HD/8	SHERIFF OF JEFFERSON CO		\$ 1,464.99
150	AR/207	JEFF CO COMMUNITY MINISTRIES		\$ 20,000.00
151	AR/207	JEFF CO COMMUNITY MINISTRIES		\$ 20,000.00
152	AR/207	SHERIFF OF JEFFERSON CO		\$ 5,566.61
1038	AV/56	PRINT-O-STAT		\$ 520.84
398	WV369	WVDSRF		\$ 696.00
<b>TOTAL</b>				<b>\$ 50,697.84</b>

- **Motion by Mr. Stolipher approve the Manual Checks for February 03, 2023 in the amount of \$50,697.84. Motion seconded and unanimously approved.**

**PUBLIC COMMENT:** Marc Petitpierre, David Tabb, Joanne Curran, Stacy Tabb

## **PRESENTATIONS**

1. Tom Hansen-Sheriff- Requested approval for

a- Insurance Check Reimbursement

- **Motion by Mr. Stolipher to provide the automobile repair insurance check in the amount of \$7, 373.01 to the Sheriff's office to reimburse them sheriff auto supplies line item. Motion seconded and unanimously approved.**

b- Law Enforcement Administrative Assistant hire

- **Motion by Mr. Stolipher to approve the hire of Maryhelen Embrey as a full-time administrative assistant, 80-hour position, at a salary of \$33,000, effective the week of February 19, 2023. Motion seconded and unanimously approved.**

c- Emergency Funding for Conservatorship

- **Motion by Mr. Stolipher to enter into Executive Session to receive legal advice status and updates on item 1c. Motion seconded and unanimously approved.**
- **Motion by Mr. Stolipher to come out of Executive Session and reconvene in regular session. Motion seconded and unanimously approved**
- **Motion by Mr. Stolipher to approve the emergency funding for the requested Conservatorship not to exceed \$10,000. Motion seconded and unanimously approved.**

2. Tina Renner- Circuit Clerk- Requested approval to hire a Deputy Circuit Clerk

- **Motion by Mr. Stolipher to approve the hire of Savannah McDonald as a full-time Deputy Circuit Clerk, 80-hour position, at a salary of \$30,000, effective February 06, 2023. Motion seconded and unanimously approved.**

3. Angie Banks-Assessor- Requested

a. Approval of Exonerations

NAME	TYPE	DISTRICT	AMOUNT	TICKET NO.
Carla Hardy	RP	MW	\$238.32	21629

- **Motion by Mr. Stolipher to approve the Exoneration for ticket No. 21629 as presented by Ms. Banks. Motion seconded and unanimously approved.**

b. Approval of mutual agreement/exonerations re: Board of Assessment Appeals applicants, Careen Smith and David & Nadine Tabb.

*Please note that Commissioner Tabb recused herself from the discussion of item 3-2.*

- **Motion by Mr. Stolipher to approve the mutual agreements as presented by Ms. Banks. Motion seconded and unanimously approved.**

4. Keith Lowery- Jefferson County Community Ministries-Requested approval to advertise for Homeless Support Position.

- **Motion by Mr. Stolipher to approve the advertisement for the Homeless Support Position. Motion seconded and unanimously approved.**

5. Kelly Franklin- Jefferson Day Report Center- Requested approval of FY2024 West Virginia Community Corrections Grant.

- **Motion by Mr. Stolipher to approve and act on behalf the Jefferson County Commission to enter into a contractual agreement with the Division of Justice and Administrative Service to receive and administer grant funds pursuant to provision of the Community Corrections Program. Motion seconded and unanimously approved.**

6. Interviews and appointments

a. Jefferson County Parks and Recreation Commission

- **Motion by Mr. Stolipher to appoint Vicki Fields to the Jefferson County Parks and Recreation Commission for an unexpired term ending June 30, 2025. Motion seconded and unanimously approved.**

b- Jefferson County Board of Zoning Appeals

- **Motion by Mrs. Tabb to appoint Jacob Harris to the Jefferson County Board of Zoning Appeals for an unexpired position ending January 1, 2024. Motion seconded and unanimously approved.**

7. Roger Goodwin-Director and Chief County Engineer and Michelle Mason, Impact Fees Program Specialist- Requested

a- Presentation of Calendar Year 2022 Annual Report for the office of Impact Fees

- **Motion by Mr. Stolipher to approve the presentation of Calendar Year 2022 annual report for the office of Impact Fees. Motion seconded and unanimously approved.**
- **Motion by Mrs. Tabb to approve the annual inflationary adjust to the impact fees. Motion seconded and unanimously approved.**

b.-Approval of the FY2024 Capital Improvement Plan for the Office of Impact Fees.

- **Motion by Mrs. Tabb to approve the FY2024 Capital Improvement Plan for the Office of Impact fees as presented. Motion seconded and unanimously approved.**

8. Bob Burner/ Mike Sine, Director, Jefferson County Emergency Services Agency- Requested

- a. Monthly update on the progress of the EMS transition
- b. Funding request to upgrade/replace 5 ambulance cots including power-load installation of 3 units, 8 chair stairs, and purchase maintenance contracts for the same at a total cost of \$314,491.93
  - **Motion by Mr. Stolipher to approve the upgrade/replace 5 ambulance cots including power-load installation of 3 units, 8 chair stairs, and purchase maintenance contracts for the same at a total cost of \$314,491.93 from the ARPA Funds. Motion seconded and unanimously approved.**
- c. Funding request to purchase a two-year maintenance contract for t12 LUCAS CPR devices, 13 LifePak, 15 cardiac monitors, 5 ambulance cots, 6 power-load systems and 3 stair chairs at a total cost of \$116,718.48.
  - **Motion by Mr. Stolipher to approve a two-year maintenance contract for t12 LUCAS CPR devices, 13 LifePak, 15 cardiac monitors, 5 ambulance cots, 6 power-load systems and 3 stair chairs at a total cost of \$116,718.48 from the ARPA Funds. Motion seconded and unanimously approved.**
- d. Request reimbursement of labor expenses in the amount of \$5,777.36 for December 2022, associated with the EMS transition project.
  - **Motion by Mr. Stolipher to approve the reimbursement of labor expenses in the amount of \$5,777.36 for December 2022, associated with the EMS transition project from the ARPA Funds. Motion seconded and unanimously approved**
- e. Request reimbursement to JCESA for the cost of supplies, equipment and services for the EMS transition during the month of December 2022 in the amount of \$84,441.27.
  - **Motion by Mr. Stolipher to approve the reimbursement to JCESA for the cost of supplies, equipment and services for the EMS transition during the month of December 2022 in the amount of \$84,441.27. Motion seconded and unanimously approved**

9. Nathan Cochran- Assistant prosecuting attorney-

- a. Discussion of legal issues and potential action regarding proposed Solar Text Amendment to the Jefferson County Zoning and Land Development Ordinance, File #ZTA22-01, including bonding, comprehensive plan, and related matters. Discussion of public hearing on proposed text amendment, review and consideration of amendment text, adoption of amendment and/or modification of amendment text and/or Planning Commission review and associated fees. Discussion of Jefferson County Circuit Court Civil Action No.'s 2021-C- 33 through 37 and Jefferson County Circuit Court Civil Action No.'s 2021-C-46 through 50, Jefferson County Circuit Court Civil Action No. CC-19-2022-C-6, Jefferson County Circuit Court Civil Action No. 2022-C-81, Jefferson County Circuit Court Civil Action No. 2022-C-103 and 2022-C-141 and WV Supreme Court No.'s 21-0727, 21-0728, and 21- 0731.
- b. Report by counsel on opioid case and consideration of recent developments in the case (Jefferson County Commission v. Purdue Pharmaceutical, et al. US District Court, Northern District of West Virginia, Civil Action #1:17-OP-45170, MDL 17-md-02804-DAP In Re: National Prescription Opiate Litigation) and related matters.
- c. Review and discussion of Intergovernmental Agreement Between the Jefferson County Commission, the Jefferson County Sheriff's Department and the Corporation of Bolivar for Public Safety Services and Intergovernmental Agreement Between the Jefferson County Commission, the Jefferson County Sheriff's Department, and the Corporation of Bolivar for Tax Collection Services
- d. Review, discussion, and possible adoption of leases for Ambulance parking and personnel space between the JCESA and/or JCC and fire companies at various Fire Stations.

- **Motion by Mr. Stolipher to enter into Executive Session to receive legal advice and status updates on items b and c. Motion seconded and unanimously approved.**

- **Motion by Mr. Stolipher to come out of Executive Session and reconvene in regular session. Motion seconded and unanimously approved**

**b- Motion by Mr. Stolipher to sign a release as presented by counsel. Motion seconded and unanimously approved.**

**c- Motion by Mr. Stolipher to approve aas Intergovernmental Agreement between the Jefferson County Commission, the Jefferson County Sheriff's Department and the Corporation of Bolivar for**

**Public Safety Services and the Intergovernmental Agreement between the Jefferson County Commission, the Jefferson County Sheriff's Department, and the Corporation of Bolivar for Tax Collection Services as presented. Motion seconded and unanimously approved**

## **FINANCE DIRECTOR REPORTS**

Krista Davis- Finance Director- Requested-

a. Approval of 7.5% salary increase for Emergency Services employees to be effective March 1, 2023

- **Motion by Mr. Stolipher to approve the 7.5% salary increase for Emergency Services employees effective March 1, 2023. Motion seconded and unanimously approved.**

b. Approval of 5-year financial audit of the Jefferson County Emergency Services Agency.

**It was the consensus of the Commission to have Ms. Davis reach out to Mike Sine, Interim Director of the Jefferson County Emergency Services Agency, to share the ESA audit report documents.**

## **UNFINISHED BUSINESS**

10. Discussion and Review of potential adaptation of County Commission's proposed Prayer Policy.

- **Motion by Mrs. Krouse to amend the presented proposed prayer policy and present at next commission meeting. Motion tabled to next meeting.**

11. Review and approval of revisions to Policy 305(TJ)

**Provided unanimous consent, no motion necessary**

12. Funding source for Summer Intern to assist with Comprehensive Plan Update

- **Motion by Mrs. Tabb to approve the budget adjustment of \$14,000 from the Coal Severance fund. Motion seconded and unanimously approved.**

13. Revisit JCESA Transition to County Department (JK)

- **Motion by Mrs. Tabb to maintain the decision to transition the Jefferson County Emergency Services Agency into a County Department. Motion passed with 3-2 with Commission Jackson and Commissioner Krouse opposing.**

## COUNTY ADMINISTRATOR REPORTS

-Temporary Position appointments for Commission Staff.

- **Motion by Ms. Jackson to approve a \$3000 stipend for Assistant Deputy County Administrator Jessica James and Administrative Assistant Sorayda Pitts on next payroll and to revisit in two months pending the hiring of a County Administrator. Motion seconded and unanimously approved.**

15. Board of Review and Equalization- held at the Jefferson County Courthouse located at 100 E. Washington Street, Charles Town, WV, 25414 – see separate set of minutes.

16. Joint Meeting with the Jefferson County Planning Commission to discuss the Comprehensive Plan update and approve the proposed timeline, score of work, and strategy- to be held in the Jefferson County Commission meeting room in the Old Charles Town Library at 200 E. Washington Street, Charles Town, WV 25414

- **Motion by Mr. Stolipher to approve the amended timeframe and direct Planning Commission and staff to move forward with Comprehensive Plan update as planned. Motion seconded and unanimously approved.**

The Commission adjourned at 4:22 pm on a motion by Mr. Stolipher. Motion was seconded and unanimously approved.

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Steve Stolipher, PRESIDENT

Respectfully submitted  
Sorayda Pitts  
Administrative Assistant

## Minutes

### Jefferson County Commission

Thursday, February 16, 2023

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A meeting of the Jefferson County Commission was held on Thursday, February 16, 2023 during the second quarterly session at 6:00pm. The meeting was held via GoToWebinar and in-person. Present were Steve Stolipher, President, Clare Ath, Vice President, and Commissioners Tricia Jackson, Jennifer Krouse, and Jane Tabb. Also present were Cindy Rezmer, Interim County Administrator, Krista Davis, Finance Director, Jacki Shadle, County Clerk and Sorayda Pitts, Administrative Assistant. The archived meeting of the Thursday, February 16, 2023 meeting is available on the Jefferson County Commission website.

#### PLEDGE OF ALLEGIANCE

Commissioner Stolipher led the Pledge of Allegiance.

A moment of silence was held in honor of Lieutenant Kenny Mills.

#### APPROVAL OF MINUTES

Motion by Mr. Stolipher to approve the **January 31, 2023** BORE Meeting Minutes as presented. Motion seconded and unanimously approved.

Motion by Mr. Stolipher to approve the **February 02, 2023** regular Meeting Minutes as presented. Motion seconded and unanimously approved.

Motion by Mr. Stolipher to approve the **February 02, 2023** BORE Meeting Minutes as presented. Motion seconded and unanimously approved.

Motion by Mr. Stolipher to approve the **February 07, 2023** BORE Meeting Minutes as presented. Motion seconded and unanimously approved.

Motion by Mr. Stolipher to approve the **February 09, 2023** BORE Meeting Minutes as presented. Motion seconded and unanimously approved.

**APPROVAL OF PAYROLL**

Motion by Mr. Stolipher to approve the Payroll for January 20, 2023 in the amount of **\$290,220.42**. Motion seconded and unanimously approved.

**APPROVAL OF REQUISITIONS**

Motion by Mr. Stolipher to approve the Requisitions for February 02, 2023 in the amount of **\$40,427.17**. Motion seconded and unanimously approved.

**APPROVAL OF ACCOUNTS PAYABLE**

CHECK#		VENDOR NAME		AMOUNT
87542		84 LUMBER		\$ 167.70
87543		AT&T		\$ 335.91
87544		GUTTMAN OIL CO		\$ 4,206.09
87545		JOHN DEERE FINANCIAL		\$ 734.02
87546		KONE BROOKLYN		\$ 1,809.75
87547		POWERDMS INC		\$ 2,172.00
87548		R.E. MICHEL CO. LLC		\$ 1,515.84
87549		TRICIA JACKSON		\$ 105.00
<b>TOTAL</b>				<b>\$ 11,046.31</b>

- **Motion by Mr. Stolipher to approve the Accounts Payable for February 09, 2023 in the amount of \$11,046.31. Motion seconded and unanimously approved.**

CHECK#		VENDOR NAME		AMOUNT
87551		ADAM WARD		\$ 303.51
87552		AMANDA JOHNSON		\$ 577.72
87553		AMANDA MASTERS		\$ 133.76
87554		AMERIFLEX		\$ 125.80
87555		APRIL BLAKER		\$ 469.55
87556		BOLAND TRANE SERVICES INC		\$ 1,939.00
87557		BUREAU OF CHILD SUPPORT		\$ 373.39
87558		CAPITAL LIGHTING & SUPPLIES LLC		\$ 519.07
87559		DISTRICT COURT OF MARYLAND		\$ 5.50
87560		HILLSBOROUGH COUNTY CIRCUIT COURT		\$ 32.00

87561	COMPROLLER OF MARYLAND	\$ 776.65
87562	CORMAC QUINN	\$ 31.01
87563	DARYLL WIMER	\$ 12.70
87564	DAVID EVERETT BOOBER	\$ 479.50
87565	DAVID WAMPLER	\$ 26.23
87566	DOING BETTER BUSINES	\$ 825.84
87567	ED HANNON	\$ 8.66
87568	EFTPS IRS TAXES	\$ 91,689.27
87569	EMPOWER RETIREMENT	\$ 5,572.95
87570	FIDELITY POWER SYSTEMS	\$ 12,044.00
87571	FIFTH THIRD BANK	\$ 3,222.45
87572	GLOBALSTAR USA	\$ 2,440.52
87573	GUTTMAN OIL CO	\$ 8,291.96
87574	INSIGHT PUBLIC SECTOR INC	\$ 601.24
87575	JACQUELINE SHADLE	\$ 92.80
87576	JEFFERSON SECURITY BANK	\$ 4,115.00
87577	JCCOA JEFFERSON CENTER	\$ 100.00
87578	JUSTTECH LLC	\$ 140.62
87579	KEITH JOHNSON	\$ 28.91
87580	MR PRINT	\$ 4,129.38
87581	NAPA AUTO PARTS	\$ 672.26
87582	NATIONWIDE RETIREMENT SOLUTIONS	\$ 834.00
87583	POTOMAC EDISON	\$ 37,442.79
87584	POTOMAC EDISON	\$ 4,598.78
87585	R.E. MICHEL CO. LLC	\$ 85.52
87586	RELIANT POWER MANAGEMENT LLC	\$ 6,782.91
87587	RETIREE HEALTH BENEFIT TRUST	\$ 8,348.00
87588	ROMULO QUEZADA	\$ 14.80
87589	RONALD DANTZIC	\$ 59.36
87590	SELBY VETERINARY SERVICES	\$ 75.00
87591	SOFTWARE SYSTEMS INC	\$ 1,192.02
87592	STATE TAX DEPARTMENT	\$ 150.00
87593	TAMMY MOBLEY	\$ 6,074.84
87594	TEK ADVISORS LLC	\$ 4,200.00
87595	THOMAS HANSEN	\$ 121.07
87596	TINA RENNER	\$ 633.88
87597	US BANK	\$ 69,623.56
87598	WV DEPUTY SHERIFF RETIREMENT SYSTEM	\$ 16,383.68
87599	WV EMERGENCY MEDICAL SERVICES RETIREMENT SYSTEM	\$ 288.78
87600	WV PUBLIC EMPLOYEE RETIREMENT SYSTEM	\$ 43,113.51
87601	WV REGIONAL JAIL & CORRECTION FACILITY AUTH	\$ 56,452.50

87602		WV SHERIFFS ASSOCIATION		\$ 2,200.00
87603		WV STATE TAX DEPARTMENT		\$ 34,845.97
87604		WV ASSOCIATION OF COUNTIES		\$ 940.00
87605		XEROX CORPORATION		\$ 3,418.55
87606	GS/004	SHERIFF OF JEFFERSON CO		\$ 7,793.48
87607	FG/009	SHERIFF OF JEFFERSON CO		\$ 4,918.63
87608	BS/011	SHERIFF OF JEFFERSON CO		\$ 4,133.63
87609	AM/053	SHERIFF OF JEFFERSON CO		\$ 1,618.11
<b>TOTAL</b>				<b>\$ 456,124.62</b>

- **Motion by Mr. Stolipher to approve the Accounts Payable for February 16, 2023 in the amount of \$456,124.62. Motion seconded and unanimously approved.**

**APPROVAL OF MANUAL CHECKS**

10-Feb-23

OTHER FUNDS				
Check#	Fund	VENDOR		Amount
1805	CO/246	G & TRIPLET LLC		\$ 1,655.00

- **Motion by Mr. Stolipher to approve the Manual Checks for February 10, 2023, in the amount of \$1,655.00. Motion seconded and unanimously approved.**

17-Feb-23

OTHER FUNDS				
Check #	Fund	VENDOR		Amount
322	DK/O3	SHERIFF OF JEFFERSON CO		\$ 50.74
826	HD/8	ATTENTI		\$ 3,584.00
837	HD/8	CORNERSTONE DIAGNOSTICS		\$ 248.00
838	HD/8	SHERIFF OF JEFFERSON CO		\$ 1,399.80
839	HD/8	US BANK		\$ 91.06
358	FP/57	JEFFERSON CO FARMLAND PROT.		\$ 65,729.67
153	AR/207	JEFFERSON CO FAIR ASSOC		\$ 150,000.00
154	AR/207	RCN COMMUN.		\$ 16,376.86
155	AR/207	RUGGED NOTEDBOOK		\$ 74,975.00
156	AR/207	SHERIFF OF JEFFERSON CO		\$ 5,149.30
1806	CO/24 6	FIFTH THIRD BANK		\$ 1,925.64

1807	CO/24 6	US BANK	\$ 74.37
1808	CO/24 6	US BANK	\$ 4,235.00
1040	AV/56	SEGRA	\$ 616.00
1039	AV/56	JUSTTECH	\$ 171.69
1041	AV/56	US BANK	\$ 961.70
<b>TOTAL</b>			<b>\$ 325,588.83</b>

- **Motion by Mr. Stolipher to approve the Manual Checks for February 17, 2023 in the amount of \$325,588.83. Motion seconded and unanimously approved.**

**PUBLIC COMMENT:** Marc Petitpierre, Jerri Wines, Denise Nick, Jaqueline Millard, Cindy Staubs, Kristy Grove, Ed Hannon, David Tabb, Austin Dotson, Amanda Straud, Mike Mood, Ross Morgan, and Stacy Tabb.

### **PRESENTATIONS**

1. Janet Shushan- JHS Group- Requested time for Federal grants and direct awards program offer to Jefferson County.

**It was the conscious of the Commission to request the JHS Group to provide a contract to staff to be reviewed by council.**

2. Jacki Shadle-County Clerk- Requested approval to hire Probate Clerk.

- **Motion by Mr. Stolipher to approve the hire of Christine Puttock as a Probate Clerk with a start date of February 27, 2023 with a salary of \$35,000.00 per year. Motion seconded and unanimously approved.**

3. Steve Allen-Director- Jefferson County Office of Homeland Security and Emergency Management- Requested

- a. Approval for purchase for response equipment and trailer markings for the Bovine Emergency Response Program.

- **Motion by Mrs. Tabb to approve the purchase of the equipment and trailer markings for the Bovine Emergency Response Program. Motion seconded and unanimously approved.**
- b. Approval for the release of the Request for Proposal (RFP) for the FEMA Hazard Mitigation Plan Update.
- **Motion by Mrs. Tabb to approve the post for the RFP for the 2024 Hazard Mitigation Plan Update. Motion seconded and unanimously approved.**
4. Jeffrey Polczynski- Director of Communications-Request approval to hire a public Safety Dispatcher (trainee).
- **Motion by Mr. Stolipher to approve the appointment of Patricia Settle as a Public Safety Dispatcher (trainee) at the hourly rate of \$25.625 (\$53,300.00/year) with a signing bonus of \$2,000.00 and a post-training salary increase once full training is complete with a start date of February 21,2023. Motion seconded and unanimously approved.**
5. Jennifer Myers-Director-Jefferson County Parks and Recreation- Requested funding for the 2023 fireworks at Sam Michael's Park.
- **Moved to the next meeting**
6. Matt Mullenax- Executive Director- Hagerstown/ Eastern Panhandle Metropolitan Planning Organization- Requested letter of support for the HEPMPO & EPTA RAISE grant application for the EPTA Multimodal Transit Center Project.
- **Motion by Mr. Stolipher to approve the request for the letter of support for the HEPMPO & EPTA RAISE grant application for the EPTA Multimodal Transit Center Project. Motion seconded and unanimously approved.**
7. Paul Raco, Lutman Land Development, LLC- Requested Landowner petition of Map Amendment for Lutman Land Development , LLC: Kabletown, District, Map 29, Parcels 2 (66 acres) and 6 (30.89 acres) containing a total of 99.89 +- Acres. Request to schedule a Public Hearing and refer the application to the Planning Commission for advice on the comprehensive Plan Consistency of the request.

- **Motion by Mr. Stolipher to accept the Landowner petition and request for Map Amendment for Lutman Land Development, LLC, Parcels 2 and 6 on Map 29 in Kabletown Tax District and schedule Public Hearing at the County Commission meeting on March 16, 2023 and to refer to the application to the Planning Commission for advice on the request's consistency with the Comprehensive Plan. Motion seconded and unanimously approved.**
8. Paul Raco, Federal Group, Inc.- Requested Landowner petition for Map Amendment for Federal Group, Inc.: Shepherdstown District, Map 8, Parcels 10.9 (23.67 acres) and 24.3 (1.02 acres) containing a total of 24.69+- acres. Request to schedule a Public Hearing and refer the application to the Planning Commission for advice on the comprehensive Plan Consistency of the request.
- **Motion by Mr. Stolipher to accept the Landowner petition and request for Map Amendment for Federal Group, Inc., Parcels 10.9 and 24.3 on Map 8 in Shepherdstown Tax District and schedule Public Hearing at the County Commission meeting on March 16, 2023 and to refer to the application to the Planning Commission for advice on the request's consistency with the Comprehensive Plan. Motion seconded and unanimously approved.**
9. Nathan Cochran- Assistant prosecuting attorney-
- a. Report by counsel on opioid case and consideration of recent developments in the case (Jefferson County Commission v. Purdue Pharmaceutical, et al. US District Court, Northern District of West Virginia, Civil Action #1:17-OP-45170, MDL 17-md-02804-DAP In Re: National Prescription Opiate Litigation) and related matters.
  - b. Review, discussion, and possible adoption of leases for Ambulance parking, personnel space and other contractual issues between the JCESA and/or JCC and fire companies at various Fire Stations
    - **Motion by Mr. Stolipher to enter into Executive Session to receive legal advice and status updates on items 9b and 13. Motion seconded and unanimously approved.**
    - **Motion by Mr. Stolipher to come out of Executive Session and reconvene in regular session. Motion seconded and unanimously approved.**

## **FINANCE DIRECTOR REPORTS**

10. Krista Davis- Finance Director- Review and Discussion of Draft Policy 320- Budget Revision Policy

- **Finance Director to provide Policy 320- To the Commission to review/edit**

## **UNFINISHED BUSINESS**

11. Final Review of potential adaptation of County Commission's proposed Prayer Policy.

- **Motion by Mrs. Krouse to approve the presented proposed prayer policy and present at next commission meeting. Motion passed on a 3-2 vote, Commissioner Tabb and Commissioner Stolipher opposing.**

## **NEW BUSINESS**

12. Discussion and development of a plan of action re: the dissolution of the Jefferson County Emergency Services Agency in relation to the EMS transition (TJ)

- **Update provided by Interim Director Mike Sine**
- **It was the consensus of the Commission that the JCESA Board will remain in place until further notice.**

13. Memorandum of Understanding- Shepherd University Emergency Action Plan (SS)

- **Motion by Ms. Jackson to direct Nathan Cochran, Assistant Prosecuting attorney to write up a letter to Shepherd University Emergency Action Plan and present at next meeting. Motion seconded and unanimously approved.**

## COUNTY ADMINISTRATOR REPORTS

-Stipend Alternative for Commission Staff

- **Motion by Mr. Stolipher to have the Acting County Administrator to look into the stipend vs. the increased comp pay and to act accordingly once she had proper information from the Auditors office. Motion seconded and unanimously approved.**

- EMS Transition Update

**Update provided by Mike Sine-Interim Director Jefferson County Emergency Service Agency, Krista Davis -Finance Director and Cindy Rezmer, Interim County Administrator.**

- Personnel Action-Director, Jefferson County Development Authority

- **Mrs. Rezmer informed the Commission, that the Director of Jefferson County Development Authority, Dennis Jarvis resigned from his position earlier in the week. The Board will be meet next week and will report back to the Commission regarding the Interim Director position.**

The Commission adjourned at 9:00 pm on a motion by Mr. Stolipher. Motion was seconded and unanimously approved.

---

Steve Stolipher, PRESIDENT

Respectfully submitted  
Sorayda Pitts  
Administrative Assistant





FIRST QUARTER TERM: (Board of Review and Equalization)

State of West Virginia, County of Jefferson, to-wit:

At a session of the Jefferson County Commission, sitting as Board of Review and Equalization, continued and held at the Courthouse thereof on Thursday, February 16, 2023, beginning at 1:30 p.m.

PRESENT:

Steve Stolipher, President  
Jane Tabb, Commissioner  
Jennifer Krouse, Commissioner

STAFF:

Angie Banks, Assessor  
June Bowers, Sr. Appraiser  
Steve Groh, Prosecuting Attorney  
Sorayda Pitts, Administrative Assistant

In re: **2023 Board of Review and Equalization**

President Stolipher opened the meeting at 1:30 pm. June Bowers, Senior Appraiser for the Jefferson County Assessor's Office, notified the Commission that no hearings were scheduled for the afternoon.

- **Motion by Mr. Stolipher to convene as a Board of Review and Equalization. Motion seconded and unanimously approved.**
- **Motion by Mr. Stolipher to acknowledge the mutual agreements as presented. Motion seconded and unanimously approved**
- **There being no further business, motion by Mr. Stolipher to adjourn a Board of Review and Equalization at 1:40 pm. Motion seconded and unanimously approved.**

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Steve Stolipher , COMMISSION PRESIDENT



# REQUISITIONS TO BE APPROVED

March 2, 2023

DEPARTMENT	Requisition No.	AMOUNT	VENDOR	DESCRIPTION
SHERIFF - LAW	23091	\$ 94,558.49	Executive Emergency Lighting	Equip. to outfit 4 new Tahoes
<b>GRAND TOTAL</b>		<b>\$ 94,558.49</b>		



DESCRIPTION	FUND 001 CO.		TOTAL
Gross Wages	\$413,659.30		\$413,659.30
6.2% Tax Payable OASDI	\$24,642.78		\$24,642.78
1.45% Tax Payable HI	\$5,763.21		\$5,763.21
Fed Withholding	\$34,799.20		\$34,799.20
WV State Withholding	\$17,368.40		\$17,368.40
VA State Tax	\$328.09		\$328.09
MD State Tax	\$869.00		\$869.00
PERS Retirement Deduct 4.5%	\$8,480.98		\$8,480.98
PERS Retirement Deduct 6%	\$7,054.90		\$7,054.90
DSRS Retirement Deduct 8.5%	\$6,836.47		\$6,836.47
EMS Retirement Deduct 9%	\$237.70		\$237.70
Hosp. Pre-Taxed	\$14,203.00		\$14,203.00
D/VF	\$1,642.91		\$1,642.91
AFLAC Pre-Taxed	\$348.93		\$348.93
AFLAC Post-Taxed	\$803.62		\$803.62
Optional Life Post-Taxed	\$1,729.74		\$1,729.74
Wage Attach #1	\$373.39		\$373.39
Wage Attach #2	\$150.00		\$150.00
Wage Attach #3	\$166.49		\$166.49
Wage Attach #4	\$0.00		\$0.00
457 - Nationwide	\$834.00		\$834.00
457I - Empower	\$4,613.49		\$4,613.49
457R - Roth	\$945.00		\$945.00
Christmas Club	\$4,075.00		\$4,075.00
Colonial(Plus)	\$47.84		\$47.84
Uniforms	\$100.10		\$100.10
Total Deductions	\$136,414.24	\$0.00	\$136,414.24
Net Wages Total	\$277,245.06	\$0.00	\$277,245.06
Payroll Date	March 3, 2023		

1

**AGENDA REQUEST FORM**  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: Angela Banks, Assessor

Department or Organization: **Jefferson County Assessor's Office**

Estimation of amount of time needed for appointment: 5 minutes



Date Requested – 1<sup>st</sup> Choice: **March 2, 2023**

*If a specific date is needed, please provide reason for specific date:*

Date Requested – 2<sup>nd</sup> Choice:

Subject (*Wording to be placed on agenda*): **Permission to Advertise – Vacant Clerk Position**

**Please provide the County Commission with a description of your request or presentation, including any background information:**

-  The Assessor is requesting permission to advertise for a clerk position that became vacant in December 2022 due to a resignation.
-  This position is a replacement and will be budget neutral.

Is this a funding request? Y/N NO

If so, how much? \$

Provide exact financial impact/request:

Recommended motion (*Please type out the wording of the motion that you would like the Commission to approve*):

Attach supporting documents for request, or request may be denied.

If not attached, explain:

Is equipment needed?      Projector **Y/N**      Internet/Wi Fi **Y/N**      Telephone for conference call **Y/N**

Contact information:

Email address:

Phone Number:

FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/RECOMMENDATION
not applicable



**AGENDA REQUEST FORM**  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: Tina Rennel

Department or Organization: Circuit Clerk

Estimation of amount of time needed for appointment: 5 minutes

Date Requested – 1<sup>st</sup> Choice: Mar. 3, 2023  
If a specific date is needed, please provide reason for specific date:

Date Requested – 2<sup>nd</sup> Choice:

Subject (Wording to be placed on agenda): Internal Budget Revision

Please provide the County Commission with a description of your request or presentation, including any background information:

more \$ 8000. Employees Salary and Wages to overtime ( 410300 ) ( 410801 )

Is this a funding request? Y/N  NO

If so, how much? \$!

Provide exact financial impact/request:

Recommended motion (Please type out the wording of the motion that you would like the Commission to approve):

Attach supporting documents for request, or request may be denied.

If not attached, explain:

Is equipment needed? Projector Y/N Internet/Wi Fi Y/N Telephone for conference call Y/N

Contact information: Tina Rennel

Email address: [trannere@jeffersoncountywv.org](mailto:trannere@jeffersoncountywv.org) Phone Number: 304 728 3232 ext 1401

**FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/RECOMMENDATION**

not applicable



**AGENDA REQUEST FORM**  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: Tom Hansen

Department or Organization: **Sheriff's Office**

Estimation of amount of time needed for appointment: 5 minutes

Date Requested – 1<sup>st</sup> Choice next meeting

*If a specific date is needed, please provide reason for specific date:*

Date Requested – 2<sup>nd</sup> Choice:

Subject (*Wording to be placed on agenda*): Animal Control Grant

Please provide the County Commission with a description of your request or presentation, including any background information:

Animal Control has received continued grant funding for the spay/neuter program. I am requesting Commission acceptance and signature on the documents.

Is this a funding request? Y/N

If so, how much? \$

Provide exact financial impact/request:

Recommended motion (*Please type out the wording of the motion that you would like the Commission to approve*):

I move to approve the acceptance of the grant funding for the spay/neuter program and authorize the President to sign any related documents.

Attach supporting documents for request, or request may be denied.

If not attached, explain:

Is equipment needed? Projector  Y/N Internet/Wi Fi  Y/N Telephone for conference call  Y/N

Contact information:

Email address: thansen@jeffersoncountywv.org

Phone Number: 304-728-3205

**FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/RECOMMENDATION**

not applicable



**AGENDA REQUEST FORM**  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: **Crystal Gumbel/Laura Creamer**

Department or Organization: **Adult Drug Court**

Estimation of amount of time needed for appointment: **10 mins**

Date Requested – 1<sup>st</sup> Choice: **March 2, 2023**

*If a specific date is needed, please provide reason for specific date:*

Date Requested – 2<sup>nd</sup> Choice:

Subject (*Wording to be placed on agenda*):

Requesting approval to refurbish old mail room for Recovery Closet to support Jefferson County Treatment Court

Please provide the County Commission with a description of your request or presentation, including any background information:

Is this a funding request? **Y/N**

If so, how much?

Provide exact financial impact/request:

Recommended motion (*Please type out the wording of the motion that you would like the Commission to approve*):

Motion to refurbish the old mail room for Recovery Closet for Jefferson County Treatment Court.

Attach supporting documents for request, or request may be denied.

If not attached, explain:

Is equipment needed?      Projector **Y/N**      Internet/Wi Fi **Y/N**      Telephone for conference call **Y/N**

Contact information:

Email address:

Phone Number:

**FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/RECOMMENDATION**

not applicable





## AGENDA REQUEST FORM

[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)

Name: **Keith Lowry**

Department or Organization: **Jefferson County Community Ministries**

Estimation of time needed for appointment: **5 mins**

Date Requested – 1<sup>st</sup> Choice: **March 2, 2023**

*If a specific date is needed, please provide reason:*

Date Requested – 2<sup>nd</sup> Choice:

Subject (*Wording to be placed on agenda*):

Requesting approval to hire Jennifer Verdugo for Social Services Liaison position

Please provide a description of your request or presentation, including any background information:

Is this a Funding Request? Y/N

If so, how much? \$

Provide exact financial request:

Is this a Hiring Request? Yes

Name of Hire: Jennifer Verdugo

Salary: \$57,000 per year 80 Hr

Start Date (beginning of pay period): 3-12-23

Increase after probation if any: n/a

Recommended Motion (*type out wording of the motion you would like the Commission to approve*):

Motion to approve hiring Jennifer Verdugo as Social Services Liaison at an annual salary of \$57,000 effective March 12, 2023

Attach supporting documents for request, or request may be denied.

If not attached, explain:

Is equipment needed?: NO Projector: Y/N Internet/Wi Fi: Y/N Telephone for conference call: Y/N

Contact Information: Keith Lowry

Phone Number: 304-725-3186

Email Address: [directorkeith@jccm.us](mailto:directorkeith@jccm.us)

FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/RECOMMENDATION



**AGENDA REQUEST FORM**  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: Susanna Henderson, Economic Resilience Coordinator

Department or Organization: **Region 9 Planning and Development Council**

Estimation of amount of time needed for appointment: 5 minutes

Date Requested – 1<sup>st</sup> Choice: **March 2, 2023**

*If a specific date is needed, please provide reason for specific date:*

Date Requested – 2<sup>nd</sup> Choice:

Subject (*Wording to be placed on agenda*): **Request Letter of Support for the Corporation of Shepherdstown FY24 Congressional Directed Spending Request application for the Shepherdstown Path Project**

**Please provide the County Commission with a description of your request or presentation, including any background information:**

The purpose of this agenda item is to request a letter of support for the Corporation to apply for federal funding to close the current construction funding gap on the Shepherdstown Path project. To date the Corporation has received ARPA funds from Jefferson County Commission, as well as three grants from WVDOT totaling \$1.692 million for the project. Engineering is expected to reach 100% by end of March and project would be ready to bid. The current estimated funding gap is \$600,000. This letter of support request does not obligate the Jefferson County Commission to any financial commitment.

Is this a funding request? Y/N **NO**

If so, how much? \$

Provide exact financial impact/request:

Recommended motion (*Please type out the wording of the motion that you would like the Commission to approve*):

Attach supporting documents for request, or request may be denied.

If not attached, explain:

Is equipment needed? Projector **Y/N** Internet/Wi Fi **Y/N** Telephone for conference call **Y/N**

Contact information: Susanna Henderson

Email address: shenderson@region9wv.com

Phone Number: 304-263-1743

**FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/RECOMMENDATION**

not applicable





## JEFFERSON COUNTY COMMISSION

124 East Washington Street, P.O. Box 250, Charles Town, WV 25414

Phone: (304) 728-3284 Fax: (304) 725-7916

Web: [www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)

PRESIDENT  
*Steve Stolipher*

VICE PRESIDENT  
*Clare Ath*

COMMISSIONER  
*Tricia Jackson*

COMMISSIONER  
*Jennifer Krouse*

COMMISSIONER  
*Jane Tabb*

**The Honorable Joe Manchin III**  
United States Senate  
Hart Building, Suite 306  
Washington, DC 20510

Dear Senator Manchin:

Jefferson County, WV is located in the Eastern Panhandle of West Virginia, 1.5hrs from Washington, DC and Baltimore. The Corporation of Shepherdstown is one of five towns in Jefferson County and is the oldest town in the state. Its historic charm and surrounding natural beauty make it a magnet for tourist from surrounding communities as well as from out of state visitors. A priority in Jefferson County is to make our communities and downtowns more walkable and to work to provide connectivity from neighborhood to neighborhood. When community members see improvements to accessibility, beautification and added safety access measures the level of personal care provided to their own properties is known to improve making for civically responsible municipality.

The Jefferson County Commission supports the Corporation of Shepherdstown's application to the Congressionally Designated Spending Request, seeking funding for the Shepherdstown Path Project, a pedestrian project on the southwest side of the Corporation of Shepherdstown.

This project is a little over 0.5 mile in length and will construct a five-foot wide sidewalk with curb and gutter, as well as crosswalks, pedestrian-activated push button signals and a connection to the existing bicycle path on Potomac Farms Drive. This project helps ensures the safety of residents, tourists and students between Morgan's Grove Park, residential subdivision, downtown Shepherdstown, Shepherd University and the C&O Canal National Historical Park.

These improvements will contribute substantially to the neighborhood and business climate of the downtown area of the Corporation of Shepherdstown.

Sincerely,

**Steve Stolipher**  
Vice President  
Jefferson County Commission

Interim County Administrator  
*Cindy Rezmer*





## JEFFERSON COUNTY COMMISSION

124 East Washington Street, P.O. Box 250, Charles Town, WV 25414

Phone: (304) 728-3284 Fax: (304) 725-7916

Web: [www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)

PRESIDENT  
*Steve Stolipher*

VICE PRESIDENT  
*Clare Ath*

COMMISSIONER  
*Tricia Jackson*

COMMISSIONER  
*Jennifer Krouse*

COMMISSIONER  
*Jane Tabb*

**The Honorable Shelly Moore Capito**  
**United States Senate**  
**172 Russell Senate Office Building**  
**Washington, DC 20510**

Dear Senator Capito:

Jefferson County, WV is located in the Eastern Panhandle of West Virginia, 1.5hrs from Washington, DC and Baltimore. The Corporation of Shepherdstown is one of five towns in Jefferson County and is the oldest town in the state. Its historic charm and surrounding natural beauty make it a magnet for tourist from surrounding communities as well as from out of state visitors. A priority in Jefferson County is to make our communities and downtowns more walkable and to work to provide connectivity from neighborhood to neighborhood. When community members see improvements to accessibility, beautification and added safety access measures the level of personal care provided to their own properties is known to improve making for civically responsible municipality.

The Jefferson County Commission supports the Corporation of Shepherdstown's application to the Congressionally Designated Spending Request, seeking funding for the Shepherdstown Path Project, a pedestrian project on the southwest side of the Corporation of Shepherdstown.

This project is a little over 0.5 mile in length and will construct a five-foot wide sidewalk with curb and gutter, as well as crosswalks, pedestrian-activated push button signals and a connection to the existing bicycle path on Potomac Farms Drive. This project helps ensure the safety of residents, tourists and students between Morgan's Grove Park, residential subdivision, downtown Shepherdstown, Shepherd University and the C&O Canal National Historical Park.

These improvements will contribute substantially to the neighborhood and business climate of the downtown area of Shepherdstown.

Sincerely,

**Steve Stolipher**  
Vice President  
Jefferson County Commission

Interim County Administrator  
*Cindy Rezmer*



AGENDA REQUEST FORM

[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)

**NAME:** Karen Olden

**DEPARTMENT OR ORGANIZATION:** Probate Office

**ESTIMATION OF TIME NEEDED FOR APPT.:** 15-30 minutes

**DATE REQUESTED: 1<sup>ST</sup> CHOICE** March 2, 2023 10:30 AM

**IF A SPECIFIC DATE IS NEEDED, PLEASE PROVIDE REASON FOR SPECIFIC DATE:**

**SUBJECT:** Removal of Executor for Two Estates

**PLEASE PROVIDE THE CO. COMM. WITH A DESCRIPTION OF YOUR REQUEST OR PRESENTATION, INCLUDING ANY BACKGROUND INFORMATION:**

Petition for removal of William Judy, III. Executor for the Estates of Ellen Sherry Hoffman, also Richard Walter Accurso, deceased. These petitions have been filed by Alison A. Cox Special Counsel

**RECOMMENDED MOTION:**

**ARE DOCUMENTS ATTACHED:** To Follow

**IS A PROJECTOR NEEDED?:** NO

[kolden@jeffersoncountywv.org](mailto:kolden@jeffersoncountywv.org) (304) 728-3230



# Bowles Rice

Attorneys at Law

101 South Queen Street, Martinsburg, WV 25401  
P.O. Drawer 1419, Martinsburg, WV 25402-1419  
304.263.0836

**Allison A. Cox**  
aacox@bowlesrice.com  
T 304.264.4211  
F 304.264.4210

600 Quarrier Street  
Charleston, WV 25301

125 Granville Square, Suite 400  
Morgantown, WV 26501

501 Avery Street  
Parkersburg, WV 26101

Southpointe Town Center  
1800 Main Street, Suite 200  
Canonsburg, PA 15317

480 West Jubal Early Drive, Suite 130  
Winchester, VA 22601

December 22, 2022

bowlesrice.com

## VIA HAND DELIVERY

The Honorable Jacqueline C. Shadle  
Jefferson County Clerk  
100 East Washington Street  
Post Office Box 208  
Charles Town, West Virginia 25414

Re: Estate of Ellen Sherry Hoffman, deceased

Dear Ms. Shadle:

Enclosed please find the Petition for Removal of Executor in the above referenced estate for submission and consideration to the County Commission of Jefferson County, West Virginia.

Please contact me if you have any questions or comments.

Very truly yours,



Alison A. Cox  
Special Counsel

AAC/lm

Enclosures

cc: Lynn Fields and Karen Olden Probate Office (w/ enclosures)

**IN THE COUNTY COMMISSION OF JEFFERSON COUNTY, WEST VIRGINIA**

**IN RE: THE ESTATE OF ELLEN SHERRY HOFFMAN, DECEASED**

**PETITION FOR REMOVAL OF EXECUTOR**

The Petitioner, EUGENE ISAAC HOFFMAN (“Petitioner”), by counsel, pursuant to West Virginia Code § 44-5-5, respectfully requests this Honorable Commission to: 1) remove the Respondent, WILLIAM JUDY, III (“Respondent”), from his position as Executor of the Estate (“Executor”) of Ellen Sherry Hoffman, deceased, (“Estate”) forthwith; 2) revoke and annul Respondent’s powers as Executor of the Estate forthwith; 3) appoint a Fiduciary Commissioner to review all actions taken by Respondent as Executor of the Estate; 4) appoint Petitioner, the sole residual heir, to serve as personal representative without bond to complete the administration of the Estate; 5) direct Respondent to deliver to Petitioner all property, all documents, all passwords, and all other information in his possession, custody, and/or control related to his administration of the Estate forthwith; 6) deny any compensation to Respondent for fiduciary services or commission on money or other property of the Estate pursuant to W.Va. § Code 44-4-7.; and 7) grant Petitioner such other general and special, legal and equitable relief as this Honorable Commission shall deem just and proper following the review of the appointed Fiduciary Commissioner. In support of this Petition, Petitioner states as follows:

1. Petitioner is the brother of the decedent, Ellen Sherry Hoffman (“Ms. Hoffman”), and the sole residual beneficiary of the Estate.
2. Respondent is the Executor of the Estate.
3. Ms. Hoffman was married to Richard Walter Accurso on June 18, 2018.
4. Ms. Hoffman died testate on June 16, 2021.

5. Ms. Hoffman executed a Last Will and Testament dated June 19, 2018, (the “Hoffman Will”). A true and accurate copy of the Hoffman Will is attached as **Exhibit A**.

6. Under Article Five of the Hoffman Will, all of Ms. Hoffman’s assets, except for five specific monetary bequests, were to pass to Mr. Accurso in the event he was living at the time of her death. Article Five of the Hoffman Will further provides that if Mr. Accurso predeceased Ms. Hoffman, the remainder of Ms. Hoffman’s assets were to pass to Petitioner.

7. Mr. Accurso died on June 3, 2021 and, thus, did not survive Ms. Hoffman, leaving Petitioner as the sole residual beneficiary of the Estate.

8. On June 22, 2021, Family Court Judge David Camilletti, (“Judge Camilletti”) qualified as the Executor of the Estate before the Clerk of the County Commission of Jefferson County and presented the Hoffman Will for probate. The Hoffman Will was recorded on June 22, 2021 in the Office of the Clerk of the County Commission of Jefferson County in Will Book 34 at Page 143. Judge Camilletti filed a Form 6.01 Appraisalment of the Estate with the Office of the Clerk of the Commission of Jefferson County, on July 1, 2021. The Form 6.01 Appraisalment of the Estate was recorded in Appraisalment Book 36 at Page 541. A true and accurate copy of the Application of Fiduciaries and Affidavit & Oath listing Judge Camilletti as the Executor is attached as **Exhibit B**; a true and accurate copy of the Form 6.01 Appraisalment of the Estate filed by Judge Camilletti as Executor is attached as **Exhibit C**.

9. The Appraisalment of the Estate filed by Judge Camilletti erroneously named Mr. Accurso as a beneficiary of the Estate.

10. By letter dated September 17, 2021, Petitioner, through undersigned counsel, notified Judge Camilletti that Mr. Accurso should not be listed as a beneficiary of the

Estate, as Mr. Accurso was deceased. The September 17, 2021 letter also asked Judge Camilletti for further information concerning the Form 6.01 Appraisal of the Estate.

11. Further, Petitioner through counsel, inquired as to a Durable Power of Attorney document purportedly prepared by “Judy Jones” in which Ms. Hoffman gave Ms. Jones certain powers as her attorney-in-fact. The Durable Power of Attorney document was executed by Ms. Hoffman on June 16, 2021, the same day she died. Using that Durable Power of Attorney document, Ms. Jones executed a Deed purportedly “prepared by Judy Jones” and recorded in the Office of the Clerk of the County Commission of Jefferson County in Deed Book 1262 at page 403. The Deed purportedly conveys Ms. Hoffman’s interest in real property located at 125 W. German Street, Shepherdstown, West Virginia (“German Street Real Property”) to Justin Oldenberg (fifty-five percent (55%) interest), Petitioner (fifteen percent (15% interest), Sarah Hoffman (fifteen percent (15% interest), and Jake Hoffman (fifteen percent (15% interest). The Deed also purportedly grants a life estate in the same real property to Justin Oldenberg. The letter asked Judge Camilletti to inform the Petitioner as to whether Ms. Hoffman was of sound mind on the date of her death and capable of executing the Durable Power of Attorney. A true and accurate copy of the September 17, 2021 letter is attached as **Exhibit D**. A true and accurate copy of the Deed is attached as **Exhibit E**.

12. Judge Camilletti failed to respond to the September 17, 2021 letter. Petitioner was notified by letter from Respondent dated October 4, 2021, that Judge Camilletti resigned as Executor and, per the terms of the Hoffman Will, appointed Respondent as Executor. A true and accurate a copy of Respondent’s October 4, 2021, letter is attached as **Exhibit F**. On September 28, 2021 Judge Camilletti filed a Designation of Successor Executor with the Office of the Clerk of the County Commission of Jefferson County, West Virginia which was recorded

in the Fiduciary Order Book 36, at Page 177. A true and accurate copy of this Designation is attached as **Exhibit G**.

13. Respondent qualified as the Executor of the Estate before the Clerk of the County Commission of Jefferson County on September 28, 2021. A true and accurate copy of the Application of Fiduciaries and Affidavit & Oath listing Respondent as the Executor is attached as **Exhibit H**.

14. In his October 4, 2021 letter, Respondent stated, “[t]he appraisements you have referred to are being reviewed and the assets marshalled. Amended appraisements will be filed as soon as the information is obtained to make a full appraisal.” Respondent also stated in the letter that he would provide Petitioner, with copies of the amended appraisements “when completed.”

15. Further, in the October 4, 2021 letter, Respondent stated, “I have no reason to believe at this time that Ms. Hoffman was not competent when she executed the Power of Attorney. Therefore, I assume that the Deed was executed at her direction.”

16. Upon information and belief, Respondent failed to investigate the validity of the Power of Attorney or the Deed which transferred property that would have otherwise passed through the Estate but for the Durable Power of Attorney and the Deed. If upon proper investigation of the validity of the Power of Attorney and the Deed it was determined that Ms. Hoffman did not have capacity to execute the Durable Power of Attorney and therefore the attorney in fact did not have the authority to execute the Deed, and the Deed was therefore invalid, Respondent has hindered the Petitioner’s ability to bring a cause of action within the two year statute of limitations which will toll on June 22, 2023.

17. West Virginia Code § 44-1-15 states, “It shall be the duty of every personal representative to administer well and truly the whole personal estate of his decedent.”

18. By failing or refusing to investigate the validity of the Durable Power of Attorney and the Deed, Respondent has violated W.Va. Code § 44-1-15.

19. On December 7, 2021, Petitioner’s counsel had a telephone conversation with Respondent asking for an update on the status of the Estate. Respondent stated that he would inform Petitioner, through counsel, when there was an update. Petitioner’s counsel inquired as to the status of certain real property located in Mendoza, Argentina reported on the original Form 6.01 Appraisement of the Estate filed by Judge Camilletti. Notwithstanding that the property in Mendoza, Argentina was listed as an asset on the Form 6.01 Appraisement of the Estate filed by Judge Camilletti and notwithstanding that it continues to be listed as an asset of the estate of Mr. Accurso, on the amended Form 6.01 Appraisement of the Estate of Mr. Accurso filed by Respondent on January 5, 2022, Respondent acknowledged that he did not know anything about the real property in Mendoza, Argentina and affirmatively stated that he was not going to marshal the real property located in Mendoza, Argentina. A true and accurate copy of the amended Form 6.01 Appraisement of the Estate of Mr. Accurso listing the Mendoza, Argentina Property as an asset of Mr. Accurso’s Estate is attached as **Exhibit I**.

20. West Virginia Code §44-1-14 (a) requires the Personal Representative of an estate to appraise the deceased person’s real estate and personal probate property, or any real estate or personal probate property in which the deceased person had an interest at the time of his or her death, as provided in this section. By failing and refusing to marshal the real property located in Mendoza, Argentina, after having proper notice of this real property and its inclusion in the estate of Mr. Accurso, Respondent violated of W.Va. Code § 44-1-14(a).

21. Despite his promise to do so, Respondent failed to provide a copy of the Amended Form 6.01 Appraisalment of the Estate to Petitioner, through counsel or otherwise. Respondent filed an amended Form 6.01 Appraisalment of the Estate, and it was recorded in the Office of the Clerk of the County Commission of Jefferson County on January 5, 2022, in Appraisalment Book 37 at Page 373. A true and accurate copy of of the amended Form 6.01 Appraisalment of the Estate is attached as **Exhibit J**. Petitioner did not obtain a copy of the recorded document until February 8, 2022. Respondent erroneously named Mr. Accurso as a beneficiary of the Estate on the amended Form 6.01 Appraisalment of the Estate even though Mr. Accurso was deceased. Respondent has been careless with his filings and has therefore violated W. Va. Code § 44-1-15.

22. The amended Form 6.01 Appraisalment of the Estate did not list the Mendoza, Argentina property in Schedule A despite the fact that it was listed on the original Form 6.01 Appraisalment of the Estate filed by Judge Camilletti and despite the fact that it is listed on Respondent's amended Form 6.01 Appraisalment of the Estate of Mr. Accurso.

23. "An executed and signed appraisalment form is prima facie evidence:

(1) Of the value of the property listed;

(2) That the property is subject to administration; and

(3) That the property was received by the personal representative."

W. Va. Code § 44-1-14(g).

24. Under W.Va. Code § 44-1-14(g) because the property was received by the Estate when Judge Camilletti was acting as personal representative as per the original Form 6.01 Appraisalment of the Estate, Respondent owes an explanation to the Petitioner as to why the asset is no longer considered as asset of the Estate.

25. Additionally, in the amended Form 6.01 Appraisal of the Estate filed in the Estate of Mr. Accurso, the Mendoza, Argentina property is still listed in Schedule A of the amended Form 6.01 Appraisal of the Estate with an assessed value of “?????” and an appraised value of “?????”. Under W.Va. Code § 44-1-14(g) Respondent also owes Petitioner an explanation of why the Mendoza, Argentina property is an asset with regard to Mr. Accurso’s estate, of which he is the Executor also, but not that of Ms. Hoffman.

26. Further, in the letter from Petitioner’s counsel to Respondent dated June 3, 2022, Petitioner provided Respondent with a contact who could assist Respondent in obtaining information about the real property in Mendoza, Argentina. Upon information and belief, Respondent has failed to act upon this information. A true and accurate copy of Petitioner’s counsel’s letter dated June 3, 2022 is attached as **Exhibit K**.

27. West Virginia Code § 44-1-14(a) and (b) requires an executor to appraise the deceased’s probate and non-probate real estate and probate personal property at fair market value. *See* W.Va. Code § 44-1-14(a) and (b).

28. “Fair market value” is the price at which a seller who is willing to sell and a buyer is willing to buy consummate a sale when neither is under compulsion. *See Estate of Aul v. Haden*, 154 W.Va. 484, 177 S.E.2d 142 (1970).

29. Respondent’s refusal to investigate and appraise the property in Mendoza, Argentina violates W.Va. Code §§ 44-1-14(a) and (b) and W.Va. Code § 44-1-15.

30. Petitioner, through counsel, sent four letters to Respondent dated March 7, June 3, July 22, and October 18, 2022, each requesting information with regard to the Estate and specifically requesting a copy of the Form 6.02 Inventory of Non-Probate Property. The Form 6.01 Appraisal of the Estate filed by Judge Camilletti listed a Fidelity investment account

valued at \$330,000.00. The amended Form 6.01 Appraisal of the Estate filed by Respondent does not list the same Fidelity account. Petitioner, through the letters, asked for clarification as to why the Fidelity asset was not listed on the amended Form 6.01 Appraisal of the Estate. Respondent failed to respond to any of Petitioner's letters. Petitioner, through letters, also requested a copy of any Form 6.02 Inventory of the Non-Probate Estate to verify whether the Fidelity asset was reported on the form. Petitioner has reason to believe that he is the designated beneficiary of this asset. A true and accurate copy of the March 7, 2022 letter is attached as **Exhibit L**. A true and accurate copy of the July 22, 2022 letter is attached as **Exhibit M**. A true and accurate copy of the October 18, 2022 letter is attached as **Exhibit N**.

31. West Virginia Code §11-1-35 states "... [T]he personal representative of the decedent shall make the nonprobate inventory of an estate available for inspection by or disclosure to...(2) beneficiary under the will of decedent..."

32. Respondent's failure to comply with Petitioner's request violates W.Va. Code § 11-1-35. Additionally, the failure to make the non-probate inventory available has caused delay and hindered Respondent's ability to obtain ownership of the asset if he is indeed the designated beneficiary. Respondent's delay may also result in adverse tax consequences to the designated beneficiary of the Fidelity asset relating to the distributions from the asset.

33. In the multiple letters Petitioner's Counsel sent Respondent between March and October 2022, Petitioner inquired as to the disposal and sale of tangible personal property and requested that certain family heirlooms not be sold in an estate sale Respondent was conducting through a business called "Leave it to Laura, LLC" on Facebook, as well as in the storefront of the German Street Real Property owned by Ms. Hoffman at the time of her death. Respondent has failed to respond to Petitioner, through counsel or otherwise, with regard to these

family heirlooms or any of the requests in Petitioner's four letters. Respondent's failure to respond to Petitioner with regard to these assets is another violation of W.Va. Code § 44-1-15.

34. West Virginia Code § 44-2-2 requires that "[a] statement of all the money, and an inventory of all securities, stocks, bonds and all other property, including the value thereof, which any personal representative, guardian, curator or committee, has received, become chargeable with or disbursed, within one year from the date of the fiduciary's qualification, or within any succeeding year, together with the vouchers for such disbursements, shall, within two months after the end of every such period, be exhibited by the fiduciary to the fiduciary commissioner to whom the estate or trust has been referred." W. Va. Code § 44-2-2.

35. Respondent should have filed an accounting of the Estate by November 28, 2022. To date, Respondent has not filed the necessary accounting despite Petitioner's requests. Respondent has violated, and continues to violate, W.Va. Code § 44-4-2 by failing to file a timely accounting for the Estate. This continuing delay has prejudiced, and continues to prejudice, Petitioner as he attempts to determine the nature and extent of the Estate and the validity of Ms. Hoffman's date of death transactions.

36. "The Fiduciary duty is a duty to act for someone else's benefit, while subordinating one's personal interests to that of the other person. It is the highest standard of duty implied by law." Elmore v. State Farm Mut. Auto. Ins. Co., 504 S.E.2d 893, 898 (W.Va.1998) (internal citations and quotations omitted).

37. Respondent owed fiduciary duties to the Petitioner in the administration of the Estate and breached those duties through his numerous actions and inactions described above.

38. Further, Respondent's failure to communicate with the sole residual beneficiary of the Estate, as required by West Virginia law, has caused extreme annoyance and inconvenience, severe emotional distress, attorney fees, and litigation costs.

WHEREFORE the Petitioner, EUGENE ISAAC HOFFMAN, by counsel, pursuant to West Virginia Code § 44-5-5, respectfully requests this Honorable Commission to: 1) remove the Respondent, WILLIAM JUDY, III from his position as Executor of the Estate forthwith; 2) revoke and annul Respondent's powers as Executor of the Estate forthwith; 3) appoint a Fiduciary Commissioner to review all actions taken by Respondent as Executor of the Estate; 4) appoint Petitioner, the sole residual heir, to serve as personal representative without bond to complete the administration of the Estate; 5) direct Respondent to deliver to Petitioner all property, all documents, all passwords, and all other information in his possession, custody, and/or control related to his administration of the Estate forthwith; 6) deny any compensation to Respondent for fiduciary services or commission on money or other property of the Estate pursuant to W.Va. § Code 44-4-7; and 7) grant Petitioner such other general and special, legal and equitable relief as this Honorable Commission shall deem just and proper following the review of the appointed Fiduciary Commissioner

DATED the 22nd day of December 2022.

**PETITIONER**  
**EUGENE ISAAC HOFFMAN**  
**By Counsel**

*/s/ Alison A. Cox*

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**Alison A. Cox WVSB #8529**  
**BOWLES RICE LLP**  
**101 South Queen Street**  
**Martinsburg, West Virginia 25401**  
**(304) 264-4214**

**IN THE COUNTY COMMISSION OF JEFFERSON COUNTY, WEST VIRGINIA**

**IN RE: THE ESTATE OF ELLEN SHERRY HOFFMAN, DECEASED**

**CERTIFICATE OF SERVICE**

I certify that I served the foregoing PETITION FOR REMOVAL OF EXECUTOR upon the following persons, parties, and/or counsel of record by placing a true and accurate copy in the United States Mail, first class, postage prepaid, in an envelope addressed as follows on the **22nd day of December 2022:**

**Mr. Eugene Hoffman**  
1303 Ivy Road, Apt. 62  
Bremerton, Washington 98316  
*Petitioner and Beneficiary*

**Mr. Jake Hoffman**  
1950 26th Avenue West, Apt. 203  
Seattle, Washington 98199  
*Beneficiary*

**D. Frank Hill III**  
PO Box A  
Shepherdstown, West Virginia 25443  
*Fiduciary Commissioner*

**Ms. Aurelia Falconi**  
c/o William H. Judy, III, Esquire  
(Executor)\*  
Law Offices of Judy and Judy  
110 N. Main Street  
Post Office Box 636  
Moorefield, West Virginia 26836  
*Beneficiary*

**William H. Judy, III, Esquire**  
Law Offices of Judy and Judy  
110 N. Main Street  
P.O. Box 636  
Moorefield, West Virginia 26836  
*Executor*

**Ms. Jacinta Falconi**  
c/o William H. Judy, III, Esquire  
(Executor)\*  
Law Offices of Judy and Judy  
110 N. Main Street  
Post Office Box 636  
Moorefield, West Virginia 26836  
*Beneficiary*

**Ms. Sarah Hoffman**  
4409 SW Stevens Street  
Seattle, Washington 98116  
*Beneficiary*

  
\_\_\_\_\_  
**Alison Cox WWSB# 8529**

\* West Virginia Code 44-1-13 requires the Executor to “file his own affidavit, or the affidavit of some credible person, showing the names and, as far as possible, the addresses of the persons who would take any part of the estate of the decedent as heirs or distributees in cases of the intestacy of the decedent and of the persons who are devisees and legatees under the will, if any, of the decedent, and their relationship to decedent, and the clerk of the court shall record such affidavit in the fiduciary record, which affidavit and the record thereof shall be prima facie evidence of what is contained therein.” The Executor has not filed an affidavit with “addresses of the persons who would take any part of the estate” as required by W.Va. Code 44-1-13. Therefore, Petitioner has served the Executor with a copy of the Petition for each person “who would take any part of the estate”, but for whom the Executor has failed to provide an address as required by W.Va. Code 44-1-13.

VERIFICATION

STATE OF Washington

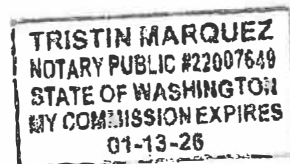
COUNTY OF Kitsap, to-wit:

The Petitioner, EUGENE ISAAC HOFFMAN, being first duly sworn, hereby deposes and states that facts set forth in the foregoing PETITION FOR REMOVAL OF EXECUTOR are true and correct to the best of her knowledge, information, and belief.

Eugene Isaac Hoffman 12/21/2022  
EUGENE ISAAC HOFFMAN

The foregoing VERIFICATION was taken, subscribed, and sworn to before the undersigned Notary Public in his/her jurisdiction on the 21 day of December 2022 by the Petitioner, EUGENE ISAAC HOFFMAN.

Tristin Marquez  
NOTARY PUBLIC  
Tristin Marquez  
My commission expires: 01-13-26



# Last Will and Testament of

## ELLEN SHERRY HOFFMAN

I, ELLEN SHERRY HOFFMAN, a resident of Jefferson County, West Virginia, being of sound and disposing mind and memory, do hereby make, publish and declare this as and for my Last Will and Testament, hereby revoking any and all wills and codicils made by me at any time prior to this date.

ARTICLE ONE: At the time of the execution of this document, I am married to Richard Walter Accurso. I have no children.

ARTICLE TWO: I direct my Executor, hereinafter named, to pay from my residuary estate all of my just debts and funeral expenses, including any estate, transfer, succession or other inheritance taxes, as soon after my decease as it may be practicable for him to do so. I direct my Executor to pay all my lawful debts and to expend such sums for my funeral, cremation and disposition without being subject to any limitation which may be imposed by law. As previously discussed with my executor I wish to be interred without embalming and with all due haste. If this is not possible I wish to be cremated and disposed of as I have previously directed my executor to do.

ARTICLE THREE: Any beneficiary or heir who may choose to contest my Last Will and Testament shall upon choosing to make such contest, no longer have any claim under the Will and that beneficiary or heirs portion shall convert to the residue portion of my Estate.

ARTICLE FOUR: I hereby give and bequeath such items of my personal estate as follows:

- a. Fifty Thousand Dollars (\$50,000.00) to my brother, Eugene Hoffman;
- b. Fifteen Thousand Dollars (\$15,000.00) to my niece, Sarah Hoffman of Omaha, Nebraska;
- c. Fifteen Thousand Dollars (\$15,000.00) to my nephew, Jake Hoffman of Milwaukee, Wisconsin;
- d. Fifteen Thousand Dollars (\$15,000.00) to Aurelia Falconi of Mendoza, Argentina; and
- e. Fifteen Thousand Dollars (\$15,000.00) to Jacinta Falconi of Mendoza, Argentina.

ARTICLE FIVE: I hereby give and bequeath all of the rest, residue and remainder of my estate, real, personal and mixed, of whatsoever nature and wheresoever situate, of which I shall die seized or possessed, or to which I shall be in any wise entitled at the time of my death, including any legacies which may lapse or be invalid or for any reason fail to take effect, and all

  
ELLEN SHERRY HOFFMAN

EXHIBIT  
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property over which I shall have at the time of my death any power of appointment or disposal which I shall not have otherwise exercised and released, I hereby give, devise, bequeath to my beloved RICHARD WALTER ACCURSO.

In the event that RICHARD WALTER ACCURSO, should predecease me, I hereby give, devise, and bequeath all of the rest, residue and remainder of my estate to my brother, EUGENE HOFFMAN of St. Louis Park, Minnesota.

ARTICLE SIX: I confer upon my Executor and any successors with respect to the management and administration of any property, real or personal, including property held under a power in trust, all powers conferred by law upon Executors, including, without limitation, the power to sell my real estate and those powers set forth in the Powers of Fiduciaries statute (West Virginia Code Section 44-5A-1 to 44-5A-3) which are incorporated in this will by reference.

In addition thereto, I confer upon my Executor and any successors the following discretionary powers, without limitation by reason of specification:

1. Unless otherwise provided, in determining whether and to what extent to make discretionary payments of income or principal to, or for the benefit of, any beneficiary, my Executor may, but shall not be required to, take into account any other property or sources of income or support of the beneficiary known to my Executor.

2. In determining whether and to what extent a power of appointment has been exercised by will, my Executor may rely upon any instrument admitted to probate in any jurisdiction as the will of the holder of the power. My Executor may act as if the holder of the power died intestate if my Executor has no notice of a will within three (3) months after the holder's death. This paragraph shall not affect the rights of an appointee or beneficiary against any distributee.

3. To pay reasonable compensation for services in administering and distributing the estate, and to reimbursement for expenses.

4. To rely upon any notice, certificate, affidavit, letter, telegram or other paper or document believed by them to be genuine, or upon any evidence deemed by them to be sufficient, in making any payment or distribution, with no liability for any payment or distribution made in good faith and without actual notice or knowledge of a changed condition or status affecting any person's interest.

5. To retain any securities of any corporate trustee hereunder, or any parent, successor or subsidiary corporation thereof.

6. To exercise, or consent to the exercise of, any tax options or elections allowed by any federal, state or local tax law; all decisions made by them in the course of exercising their discretion pursuant to the powers hereinabove conferred upon them shall be binding and conclusive upon all persons.

7. To join in or consent to Income and Gift Tax Returns filed with or by my spouse and to pay any part or all the income or gift tax and any deficiency, interest, or penalty which

  
ELLEN SHERRY HOFFMAN

EXHIBIT  
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may become due upon such returns.

8. To enter into agreements with appropriate governmental authorities and to make such elections and exercise such options as may be available on estate, inheritance and income tax returns, all in such manner as to my Executor may seem most advisable and tax-wise, without being required to thereafter make any adjustments between income and principal or beneficial interests.

9. To do any and every other act necessary and proper to the execution of my estate and/or the trusts created hereunder.

ARTICLE SEVEN: 1. I nominate, constitute and appoint RICHARD WALTER ACCURSO as Executor of this my Last Will and Testament, and direct that he be allowed to qualify and act as such without surety on his official bond. In the event my husband, is unable or unwilling to serve, or for any reason shall cease to act, then I nominate, constitute and appoint DAVID A. CAMILLETTI, as Executor of this my Last Will and Testament, and direct that he be allowed to qualify and act as such without surety on his official bond.

2. If the appointment of an Executor of my estate is necessary or desirable in any jurisdiction in which my principal Executor is unable or unwilling to act, I appoint as my Executor in that jurisdiction such individual or corporation as may be designated in an instrument signed by my principal Executor, to act without bond and to have all the powers and discretion with respect to my estate in that jurisdiction during administration that my principal Executor is given with respect to the balance of my estate, to be exercised without court order.

ARTICLE EIGHT: In the event that any beneficiary under this Will and I shall die in a common accident or disaster or under such circumstances that any such beneficiary does not survive me for the sixty (60) day period following my decease, then I direct that for the purpose of this Will such beneficiary shall be deemed to have predeceased me.

ARTICLE NINE: Wherever the context requires or permits the number and gender shall be interchangeable so that the singular includes the plural and the plural includes singular; a female gender includes the male and neuter gender, the neuter gender includes the male and female gender, and the male gender includes the female and neuter gender.

IN WITNESS WHEREOF I have hereunto set my hand and seal, have signed my name on the four (4) pages of this my Last Will and Testament and acknowledge the same to be my Last Will and Testament in the presence of the undersigned witnesses this 19<sup>th</sup> day of June, 2018.

  
ELLEN SHERRY HOFFMAN

The foregoing instrument was signed, sealed, published and declared by ELLEN SHERRY HOFFMAN, the above named Testatrix, as and for her Last Will and Testament in our

  
ELLEN SHERRY HOFFMAN

EXHIBIT  
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presence, all being present at the same time, and thereupon, we, at her request and in her presence and in the presence of each other, have witnessed her sign on these four (4) pages and have hereunto subscribed our names as witnesses this 19<sup>th</sup> day of June, 2018.

Lane Camilletti OF Charles Town

Ann Craig OF Shepherdstown

STATE OF WEST VIRGINIA,  
COUNTY OF JEFFERSON, to-wit:

We, ELLEN SHERRY HOFFMAN, Testatrix, Lane Camilletti  
and Ann Craig, the witnesses, whose names are signed to the attached or foregoing instrument being first duly sworn, do hereby declare to the undersigned authority that the Testatrix signed and executed the instrument as her Last Will and Testament, that she signed willingly or directed another to sign for her, and that she executed it as her free and voluntary act for the purposes therein expressed; and that each of the witnesses in the presence and hearing of the Testatrix and of each other, signed the Will as witness and that to the best of their knowledge the Testatrix was at that time 18 or more years of age, of sound mind and under no constraint or undue influence.

Ellen Sherry Hoffman  
ELLEN SHERRY HOFFMAN

Lane Camilletti  
WITNESS

Ann Craig  
WITNESS

Subscribed, sworn to and acknowledged before me by ELLEN SHERRY HOFFMAN, the Testatrix, and subscribed and sworn to before me by Lane Camilletti and Ann Craig, witnesses this 19<sup>th</sup> day of June, 2018.



[Signature]  
NOTARY PUBLIC

My Commission Expires: Feb 26, 2024

Ellen Sherry Hoffman  
ELLEN SHERRY HOFFMAN

EXHIBIT  
A

United States of America

State of West Virginia



County of Jefferson, ss:

Application of Fiduciaries

For Personal Representative of Estate for a Deceased Person.
On Motion of DAVID A CAMILLETTI.

Jefferson County.
Jacqueline C Shadle, Clerk
Instrument: 202100010656
06/22/2021 @ 01:57:39 PM
QUALIFICATION ORDERS EXOR
Book 36 @ Page 68
Pages Recorded 1
Recording Cost: \$ 16.00

Deceased Person ELLEN SHERRY HOFFMAN
Social Security Number 6766
Date of Death

Personal Representative(s)

DAVID A CAMILLETTI EXECUTOR 125 W GERMAN STREET, SHEPHERDSTOWN, WV 25443

List of Beneficiaries

EUGENE HOFFMAN BROTHER
SARAH HOFFMAN NIECE
JAKE HOFFMAN NEPHEW
AURELIA FALCONI
JACINTA FALCONI
RICHARD WALTER ACCURSO HUSBAND 125 W GERMAN STREET, SHEPHERDSTOWN, WV 25443

Jefferson County.
Jacqueline C Shadle, Clerk
Instrument 202100010656
06/22/2021 @ 01:57:40 PM
RECORD OF FIDUCIARIES EXOR
Book 32 @ Page 549
Pages Recorded 1
Recording Cost \$ 16.00

Affidavit & Oath

LIST OF BENEFICIARIES, DISTRIBUTUTES, DEVISEES & LEGATEES OF DECEDENT

DAVID A CAMILLETTI being duly sworn, deposes and says the names, residences and post-office addresses of the beneficiaries and distributees of the Estate of ELLEN SHERRY HOFFMAN, as set out in the foregoing affidavit are correct to the best of his or her knowledge and belief, except as to matters therein stated to be alleged on information and belief, and to those matters he or she believes them to be true; and affiant further states that such beneficiaries and distributees as given as unknown upon diligent inquiry, he or she has been unable to ascertain their names and addresses. I will mail by first class postage prepaid, a copy of the notice of administration in accordance with West Virginia State Code §44-1-14(d) to the persons listed on this form. Further, in accordance with West Virginia State Code §44-1-3, I further swear that I will faithfully perform the duties of my office to the best of my skill and judgment.

[Signature of David A. Camilletti]
DAVID A. CAMILLETTI, EXECUTOR

Subscribed and sworn to before me on this the 22nd day of June, 2021.

[Signature of Jacqueline C. Shadle]
Jacqueline C Shadle
Clerk of Jefferson County

By [Signature of Lynn Fields]
Lynn Fields
Deputy Clerk

EXHIBIT B

**FORM ET 6.01**  
Rev. 08/14

**APPRAISEMENT OF THE ESTATE**  
**FOR DECEDENTS DYING ON OR AFTER JULY 13, 2001**

**PART 1: GENERAL INFORMATION QUESTIONNAIRE**

A. Decedent's Name <b>ELLEN SHERRY HOFFMAN</b>		B. Social Security Number <b>8788</b>	C. Date of Death <b>6-18-2021</b>
D. Decedent's Residence at Death: <b>125 W GERMAN STREET, SHEPHERDSTOWN, WV 25</b>		E. State <b>West Virginia</b>	F. County <b>Jefferson</b>
G. Marital Status at Death Single, Widowed or Divorced <input type="radio"/> Married <input checked="" type="radio"/>	Name of Surviving Spouse <b>Jefferson</b>	H. West Virginia Counties Where Decedent Held Real Estate.	
I. Will this estate be required to file a Federal Estate Tax Return FORM 706 (see Instructions on page 2)? YES <input type="radio"/> NO <input checked="" type="radio"/>			
J. Will this estate be required to file the Nonprobate Inventory Form ET 6.02 (see instructions on page 3)? YES <input type="radio"/> NO <input checked="" type="radio"/>			
K. Did the Decedent leave a WILL? YES <input checked="" type="radio"/> NO <input type="radio"/>			
L. Fiduciary's Name and Mailing Address (include zip code): <b>DAVID A CAMILLETI</b> <b>105 W. GERMAN ST</b> <b>SHEPHERDSTOWN WV 25405</b>		M. Preparer's Name and Address CPA <input type="radio"/> Attorney <input checked="" type="radio"/>	
Fiduciary's Phone Number: <b>304-876-2243</b>		Preparer's Phone Number:	

**PART 2: QUESTIONNAIRE OF NONPROBATE REAL ESTATE**

Answer each of the following questions concerning the decedent's interest in NONPROBATE REAL ESTATE. If you answer "YES" to any question below, you must complete the attached Inventory of Nonprobate Real Estate provided with this form which shows:

- the type of transfer(s) with reference to the question number below;
- name(s) of the person(s) with an interest in the real estate as joint tenant or transferee;
- relationship to the decedent of ALL above named persons;
- market value at the date of death; and
- description of the real estate including assessed value.

	MARKET VALUE
1. Did the decedent own an interest in any real estate as joint tenant with right of survivorship? YES <input type="radio"/> NO <input checked="" type="radio"/>	1
2. Did the decedent transfer an interest in any real estate without adequate consideration within three years prior to date of death? YES <input type="radio"/> NO <input checked="" type="radio"/>	2
3. Did the decedent own an interest in any real estate in an inter vivos trust (living trust) arranged or in which the decedent retained the right of use and enjoyment? YES <input type="radio"/> NO <input checked="" type="radio"/>	3
4. Did the decedent own an interest in any real estate in which the decedent retained a power of appointment, whether special or general? YES <input type="radio"/> NO <input checked="" type="radio"/>	4
5. Did the decedent own an interest in any real estate as a life estate including a dower interest? YES <input type="radio"/> NO <input checked="" type="radio"/>	5
6. Did the decedent own an interest in any real estate transferable by a transfer on death deed? YES <input type="radio"/> NO <input checked="" type="radio"/>	6
7. TOTAL VALUE OF NONPROBATE REAL ESTATE (add lines 1 through 6 above)	7. -0-

**PART 3: SUMMARY OF PROBATE ASSETS**

Complete PART 4 first. Enter the total from each schedule of PART 4 on the appropriate line below.

	MARKET VALUE
1. Schedule A: Real estate or any interest therein	1. -0-
2. Schedule B: Tangible personal property of every kind	2. 3000.00
3. Schedule C: Government bonds and securities of every kind	3. -0-
4. Schedule D: Shares of corporate stock of every kind	4. -0-
5. Schedule E: Money, certificates of deposit, notes, accounts, etc.	5. 330,670.00
6. Schedule F: All other assets not hereinafter mentioned	6. 5,000.00
7. TOTAL VALUE OF PROBATE ASSETS (add lines 1 through 6 above)	7. 338,670.00

EXHIBIT  
C

**PART 4: INVENTORY OF PROBATE ASSETS - TRANSFERS BY WILL OR INTESACY.**  
 After completing PART 4, enter the total from each schedule on the appropriate line in PART 3.

SCHEDULE A: Describe any real estate or any interest in real estate. Include description and appraised value of out of state property, but do not include this amount in the total. See page 3 of the instructions.	ASSESSED VALUE	APPRAISED VALUE
unknown interest, Possibly Joint of Hor + He vrs. Mendoza, Argentina	17	20
TOTAL (enter the total appraised value on line 1 of PART 3)		-0-

SCHEDULE B: Tangible personal property of every kind. See page 3 of the instructions.	APPRAISED VALUE
H.H.G., clothing, Personal objects	3000. <sup>00</sup>
TOTAL (enter the total appraised value on line 2 of PART 3)	
3000. <sup>00</sup>	

SCHEDULE C: Bonds and securities of every kind. See page 3 of the instructions.	APPRAISED VALUE
TOTAL (enter the total appraised value on line 3 of PART 3)	
-0-	

EXHIBIT  
**C**

PART 4 (continued)

SCHEDULE D: Corporate stock of any kind. See page 3 of the instructions.				
NAME OF THE COMPANY	CLOSELY HELD	NUMBER OF SHARES	MARKET VALUE PER SHARE	TOTAL MARKET VALUE
TOTAL (enter the total market value on line 4 of PART 3)				- 0 -

SCHEDULE E: Money, bank accounts, certificates of deposits, notes, accounts receivable, etc. Show dates of notes. See page 3 of instructions.	APPRAISED VALUE
Fidelity Investments	330,000. <sup>00</sup>
Jefferson Security Bank	670. <sup>00</sup>
United Bank	
TOTAL (enter the total appraised value on line 5 of PART 3)	330,670. <sup>00</sup>

SCHEDULE F: All other assets, not hereinbefore mentioned, including insurance payable to the estate. See page 3 of the instructions.	APPRAISED VALUE
Jewelry	5000. <sup>00</sup>
TOTAL (enter the total appraised value on line 6 of PART 3)	5000. <sup>00</sup>

EXHIBIT  
C

**PART 5: BENEFICIARIES.** List the names and relationships of all beneficiaries or heirs of the estate. Show the age of any life tenant after their name. See page 3 of the Instructions.

BENEFICIARY OR HEIR	RELATIONSHIP	BENEFICIARY OR HEIR	RELATIONSHIP
EUGENE HOFFMAN	BROTHER		
SARAH HOFFMAN	NIECE		
JAKE HOFFMAN	NEPHEW		
AURELIA FALCONI			
JACINTA FALCONI			
RICHARD WALTER ACCURSO	HUSBAND		

**PART 6: OATH OF FIDUCIARY**

State of WV County of Jefferson To-wit:

I, DAVID A CAMILLETI, fiduciary for the estate of ELLEN HELEN HOFFMAN after diligent effort to ascertain the taxable property of this estate, have made answers to each of the questions and have completed, in detail, the schedules for each category of property and believe each item thereof to be correct. I thereby believe the foregoing to be the true and lawful appraisal of ALL real estate and personal property of the estate of the above named decedent.

[Signature]  
Fiduciary

Subscribed and sworn to before me this 1st day of July, 2021

[Signature]  
Notary Public

NOTARY PUBLIC  
STATE OF WEST VIRGINIA  
8. Lynn Fields  
Jefferson County Clerk's Office  
100 E. Washington Street  
Charles Town, WV 25414  
My Commission Expires August 11, 2025

My Commission expires 8/11 2025

**PART 7: APPROVAL OF FIDUCIARY COMMISSIONER/DEPUTY**

J. D. Frank Hill, III Fiduciary Commissioner/Deputy Supervisor of Jefferson County, West Virginia, to which the estate of the above named decedent was returned, do hereby approve the foregoing appraisal of such estate.

Given under my hand this 1st day of July, 2021

[Signature] By [Signature] Deputy  
Fiduciary Commissioner/Deputy Supervisor

**PART 8: CLERK OF THE COUNTY COMMISSION**

STATE OF WEST VIRGINIA  
COUNTY OF JEFFERSON: To-wit:

In the Clerk's office of Jefferson County on the 1st day of July, 2021 the foregoing appraisal of the above named decedent was presented and upon motion admitted to record.

Attest [Signature] Clerk  
By [Signature] Deputy

EXHIBIT  
C

Decedent's Name: **ELLEN SHERRY HOFFMAN**

**INVENTORY OF NONPROBATE REAL ESTATE**

If you answered "YES" to any question under PART 2: QUESTIONNAIRE OF NONPROBATE REAL ESTATE, show the following on this page:

- a. the type of transfer(s) with reference to the question number in PART 2;
- b. name(s) of the person(s) with an interest in the real estate as joint tenant or transferee;
- c. relationship to the decedent of ALL above-named persons;
- d. market value at the date of death; and
- e. description of the real estate including assessed value.

Jefferson County  
Jacqueline C Ghadie, Clerk  
Instrument 202100011276  
07/01/2021 @ 11:38:23 AM  
APPRAISEMENT  
Book 36 @ Page 541  
Pages Recorded 5  
Recording Cost \$ 12.00

**EXHIBIT  
C**

# Bowles Rice

Attorneys at Law

101 South Queen Street, Martinsburg, WV 25401  
P.O. Drawer 1419, Martinsburg, WV 25402-1419  
304.263.0836

Alison A. Cox  
aacox@bowlesrice.com  
T 304.264.4211  
F 304.264.4210

600 Quarrier Street  
Charleston, WV 25301

125 Granville Square, Suite 400  
Morgantown, WV 26501

501 Avery Street  
Parkersburg, WV 26101

1217 Chapline Street  
Wheeling, WV 26003

Southpointe Town Center  
1800 Main Street, Suite 200  
Canonsburg, PA 15317

480 West Jubal Early Drive, Suite 130  
Winchester, VA 22601

bowlesrice.com

September 17, 2021

Hon. David A. Camilletti  
Executor for the Estate of Ellen Sherry Hoffman  
119 North George Street  
Charles Town, West Virginia 25414

Re: Estate of Ellen Sherry Hoffman, deceased

Dear Judge Camilletti:

I represent Mr. Eugene Hoffman with regard to his interests in the above referenced estate. My client desires a better understanding of the assets of the estate and how the assets of the estate are being administered. The assets of this estate are entwined with those of the Estate of Richard W. Accurso, Ms. Hoffman's husband.

As you are aware, Mr. Accurso deceased on June 3, 2021 and Ms. Hoffman deceased on June 16, 2021.

The Last Will and Testament of Richard Walter Accurso, drafted by you, executed by the decedent on June 19, 2018 and recorded on June 22, 2021 in the Office of the Clerk of the County Commission of Jefferson County in Will Book 34, at page 139, states that, other than a specific devise to Dan Tokar, Mr. Accurso leaves his entire estate to his wife, Ms. Ellen Hoffman. The Last Will also states that if Ms. Hoffman has predeceased Mr. Accurso, he then leaves his entire estate to my client, Mr. Eugene Hoffman. Article Eight of Mr. Accurso's Last Will and Testament reads, "In the event that any beneficiary under this Will and I shall die in a common accident or disaster or under such circumstances that any such beneficiary does not survive me for the sixty (60) day period following my decease, then I direct that for the purpose of this Will such beneficiary shall be deemed to have predeceased me." Additionally, there are two codicils, both dated April 21, 2021. The first codicil deleted and excised the specific devise to Dan Tokar. The second codicil leaves specific devises of monetary amounts to Justin Oldenburg and Hannah Steuer.

Since Ms. Hoffman deceased only thirteen (13) days after Mr. Accurso, under Article Eight of the Last Will and Testament of Mr. Accurso, she is to be deemed as predeceasing Mr. Accurso. Therefore, after the two specific devises to Mr. Oldenburg and Ms. Steuer, Mr. Eugene Hoffman is the sole residuary beneficiary of Mr. Accurso's estate. However, Mr. Hoffman is not listed as a beneficiary on the Appraisal of the Estate Form ET 6.01 completed by you and recorded in the Office of the Clerk of the County Commission of Jefferson County, West Virginia in Appraisal

EXHIBIT  
D

# Bowles Rice

Hon. David Camilletti, Executor  
September 17, 2021  
Page 2

Book 36, at page 536. Moreover, Ms. Ellen Hoffman is listed as a beneficiary of the estate on the Appraisal form, even though at the time of the filing Ms. Hoffman was deceased. It is necessary for you to amend the Appraisal of the Estate of Richard Walter Accurso adding Mr. Eugene Hoffman as a beneficiary of the estate and removing Ms. Hoffman as a beneficiary of Mr. Accurso's estate.

Given that Mr. Hoffman, after the specific devises, is the sole beneficiary of the estate of Mr. Accurso, my client would like to know if the Appraisal filed by you for the Estate of Ellen Sherry Hoffman and recorded in the Office of the Clerk of the County Commission of Jefferson County, West Virginia in Appraisal Book 36 at page 541 includes the assets from Mr. Accurso's estate? If so, it is necessary for you to file an amended Appraisal of the Estate of Ellen Sherry Hoffman reflecting the change in assets.

Additionally, please provide to me no later than 5:00 pm, September 27, 2021 a copy of all documentation that you reviewed in preparing the Appraisal for Mr. Accurso's estate, such as copies of bank account agreements and signature cards, beneficiary designations on accounts and policies, account statements reflecting date of death values, and transfers of assets during Mr. Accurso's life reportable on a Nonprobate Inventory.

This is in no way to be construed as a contest by my client of the Last Will of Mr. Accurso, but a clarification of the beneficiary under the terms of the Last Will of Mr. Accurso.

With regard to Ms. Hoffman's estate, in her Last Will and Testament, drafted by you, executed by the decedent on June 19, 2018, and recorded on June 22, 2021 in the Office of the Clerk of the County Commission of Jefferson County, West Virginia in Will Book 34, at page 143, she leaves specific devises to Eugene Hoffman, Sarah Hoffman, Jake Hoffman, Aurelia Falconi and Jacinta Falconi. The residue she leaves to her husband, Richard W. Accurso. If he is deceased, which he was, then everything passes to Mr. Eugene Hoffman. Therefore, it is necessary for you to file an amended Appraisal of the Estate of Ellen Sherry Hoffman to remove Richard W. Accurso as a beneficiary of the estate.

It seems that maybe, on June 16, 2021, the day Ms. Hoffman deceased, Ms. Hoffman signed, a Durable General Power of Attorney reported as being prepared by Judy Jones, which is of record in the Office of the Clerk of the County Commission of Jefferson County, West Virginia in Power of Attorney Book 1262, at page 406. Additionally, on June 16, 2021, the day Ms. Hoffman deceased, Judy Jones, ostensibly acting as "Attorney in Fact" under such power of attorney, executed a deed reported as being prepared by Judy Jones, and recorded in the Office of the Clerk of the County Commission of Jefferson County in Deed Book 1262 at page 403. The deed conveys Ms. Hoffman's interest in real property located in Shepherdstown, West Virginia and more particularly described in the Deed to Justin Oldenberg a fifty-five percent (55%) interest and a fifteen percent (15%) each to Eugene Hoffman, Sarah Hoffman, and Jake Hoffman respectively. The deed also grants a life estate for Justin Oldenberg.

**EXHIBIT  
D**

# Bowles Rice

Hon. David Camilletti, Executor  
September 17, 2021  
Page 3

Please inform me of your position as to whether Ms. Hoffman was of sound mind on the date of death, June 16, 2021, when the Durable General Power of Attorney was signed.

Please inform me of your position as to whether Ms. Jones was granted the authority by the June 16, 2021, Durable General Power of Attorney, assuming for the moment it is valid, to sign the gift deed of record in Deed Book 1262 at page 403.

Please provide to me no later than 5:00 pm, September 27, 2021 a copy of all documentation that you reviewed in preparing the Appraisal for Ms. Hoffman's estate, such as copies of bank account agreements and signature cards, beneficiary designations on accounts and policies, account statements reflecting date of death values and transfers of assets during Ms. Hoffman's life reportable on a Nonprobate Inventory.

This information will allow my client to have a better understanding of his interests with respect to the estate and to evaluate your performance to date as Executor of each estate.

If you have engaged legal counsel to represent you in regard to either or both of these estates, please forward this correspondence to such counsel and direct him her to contact me.

Otherwise, if you have any questions or concerns, please feel free to contact me.

Best regards,



Alison A. Cox  
Special Counsel

AAC

---

## Circular 230 Notice

With respect to federal tax issues, no advice, statement or information contained in this communication is intended to be, or written for the purpose of being, (a) relied upon by a taxpayer as the exclusive basis to avoid penalties under the Internal Revenue Code, or (b) used in connection with the promotion, marketing or recommendation of any tax shelter product or tax shelter transaction.

**EXHIBIT  
D**

THIS DEED, made this 16 day of June, 2021, by ELLEN SHERRY HOFFMAN through her power of attorney, JUDY JONES, party of the first part, and hereinafter referred to as Grantor, and JUSTIN OLDENBERG, EUGENE HOFFMAN, SARAH HOFFMAN, and JAKE HOFFMAN, parties of the second part and hereinafter referred to as Grantees in those certain shares as set forth herein.

WITNESSETH: that for and in consideration for the sum of Ten Dollars (\$10.00) cash in hand paid, the receipt of all of which is hereby acknowledged, said Grantor does hereby grant and convey, unto said Grantees, in fee simple, by such shares as referenced below, all of that certain lot or parcel of real estate, with its improvements and appurtenances, situated in Shepherdstown District, Jefferson County, West Virginia, more particularly, bounded and described as follows:

All that certain parcel of real estate, with improvements thereon and the appurtenances thereunto belonging on the north side of German Street, in Shepherdstown, Jefferson County, West Virginia the said lot fronting on said street twenty-eight feet eight inches, by a uniform width about one hundred and ninety-four feet deep by the same more or less, to the line of the newly opened public alley in the rear on the north, and designated on the plat of said town as a part of Lot No. 3; being part of the real estate which was conveyed unto Caroline M. Rutherford, by J. W. Wysong, Jr., and Lula L. Wysong, his wife, by deed bearing date the 29<sup>th</sup> day of September, 1921 and recorded in said county in Deed Book 120 at page 382, to which and the deeds mentioned and referred to therein reference is hereby made for further description of metes and bounds.

AND BEING the same real estate conveyed to Robert G. Olchak and Paricia C. Olchak, husband and wife, from John F. Bowers and Bernice M. Bowers, husband and wife, by deed dated the 31<sup>st</sup> day of January, 1991, of record in the office of the Clerk of the County Commission of Jefferson County, West Virginia, in Deed Book 674 at page 382.

AND BEING the same real estate conveyed to Richard W. Accurso and Ellen S. Hoffman,

as joint tenants with rights of survivorship, by deed dated the 18<sup>th</sup> day of September, 1996, of record in the office of the Clerk of the County Commission of Jefferson County, West Virginia, in Deed Book 842 at page 721.

AND Richard W. Accurso having predeceased Ellen S. Hoffinan on June 3, 2021 thereby vesting in Ellen S. Hoffinan complete title by virtue of right of survivorship.

AND FURTHER the Grantor, ELLEN SHERRY HOFFMAN gives JUSTIN OLDENBERG a fifty-five percent (55%) ownership of this real estate and gives EUGENE HOFFMAN, a fifteen percent (15%) share of ownership, SARAH HOFFMAN, a fifteen percent (15%) share of ownership, and JAKE HOFFMAN a fifteen percent (15%) share of ownership in this property AND grants unto JUSTIN OLDENBERG a life estate in the entirety of the aforesaid real estate along with the right to control all the above-described real property and to use and occupy the same rent free and collect and receive the rents and profits therefrom during his lifetime. The Grantees herein shall not have any right or power to sell, assign, convey, pledge, anticipate, hypothecate, or otherwise dispose of any right, title, or interest that the Grantee acquires under this deed until after the death of the Grantee, JUSTIN OLDENBERG, herein.

This conveyance is made subject to and together with any other covenants, conditions, agreements, easements, rights, rights-of-way and/or restrictions of record and in existence.

DECLARATION OF CONSIDERATION OR VALUE: Under penalties of fine and imprisonment, as provided by law, the undersigned grantor hereby declares that the total consideration for the property described in this document is less than ONE HUNDRED DOLLARS and that the transfer herein is a gift, therefore is an exempt transfer from payment of excise tax on the privilege of transferring real property pursuant to the provisions of West Virginia

Code §11-22-1.

WITNESSETH the following signature and seal:

*Judy Jones, PoA*  
\_\_\_\_\_  
Ellen Sherry Hoffman by  
Power of Attorney, Judy Jones

STATE OF WEST VIRGINIA,  
COUNTY OF BERKELEY, to-wit:

The foregoing instrument was acknowledged before me this the 16 day of June, 2021

by Judy Jones, Power of Attorney for Ellen Sherry Hoffman.

OFFICIAL SEAL  
Notary Public, State Of West Virginia  
DAVID A CAMILLETTI  
213 N George Street  
Charles Town, WV 25414  
My Commission Expires February 28, 2024  
My Commission expires: Feb 28, 2021

*[Signature]*  
\_\_\_\_\_  
Notary Public

THIS INSTRUMENT PREPARED WITHOUT BENEFIT OF TITLE EXAMINATION

*Prepared by Judy Jones, Attorney in fact for Gordon Ellen S. Holtz  
Address: 125 W. GARMAN STREET, SHEPHERDSTOWN, WV 25451*

DAVID CAMILLETTI

Jefferson County  
Jacqueline C Shalle, Clerk  
Instrument 202100010642  
06/22/2021 @ 01:22:41 PM  
DEED  
Book 1262 @ Page 403  
Pages Recorded 3  
Recording Cost \$ 26.00

EXHIBIT  
E

RECEIVED  
10/13/21

*Law Offices*  
**JUDY & JUDY**  
110 N. Main Street  
P.O. Box 636  
Moorefield, West Virginia 26836

William H. Judy, III  
J. David Judy, III

(304) 538-7777  
Fax (304) 638-7404

October 4, 2021

Alison A. Cox, Special Counsel  
Bowles Rice  
P.O. Drawer 1419  
Martinsburg, WV 25402

RE: Estate of Ellen Sherry Hoffman and Richard W. Accurso

Dear Mr. Cox:

Please be advised that Judge Camilletti has resigned as Executor of the above referenced Estates and has appointed me, pursuant to Section 7 paragraph 2 of both wills as successor Executor.

I do agree that for purpose of her husband's will, Ms. Hoffman was not a beneficiary.

The appraisements you have referred to are being reviewed and the assets marshalled. Amended appraisements will be filed as soon as the information is obtained to make a full appraisal.

I have no reason to believe at this time that Ms. Hoffman was not competent when she executed the Power of Attorney. Therefore, I assume that the Deed was executed at her direction.

I will provide the amended appraisements to you when completed.

Sincerely,



William H. Judy, III

WHJ,III/kv

EXHIBIT  
F

Law Offices  
Judy & Judy  
110 N. Main Street  
P.O. Box 636  
Moorefield, West Virginia 26836

NOVA 220  
4 OCT 2021 PM 3 L



Alison A. Cox, Special Counsel  
Bowles Rice  
P.O. Drawer 1419  
Martinsburg, WV 25402

**EXHIBIT  
F**

25402-141919



**DESIGNATION OF SUCCESSOR EXECUTOR**

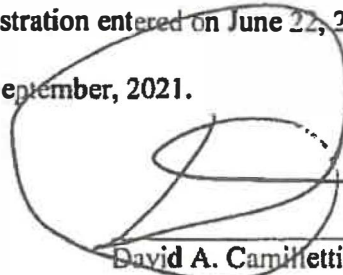
To the County Commission of Jefferson County, West Virginia or the Fiduciary Supervisor

thereof:

I, David A. Camilletti, Executor of the Estate of Ellen Sherry Hoffman, who died testate on June 16, 2021, hereby designate William Judy, III, Attorney at Law as successor Executor pursuant to Article VII, Part 2 of the Last Will and Testament of Ellen Sherry Hoffman and West Virginia law and ask you to appoint William Judy, III as the sole personal representative of the estate. The successor Executor shall serve without bond.

Further, upon the qualification and appointment of William Judy, III as successor Executor, I relinquish my position of Executor of the Estate as established by the Last Will and Testament of Ellen Sherry Hoffman and the Letter of Administration entered on June 22, 2021.

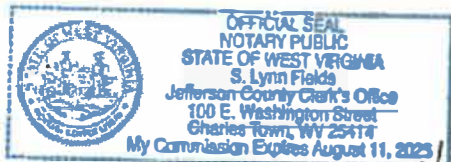
Given under my hand this 28 day of September, 2021.

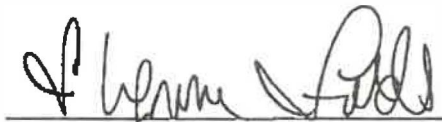
  
\_\_\_\_\_  
David A. Camilletti

STATE OF WEST VIRGINIA  
COUNTY OF JEFFERSON, to-wit:

I, S. Lynn Fields, Notary Public of Jefferson County, West Virginia, do certify that David A. Camilletti, whose name is signed to the writing above, bearing the date of 28th day of September, 2021 has this day acknowledged the same before me in my said County.

Given under my hand this 28th day of September, 2021.



  
\_\_\_\_\_  
Notary Public

My Commission expires: 8/11/2025

**EXHIBIT  
G**

**DESIGNATION OF SUCCESSOR EXECUTOR**

Book 36 @ Page 178  
Pages Recorded 1

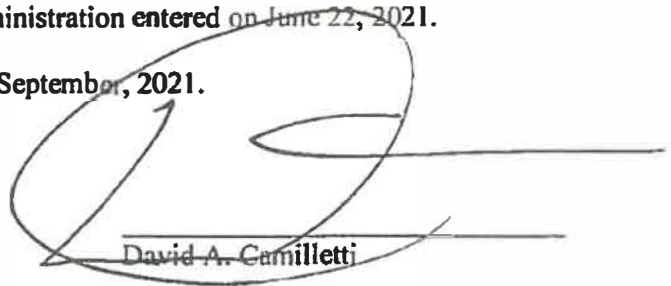
To the County Commission of Jefferson County, West Virginia or the Fiduciary Supervisor

thereof:

I, David A. Camilletti, Executor of the Estate of Richard Walter Accurso, who died testate on June 3, 2021, hereby designate William Judy, III, Attorney at Law as successor Executor pursuant to Article VII, Part 2 of the Last Will and Testament of Richard Walter Accurso and West Virginia law and ask you to appoint William Judy, III as the sole personal representative of the estate. The successor Executor shall serve without bond.

Further, upon the qualification and appointment of William Judy, III as successor Executor, I relinquish my position of Executor of the Estate as established by the Last Will and Testament of Richard Walter Accurso and the Letter of Administration entered on June 22, 2021.

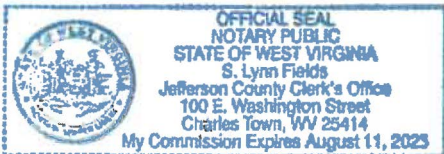
Given under my hand this 25 day of September, 2021.

  
David A. Camilletti

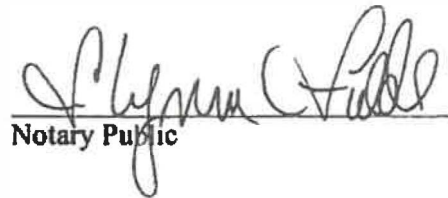
STATE OF WEST VIRGINIA  
COUNTY OF JEFFERSON, to-wit:

I, S. Lynn Fields, Notary Public of Jefferson County, West Virginia, do certify that David A. Camilletti, whose name is signed to the writing above, bearing the date of 25th day of September, 2021 has this day acknowledged the same before me in my said County.

Given under my hand this 28th day of September, 2021.



My Commission expires: 8/11/2023

  
Notary Public

**EXHIBIT  
G**

United States of America

State of West Virginia



County of Jefferson, ss:

Application of Fiduciaries

For Personal Representative of Estate for a Deceased Person
On Motion of WILLIAM JUDY III.

Jefferson County
Jacqueline C Shadle, Clerk
Instrument 202100016188
09/28/2021 @ 02:46:24 PM
QUALIFICATION ORDERS EXOR
Book 36 @ Page 175
Pages Recorded: 1
Recording Cost \$ 17.00

Deceased Person ELLEN SHERRY HOFFMAN
Social Security Number 6766
Date of Death 6/16/2021

Personal Representative(s)

WILLIAM JUDY III EXECUTOR PO BOX 636, MOOREFIELD, WV 26836

List of Beneficiaries

EUGENE HOFFMAN BROTHER
SARAH HOFFMAN NIECE
JAKE HOFFMAN NEPHEW
AURELIA FALCONI
JACINTA FALCONI
RICHARD WALTER ACCURSO HUSBAND 123 W GERMAN STREET, SHEPHERDSTOWN, WV 25443

Jefferson County
Jacqueline C Shadle, Clerk
Instrument 202100016199
09/28/2021 @ 02:46:25 PM
RECORD OF FIDUCIARIES EXOR
Book 32 @ Page 695
Pages Recorded: 1
Recording Cost \$ 17.00

Affidavit & Oath

LIST OF BENEFICIARIES, DISTRIBUTEES, DEVISEES & LEGATEES OF DECEDENT

WILLIAM JUDY III being duly sworn, deposes and says the names, residences and post-office addresses of the beneficiaries and distributees of the Estate of ELLEN SHERRY HOFFMAN, as set out in the foregoing affidavit are correct to the best of his or her knowledge and belief, except as to matters therein stated to be alleged on information and belief, and to those matters he or she believes them to be true; and affiant further states that such beneficiaries and distributees as given as unknown upon diligent inquiry, he or she has been unable to ascertain their names and addresses. I will mail by first class postage prepaid, a copy of the notice of administration in accordance with West Virginia State Code §44-1-14(d) to the persons listed on this form. Further, in accordance with West Virginia State Code §44-1-3, I further swear that I will faithfully perform the duties of my office to the best of my skill and judgment.

[Signature]
WILLIAM JUDY III, EXECUTOR

Subscribed and sworn to before me on this the 22nd day of June, 2021.

[Signature: Jacqueline C Shadle]
Jacqueline C Shadle
Clerk of Jefferson County

By [Signature: Lynn Fields]
Lynn Fields
Deputy Clerk

EXHIBIT
H

*Amended*

**FORM ET 6.01**  
Rev. 08/14

**APPRAISEMENT OF THE ESTATE  
FOR DECEDENTS DYING ON OR AFTER JULY 13, 2001**

**PART 1: GENERAL INFORMATION QUESTIONNAIRE**

A. Decedent's Name <b>RICHARD WALTER ACCURSO</b>		B. Social Security Number <b>6739</b>	C. Date of Death <b>6/3/2021</b>
D. Decedent's Residence at Death <small>125 W German St, Shepherdstown, WV</small>		E. State <b>WV</b>	F. County <b>Jefferson</b>
G. Marital Status at Death Married <input checked="" type="checkbox"/> Single, Widow(er) or Divorced <input type="checkbox"/>	Name of Surviving Spouse <b>Ellen S. Hoffman</b>	H. West Virginia Counties Where Decedent Held Real Estate. <b>Jefferson</b>	
I. Will this estate be required to file a Federal Estate Tax Return FORM 706 (see instructions on page 2)?		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
J. Will this estate be required to file the Nonprobate Inventory Form ET 6.02 (see instructions on page 3)?		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
K. Did the Decedent leave a WILL?		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
L. Fiduciary's Name and Mailing Address (include zip code) <b>William H. Judy, III</b> <b>P.O. Box 636</b> <b>Moorefield, WV 26836</b>		M. Preparer's Name and Address <b>William H. Judy, III</b> <b>P.O. Box 636</b> <b>Moorefield, WV 26836</b>	CPA <input type="checkbox"/> Attorney <input checked="" type="checkbox"/>
Fiduciary's Phone Number: <b>304-538-7777</b>		Preparer's Phone Number: <b>304-538-7777</b>	

**PART 2: QUESTIONNAIRE OF NONPROBATE REAL ESTATE**

Answer each of the following questions concerning the decedent's interest in NONPROBATE REAL ESTATE. If you answer "YES" to any question below, you must complete the attached Inventory of Nonprobate Real Estate provided with this form which shows:

- a. the type of transfer(s) with reference to the question number below;
- b. name(s) of the person(s) with an interest in the real estate as joint tenant or transferee;
- c. relationship to the decedent of ALL above named persons;
- d. market value at the date of death; and
- e. description of the real estate including assessed value.

		MARKET VALUE
1. Did the decedent own an interest in any real estate as joint tenant with right of survivorship? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	1	\$500,000.00
2. Did the decedent transfer an interest in any real estate without adequate consideration within three years prior to date of death? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	2	
3. Did the decedent own an interest in any real estate in an inter vivos trust (living trust) arrangement or in which the decedent retained the right of use and enjoyment? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	3	
4. Did the decedent own an interest in any real estate in which the decedent retained a power of appointment, whether special or general? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	4	
5. Did the decedent own an interest in any real estate as a life estate including a shorter interest? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	5	
6. Did the decedent own an interest in any real estate transferable by a transfer on death deed? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	6	
7. TOTAL VALUE OF NONPROBATE REAL ESTATE (add lines 1 through 6 above)	7	\$500,000.00

**PART 3: SUMMARY OF PROBATE ASSETS**

Complete PART 4 first. Enter the total from each schedule of PART 4 on the appropriate line below.

		MARKET VALUE
1. Schedule A: Real estate or any interest therein	1	0.00
2. Schedule B: Tangible personal property of every kind	2	\$ 600.00
3. Schedule C: Government bonds and securities of every kind	3	0.00
4. Schedule D: Shares of corporate stock of every kind	4	0.00
5. Schedule E: Money, certificates of deposit, notes, accounts, etc.	5	\$161,350.00
6. Schedule F: All other assets not heretofore mentioned	6	\$ 5,000.00
7. TOTAL VALUE OF PROBATE ASSETS (add lines 1 through 6 above)	7	\$166,950.00

**EXHIBIT**  
**I**

**PART 4: INVENTORY OF PROBATE ASSETS – TRANSFERS BY WILL OR INTESACY**  
 After completing PART 4, enter the total from each schedule on the appropriate line in PART 3.

<b>SCHEDULE A: Describe any real estate or any interest in real estate. Include description and appraised value of out of state property, but do not include this amount in the total. See page 3 of the instructions.</b>	<b>ASSESSED VALUE</b>	<b>APPRAISED VALUE</b>
Unknown interest, possibly joint of house and lot in Mendoza, Argentina	??????	????????
<b>TOTAL (enter the total appraised value on line 1 of PART 3)</b>		<b>0.00</b>

<b>SCHEDULE B: Tangible personal property of every kind. See page 3 of the instructions.</b>	<b>APPRAISED VALUE</b>	
Household Goods Clothing, personal object	\$ 600.00	
<b>TOTAL (enter the total appraised value on line 2 of PART 3)</b>		<b>\$ 600.00</b>

<b>SCHEDULE C: Bonds and securities of every kind. See page 3 of the instructions.</b>	<b>APPRAISED VALUE</b>	
NONE		
<b>TOTAL (enter the total appraised value on line 3 of PART 3)</b>		<b>\$0.00</b>



**PART 4 (continued)**

SCHEDULE D: Corporate stock of any kind. See page 3 of the instructions.				
NAME OF THE COMPANY	CLOSELY HELD	NUMBER OF SHARES	MARKET VALUE PER SHARE	TOTAL MARKET VALUE
NONE				
TOTAL (enter the total market value on line 4 of PART 3)				0.00

SCHEDULE E: Money, bank accounts, certificates of deposits, notes, accounts receivable, etc. Show dates of notes. See page 3 of instructions.		APPRAISED VALUE
JSB Jefferson Security Bank		\$ 4,450.00
United Bank		\$ 49,900.00
Hoover and Strong Metals		\$107,000.00
TOTAL (enter the total appraised value on line 5 of PART 3)		\$161,350.00

SCHEDULE F: All other assets, not hereinbefore mentioned, including insurance payable to the estate. See page 3 of the instructions.		APPRAISED VALUE
Jewelry		\$5,000.00
TOTAL (enter the total appraised value on line 6 of PART 3)		\$5,000.00

**EXHIBIT**  
**I**

**PART 5: BENEFICIARIES.** List the names and relationships of all beneficiaries or heirs of the estate. Show the age of any life tenant after their name. See page 3 of the instructions.

BENEFICIARY OR HEIR	RELATIONSHIP	BENEFICIARY OR HEIR	RELATIONSHIP
Ellen Sherry Hoffman	Wife		
Justin Oldenburg	Friend		
Hannah Steuer	no Relation		
Eugene Hoffman	no relation		

**PART 6: OATH OF FIDUCIARY**

State of West Virginia County of Jefferson To-wit:


I, William H. Judy, Jr. fiduciary for the estate of Richard W. Accused after diligent effort to ascertain the taxable property of this estate, have made answers to each of the questions and have completed, in detail, the schedules for each category of property and believe each item thereof to be correct. I thereby believe the foregoing to be the true and lawful appraisal of ALL real estate and probate property of the estate of the above named decedent.

*[Signature]*  
Fiduciary

and sworn to before me this 23<sup>rd</sup> day of December 20 21

*[Signature]*  
Notary Public

My Commission expires May 2 2022



**PART 7: APPROVAL OF FIDUCIARY COMMISSIONER/FIDUCIARY SUPERVISOR**

I, \_\_\_\_\_, Fiduciary Commissioner/Fiduciary Supervisor of \_\_\_\_\_ County, West Virginia, to whom the estate of the above named decedent was referred, do hereby approve the foregoing appraisal of such estate.

Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

By \_\_\_\_\_  
Fiduciary Commissioner/Fiduciary Supervisor Deputy

**PART 8: CLERK OF THE COUNTY COMMISSION**

STATE OF WEST VIRGINIA

COUNTY OF Jefferson To-wit:

In the Clerk's office of Jefferson County on the 5<sup>th</sup> day of January 20 22 the foregoing appraisal of the above named decedent was presented and upon motion admitted to record.

Attest Jacqueline C. Thadde Clerk

By Kevin Elder Deputy

EXHIBIT  
I

Decedent's Name: RICHARD WALTER ACCURSO

**INVENTORY OF NONPROBATE REAL ESTATE**

If you answered "YES" to any question under PART 2: QUESTIONNAIRE OF NONPROBATE REAL ESTATE, show the following on this page:

- a. the type of transfer(s) with reference to the question number in PART 2;
- b. name(s) of the person(s) with an interest in the real estate as joint tenant or transferee;
- c. relationship to the decedent of ALL above named persons;
- d. market value at the date of death; and
- e. description of the real estate including assessed value.

125 W. German Street  
Shepherdstown, Jefferson County, WV

- a) Joint/Survivorship
- b) Ellen S. Hoffman, Same Address
- c) Spouse
- d) \$500,000.00
- e) Part lot 3, Plat of Sherpherdstown  
28 ft 8 inches x 194 feet  
with house & appurtenances  
\$32,330.00 assessed  
\$196,970 Assessed

Jefferson County  
Jacqueline C. Shadle, Clerk  
Instrument 20220000244  
01/05/2022 @ 04:06:09 PM  
APPRAISEMENT  
Book 37 @ Page 373  
Pages Recorded 5  
Recording Cost \$ 12.00

**EXHIBIT**

**I**

Amended

**FORM ET 6.01**  
Rev. 06/14

**APPRAISEMENT OF THE ESTATE  
FOR DECEDENTS DYING ON OR AFTER JULY 13, 2001**

**PART 1: GENERAL INFORMATION QUESTIONNAIRE**

A. Decedent's Name <b>Ellen Sherry Hoffman</b>		B. Social Security Number <b>6766</b>	C. Date of Death <b>6-16-2021</b>
D. Decedent's Residence at Death <b>125 W. German Street, Shepherdstown, WV</b>		E. State <b>WV</b>	F. County <b>Jefferson</b>
G. Marital Status at Death Married <input type="checkbox"/> Single, Widow(er) or Divorced <input checked="" type="checkbox"/>	Name of Surviving Spouse	H. West Virginia Counties Where Decedent Held Real Estate. <b>Jefferson</b>	
I. Will this estate be required to file a Federal Estate Tax Return FORM 706 (see instructions on page 2)?		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
J. Will this estate be required to file the Nonprobate Inventory Form ET 6.02 (see instructions on page 3)?		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
K. Did the Decedent leave a WILL?		YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
L. Fiduciary's Name and Mailing Address (include zip code) <b>William H. Judy, III</b> <b>P.O. Box 636</b> <b>Moorefield, WV 26836</b>		M. Preparer's Name and Address <b>William H. Judy, III</b> <b>P.O. Box 636</b> <b>Moorefield, WV 26836</b>	
Fiduciary's Phone Number: <b>304-538-7777</b>		Preparer's Phone Number: <b>304-538-7777</b>	

**PART 2: QUESTIONNAIRE OF NONPROBATE REAL ESTATE**

Answer each of the following questions concerning the decedent's interest in NONPROBATE REAL ESTATE. If you answer "YES" to any question below, you must complete the attached Inventory of Nonprobate Real Estate provided with this form which shows:

- a. the type of transfer(s) with reference to the question number below;
- b. name(s) of the person(s) with an interest in the real estate as joint tenant or transferee;
- c. relationship to the decedent of ALL above named persons;
- d. market value at the date of death; and
- e. description of the real estate including assessed value.

	MARKET VALUE
1. Did the decedent own an interest in any real estate as joint tenant with right of survivorship? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	1
2. Did the decedent transfer an interest in any real estate without adequate consideration within three years prior to date of death? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	2
3. Did the decedent own an interest in any real estate in an inter vivos trust (living trust) arrangement or in which the decedent retained the right of use and enjoyment? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	3
4. Did the decedent own an interest in any real estate in which the decedent retained a power of appointment, whether special or general? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	4
5. Did the decedent own an interest in any real estate as a life estate including a dower interest? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	5
6. Did the decedent own an interest in any real estate transferable by a transfer on death deed? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	6
7. TOTAL VALUE OF NONPROBATE REAL ESTATE (add lines 1 through 6 above).	7 -0-

**PART 3: SUMMARY OF PROBATE ASSETS**

Complete PART 4 first. Enter the total from each schedule of PART 4 on the appropriate line below.

	MARKET VALUE
1. Schedule A: Real estate or any interest therein.	1 -0-
2. Schedule B: Tangible personal property of every kind.	2 \$3,000.00
3. Schedule C: Government bonds and securities of every kind.	3 -0-
4. Schedule D: Shares of corporate stock of every kind.	4 -0-
5. Schedule E: Money, certificates of deposit, notes, accounts, etc.	5 \$ 670.00
6. Schedule F: All other assets not hereinbefore mentioned.	6 \$5,000.00
7. TOTAL VALUE OF PROBATE ASSETS (add lines 1 through 6 above).	7 \$8,670.00

EXHIBIT  
**J**

**PART 4: INVENTORY OF PROBATE ASSETS – TRANSFERS BY WILL OR INTESTACY**  
 After completing PART 4, enter the total from each schedule on the appropriate line in PART 3.

SCHEDULE A: Describe any real estate or any interest in real estate. Include description and appraised value of out of state property, but do not include this amount in the total. See page 3 of the instructions.	ASSESSED VALUE	APPRAISED VALUE
<b>TOTAL</b> (enter the total appraised value on line 1 of PART 3)		-0-

SCHEDULE B: Tangible personal property of every kind. See page 3 of the instructions.	APPRAISED VALUE
Household Goods, Clothing, Personal Objects	\$3,000.00
<b>TOTAL</b> (enter the total appraised value on line 2 of PART 3)	

SCHEDULE C: Bonds and securities of every kind. See page 3 of the instructions.	APPRAISED VALUE
N/A	
<b>TOTAL</b> (enter the total appraised value on line 3 of PART 3)	-0-

EXHIBIT  
J

**PART 4 (continued)**

<b>SCHEDULE D: Corporate stock of any kind. See page 3 of the instructions.</b>				
<b>NAME OF THE COMPANY</b>	<b>CLOSELY HELD</b>	<b>NUMBER OF SHARES</b>	<b>MARKET VALUE PER SHARE</b>	<b>TOTAL MARKET VALUE</b>
N/A				
<b>TOTAL (enter the total market value on line 4 of PART 3)</b>				<b>-0-</b>

<b>SCHEDULE E: Money, bank accounts, certificates of deposits, notes, accounts receivable, etc. Show dates of notes. See page 3 of instructions.</b>	<b>APPRAISED VALUE</b>
Jefferson Security Bank	\$670.00
<b>TOTAL (enter the total appraised value on line 5 of PART 3)</b>	<b>\$670.00</b>

<b>SCHEDULE F: All other assets, not hereinbefore mentioned, including insurance payable to the estate. See page 3 of the instructions.</b>	<b>APPRAISED VALUE</b>
Jewelry	\$5,000.00
<b>TOTAL (enter the total appraised value on line 6 of PART 3)</b>	<b>\$5,000.00</b>

**EXHIBIT  
J**

**PART 5: BENEFICIARIES.** List the names and relationships of all beneficiaries or heirs of the estate. Show the age of any life tenant after their name. See page 9 of the instructions.

BENEFICIARY OR HEIR	RELATIONSHIP	BENEFICIARY OR HEIR	RELATIONSHIP
Eugene Hoffman	Brother		
Sarah Hoffman	Niece		
Jake Hoffman	Nephew		
Aurelia Falconi			
Jacinta Falconi			
Richard Walter Accurso	Husband		

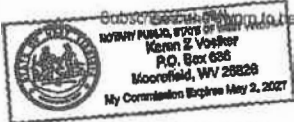
**PART 6: OATH OF FIDUCIARY**

State of West Virginia County of Hardy, To-wit:

I, \_\_\_\_\_, fiduciary for the estate of \_\_\_\_\_ after diligent effort to ascertain the taxable property of this estate, have made answers to each of the questions and have completed, in detail, the schedules for each category of property and believe each item thereof to be correct. I thereby believe the foregoing to be the true and lawful appraisal of ALL real estate and probate property of the estate of the above named decedent.

\_\_\_\_\_ Fiduciary

Subscribed and sworn to before me this 31<sup>st</sup> day of August, 2022

 \_\_\_\_\_ Notary Public

My Commission expires May 2, 2027

**PART 7: APPROVAL OF FIDUCIARY COMMISSIONER/FIDUCIARY SUPERVISOR**

I, \_\_\_\_\_, Fiduciary Commissioner/Fiduciary Supervisor of \_\_\_\_\_ County, West Virginia, to whom the estate of the above named decedent was referred, do hereby approve the foregoing appraisal of such estate.

Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Fiduciary Commissioner/Fiduciary Supervisor

By \_\_\_\_\_  
Deputy

**PART 8: CLERK OF THE COUNTY COMMISSION**

STATE OF WEST VIRGINIA

COUNTY OF Jefferson To-wit:

In the Clerk's office of Jefferson County on the 13 day of September, 2022

the foregoing appraisal of the above named decedent was presented and upon motion admitted to record.

Attest: Jefferson C. Chadler Clerk

By: Karen Alden Deputy

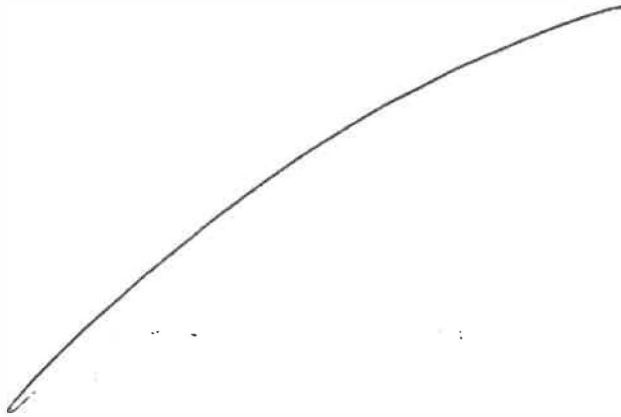
EXHIBIT  
J

Decedent's Name: Ellen Sherry Hoffman

**INVENTORY OF NONPROBATE REAL ESTATE**

If you answered "YES" to any question under PART 2: QUESTIONNAIRE OF NONPROBATE REAL ESTATE, show the following on this page:

- a. the type of transfer(s) with reference to the question number in PART 2;
- b. name(s) of the person(s) with an interest in the real estate as joint tenant or transferee;
- c. relationship to the decedent of ALL above named persons;
- d. market value at the date of death; and
- e. description of the real estate including assessed value.



Jefferson County  
Jacqueline C Shadle, Clerk  
Instrument 20220012865  
09/13/2022 @ 03:12:16 PM  
APPRAISEMENT  
Book 38 # Page 456  
Pages Recorded 5  
Recording Cost \$ 12.00



# Bowles Rice

Attorneys at Law

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304.263.0836

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Charleston, WV 25301

125 Granville Square, Suite 400  
Morgantown, WV 26501

601 Avery Street  
Parkersburg, WV 26101

Southpointe Town Center  
1800 Main Street, Suite 200  
Cannonsburg, PA 16317

480 West Jubal Early Drive, Suite 130  
Winchester, VA 22601

June 3, 2022

bowlesrice.com

William H. Judy, III, Esquire  
Law Offices of Judy and Judy  
110 N. Main Street  
P.O. Box 636  
Moorefield, WV 26836

**VIA CERTIFIED MAIL RETURN  
RECEIPT REQUESTED**

Re: Estates of Ellen Sherry Hoffman and Richard W. Accurso, deceased

Dear Mr. Judy:

I am writing to inquire into the status of the Estates of Ellen Sherry Hoffman and Richard W. Accurso. On March 7, 2022 – subsequent to our December 7, 2021 telephone call – I wrote the enclosed letter requesting information for my client, Eugene Hoffman. Three months have passed and I have not received a response from you on any of the subjects raised in the letter nor do the records in the Office of the Clerk of the County Commission reflect any action on your part regarding these estates.

The purpose of this letter is five-fold. First, because you told me that you had no plans to take any action regarding the Mendoza, Argentina property, we have contacted a law firm in Argentina that is willing to undertake efforts to ascertain the ownership of the property and to assist in perfecting any rights in which the estates may have. I strongly urge you to contact Jeffrey Freund – Eugene Hoffman's cousin's husband, who is a lawyer in Washington, DC – who will arrange an introduction to the Argentine lawyers. Mr. Freund can be reached at [freund056@gmail.com](mailto:freund056@gmail.com). Your failure to pursue this, or any, course of action and acquire the accurate nature of the ownership of the property and its value for the beneficiary of the estates is a breach of your fiduciary duty.

Second, it has recently come to Eugene Hoffman's attention that his sister Ellen was in an investment club, that the club had a check representing Ellen's interests in the club's investments, that a representative of the club called "an executor" of Ellen's estate to get instructions regarding the check and, upon receiving no response to the message she left the executor, sent a check to Ellen's address. Whether the executor she called was you or Mr.

EXHIBIT  
K

# Bowles Rice

William H. Judy, III, Esquire  
May 31, 2022  
Page 2

Camilletti is beside the point. This is an additional estate asset that requires marshaling. Mr. Freund can also be helpful in connecting you with the investment club.

Third, although I made this point in my March 7 letter, it bears repeating. We believe that the facts surrounding Ellen Hoffman's death-bed execution of a power of attorney that led to a purported deed creating a complicated ownership structure for her Shepherdstown home is suspicious, at best. Her rapidly declining health and the timing of those actions cast doubt on her competency to have executed a power of attorney. Any serious effort to carry out the responsibilities of an executor would include a factual review of the circumstances surrounding the execution of that power of attorney, including reviewing her medical records and interviewing the medical personnel who were caring for her on that day and the witnesses to the signing of the power of attorney. Your apparent failure to take any action in that regard, in light of our previously having brought these facts to your attention, is troubling at best.

Fourth, my client requests copies of the Non-Probate Inventory Form 6.02 filed for both estates. While these documents are not public record, the executor is required to make available for inspections by, or disclosure to, an heir or beneficiary under the will.

Finally, as you no doubt know, we are approaching the one-year anniversary of Ms. Hoffman's and Mr. Accurso's deaths. Under the West Virginia §44-4-2 you are required to file an accounting within two months of the one-year anniversary of your qualification as executor. Through this letter, we put you on notice that, in light of your apparent failure to have taken any steps – let alone all reasonable and necessary steps – to marshal and value the ALL of the assets of the estates for the estates' beneficiaries, we oppose any effort on your part to obtain any extension. Should you seek any extensions *ex parte*, we direct you to advise the Fiduciary Commissioner that Eugene Hoffman, the principle and residual beneficiary of the estates, opposes the extension. Should you decline our request and seek an extension without advising the Fiduciary Commissioner, we will have no choice but to consider all options, including seeking your removal as executor and exploring actions against you personally in the event we conclude that your inaction has irreparably diminished the value of the estates.

Again, my client demands that you affirmatively act to marshal ALL estate assets and provide the information requested in the March 7, 2022 letter.

Very truly yours,


  
Alison A. Cox  
Special Counsel

EXHIBIT  
K

# Bowles Rice

William H. Judy, III, Esquire  
May 31, 2022  
Page 3

AAC

cc: Mr. Eugene Hoffman  
Mr. Jeffrey Freund (via email)  
Mr. Frank Hill, Fiduciary Commissioner  
Ms. Jaqueline C. Shadle, Clerk of the County Commission, Jefferson County, West  
Virginia

---

### Circular 230 Notice

With respect to federal tax issues, no advice, statement or information contained in this communication is intended to be, or written for the purpose of being, (a) relied upon by a taxpayer as the exclusive basis to avoid penalties under the Internal Revenue Code, or (b) used in connection with the promotion, marketing or recommendation of any tax shelter product or tax shelter transaction.

Bowles Rice LLP  
101 S. Queen Street  
Martinsburg West Virginia 25401

---

USPS CERTIFIED MAIL



9214 8901 5729 4300 0079 60

---

WILLIAM H JUDY III ESQUIRE  
LAW OFFICES OF JUDY AND JUDY  
110 N. MAIN STREET  
PO BOX 636  
MOOREFIELD WV 26636-0636

EXHIBIT  
**K**

# Bowles Rice

Attorneys at Law

101 South Queen Street, Martinsburg, WV 25401  
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600 Quarrier Street  
Charleston, WV 25301

125 Granville Square, Suite 400  
Morgantown, WV 26501

501 Avery Street  
Parkersburg, WV 26101

Southpointe Town Center  
1800 Main Street, Suite 200  
Canonsburg, PA 15317

480 West Jubal Early Drive, Suite 130  
Winchester, VA 22601

March 7, 2022

bowlesrice.com

William H. Judy, III, Esquire  
Law Offices of Judy and Judy  
110 N. Main Street  
P.O. Box 636  
Moorefield, WV 26836

Re: Estates of Ellen Sherry Hoffman and Richard W. Accurso, deceased

Dear Mr. Judy:

I am writing to follow up on our December 7, 2021 phone conversation regarding the Estates of Ellen Sherry Hoffman and Richard W. Accurso. My client, the residual beneficiary of both Mr. Accurso's and Ms. Hoffman's estates, requests a more open line of communication regarding the administration of the estates and an update with regard to the status of the administration.

In your October 4, 2021 letter to me, you stated that you would provide the amended appraisements to me. However, you did not. I found that you filed an Amended 6.01 with regard to the Estate of Richard W. Accurso to the Office of the Clerk of the County Commission of Jefferson County, West Virginia and it was recorded on January 5, 2022 in Appraisal Book 37, at page 373. I have reviewed the Amended Appraisal and have a few questions and concerns.

In your October 4, 2021 letter, you stated that you agree that Ellen Sherry Hoffman is not a beneficiary of the last will of Richard W. Accurso, making Mr. Hoffman the sole residual beneficiary of his estate. However, in the Amended 6.01 you still list Ellen Sherry Hoffman as a beneficiary. It is necessary for you to again amend the Appraisal of the Estate of Richard Walter Accurso and remove Ms. Hoffman as a beneficiary of Mr. Accurso's estate.

I also notice that you accurately changed the answer to "Question J" to "yes," indicating that the Non-probate Inventory Form ET 6.02 will be required. Please send a copy of the completed 6.02 to me so that I may review it and share it with my client.

EXHIBIT  
L

# Bowles Rice

William H. Judy, III, Esquire

March 7, 2022

Page 2

Both Forms 6.01 for each of the referenced estates reference the property in Mendoza, Argentina. The Amended 6.01 still shows the use of multiple question marks with regard to the value of the property. Additionally, we understand that Ms. Hoffman and/or Mr. Accurso owned certain intellectual property (some registered trademarks) related to the Mendoza property. What efforts, if any, have you taken to investigate, marshal, secure and protect the value of that property and trademark for the beneficiary? In our phone conversation you stated that you did not plan to go to Argentina to investigate that property unless the estate paid for it. I would offer that with the technology and resources available today, there are other ways to find the necessary information. And, so there is no misunderstanding on this point, it would be a breach of your fiduciary duty as Executor to fail to take necessary and appropriate steps to value and protect these estate assets.

In our phone conversation, you stated that there was an estate sale, conducted by a third-party service, Leave It To Laura, LLC, in Shepherdstown, West Virginia, of much of the tangible personal property. The sale seemed to be held on the Leave It To Laura, LLC Facebook page, as well as in the Ricco Art Gallery storefront in Shepherdstown, West Virginia. Please advise me on what basis the estate sale was conducted. Specifically, was this sale arranged by you or your predecessor as part of the estate liquidation process or was it conducted pursuant to an arrangement made by Mr. Accurso and/or Ms. Hoffman prior to their death? If the latter, please provide me with a copy of the contract on which the sale was based.

In either case, while the Amended 6.01 does not reflect a change in value of the jewelry reported on the Appraisal, the value of the "household goods, clothing, personal objects" entry decreased significantly. Please provide the information on which you based this decrease in value. Is the decrease in value based on the sale of the items? I am surprised to see the decrease in the value of the tangible personal property. Based on the social media traffic and pictures provided by Leave It To Laura, LLC's social media pages, it appears that there was considerable inventory and a successful turnout. Please provide the inventory and the invoice and auction tickets from the third-party provider on the sale of the items. If all of the items were not liquidated, please inform me where the remaining items are being held for the benefit of the beneficiary?

Additionally, please provide a copy of all documentation that you reviewed in preparing the Appraisal for Mr. Accurso's estate, such as copies of bank account agreements and signature cards, beneficiary designations on accounts and policies, account statements reflecting date of death values, and transfers of assets during Mr. Accurso's life reportable on a Non-probate Inventory.

Since you have not filed an Amended Form 6.01 for the Estate of Ellen Sherry Hoffman, am I to assume that you accept the Appraisal filed by the previous Executor as an accurate representation of the assets of Ms. Hoffman's estate?

EXHIBIT  
L

## Bowles Rice

William H. Judy, III, Esquire

March 7, 2022

Page 3

With regard to the tangible personal property of Ms Hoffman's estate, Mr. Hoffman is aware of several items having sentimental value to his family that he would like confirmation are being held for his benefit in a secure location. One item of interest is a strand of pearls that originally belonged to Mr. Hoffman and Ms. Hoffman's mother. Additionally, Ms. Hoffman was in possession of other family heirlooms handmade by their mother. At one point the previous Executor agreed to make a video of the items in the home and share the video with my client. Do you know if this video was ever made? If so, please provide it.

You may know that Ms. Hoffman conducted contract work as an editor for various publishing companies. It is possible that her computer contains sensitive intellectual property for those publishers or of hers that needs to be protected. The previous Executor led my client to believe that someone else had access to Ms. Hoffman's computer. My client is concerned about the possible liabilities of the estate to the owner of any intellectual property on Ms. Hoffman's computer. My client would like to know that the computer and its contents are in your possession and secure.

Please provide a copy of all documentation that you reviewed in preparing the Appraisal for Ms. Hoffman's estate, such as copies of bank account agreements and signature cards, beneficiary designations on accounts and policies, account statements reflecting date of death values and transfers of assets during Ms. Hoffman's life reportable on a Non-probate Inventory.

With regard to the real property in Shepherdstown, in your October 4, 2021 letter, you state, "I have no reason to believe at this time that Ms. Hoffman was not competent when she executed the Power of Attorney. Therefore, I assume the Deed was executed at her direction." Based on the information you have provided to this point; we do not accept your determination that Ms. Hoffman was competent to sign the Power of Attorney and direct her agent to execute the deed. As previously explained, Ms. Hoffman signed the Power of Attorney on the day of her death and her agent subsequently signed the deed on the day of her death. If she was truly competent to execute the power of attorney, why direct the agent to execute the deed? Why not execute the deed herself? My understanding is that Ms. Hoffman was very ill and weak before her death. What investigation did you conduct and on what information did you rely to make your determination that she was in fact competent to execute the Power of Attorney and subsequently direct her agent to execute the deed? In light of these facts, simply assuming that she was competent to execute the power of attorney without engaging in an investigation on the question would not be consistent with your fiduciary obligations as executor.

As you are aware, my client previously requested much of this information from the previous Executor to no avail. My client was hopeful that you, as the new Executor, would be more diligent in your role as Executor of these estates. My client has been patient with the administration process. My client has proceeded through the proper channels to receive information. It is your duty as the Executor to communicate with the beneficiary, as well as marshal, secure, and protect the assets of the estate for the beneficiary. Accordingly, we ask that you promptly comply with my client's requests for this reasonable information regarding the

EXHIBIT  
L

# Bowles Rice

William H. Judy, III, Esquire

March 7, 2022

Page 4

administration of the estate and take all steps required to marshal and secure the assets for the benefit of the estates' beneficiaries.

Very truly yours,



Alison A. Cox  
Special Counsel

AAC

cc: Mr. Eugene Hoffman, Mr. Jeffrey Freund

---

### Circular 230 Notice

With respect to federal tax issues, no advice, statement or information contained in this communication is intended to be, or written for the purpose of being, (a) relied upon by a taxpayer as the exclusive basis to avoid penalties under the Internal Revenue Code, or (b) used in connection with the promotion, marketing or recommendation of any tax shelter product or tax shelter transaction.

# Bowles Rice

Attorneys at Law

101 South Queen Street, Martinsburg, WV 25401  
P.O. Drawer 1419, Martinsburg, WV 25402-1419  
304.263.0836

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Morgantown, WV 26501

501 Avery Street  
Parkerburg, WV 26101

Southpointe Town Center  
1800 Main Street, Suite 200  
Canonsburg, PA 15317

480 West Jubal Early Drive, Suite 130  
Winchester, VA 22601

July 22, 2022

bowlesrice.com

William H. Judy, III, Esquire  
Law Offices of Judy and Judy  
110 N. Main Street  
P.O. Box 636  
Moorefield, WV 26836

**CERTIFIED MAIL RETURN RECEIPT  
REQUESTED**

Re: Estates of Ellen Sherry Hoffman and Richard W. Accurso, deceased

Dear Mr. Judy:

I wrote to you on June 3, 2022 concerning the above estates. In that letter, I asked again for the information I previously requested in my December 7, 2021 telephone conversation with you and in my March 7, 2022 letter, as well as requesting some additional information concerning the estates. I also provided you with a method to begin collecting information concerning the estate assets in Mendoza, Argentina.

It is now the end of July. I have not received a response to my letter. Mr. Freund, the person who can provide you with help on obtaining information about the Mendoza assets, has not heard from you. Further, I have seen no additional filings in the Office of the Clerk of the County Commission of Jefferson County, West Virginia regarding these estates.

Your failure to respond to the beneficiary's inquiries and your inaction to properly marshal the estate assets is not consistent with your fiduciary obligations. If you do not wish or intend to carry out those obligations, please notify me at once so we can take steps to replace you with an executor who will properly perform the fiduciary duties of the executor. If you do intend to remain as the executor, please respond substantively to the questions posed in our December telephone call and my March and June letters, a copy of which are attached.

**EXHIBIT  
M**

# Bowles Rice

William H. Judy, III, Esquire  
July 21, 2022  
Page 2

Very truly yours,



Alison A. Cox  
Special Counsel

Enclosures

AAC

cc: Mr. Eugene Hoffman (via email)  
Mr. Jeffrey Freund (via email)  
Mr. Frank Hill, Fiduciary Commissioner  
Ms. Jaqueline C. Shadle, Clerk of the County Commission, Jefferson County, West  
Virginia

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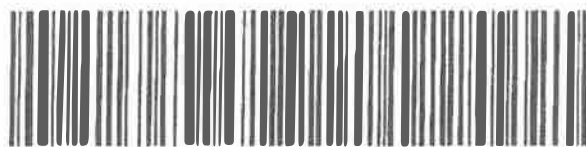
### Circular 230 Notice

With respect to federal tax issues, no advice, statement or information contained in this communication is intended to be, or written for the purpose of being, (a) relied upon by a taxpayer as the exclusive basis to avoid penalties under the Internal Revenue Code, or (b) used in connection with the promotion, marketing or recommendation of any tax shelter product or tax shelter transaction.

Bowles Rice LLP  
101 S. Queen Street  
Martinsburg West Virginia 25401

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USPS CERTIFIED MAIL



9214 8901 5729 4300 0085 54

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WILLIAM H JUDY III ESQUIRE  
LAW OFFICES OF JUDY AND JUDY  
110 N. MAIN STREET  
PO BOX 636  
MOOREFIELD WV 26836-0636

EXHIBIT  
M

# Bowles Rice

Attorneys at Law

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601 Avery Street  
Parkersburg, WV 26101

Southpointe Town Center  
1800 Main Street, Suite 200  
Canonsburg, PA 15317

480 West Jubal Early Drive, Suite 130  
Winchester, VA 22801

October 18, 2022

bowlesrice.com

William H. Judy, III, Esquire  
Law Offices of Judy and Judy  
110 N. Main Street  
P.O. Box 636  
Moorefield, WV 26836

Re: Estates of Ellen Sherry Hoffman and Richard W. Accurso, deceased

Dear Mr. Judy:

Between March 7, 2022 and today, following a single telephone conversation with you on December 7, 2021, I have written you three letters on behalf of my client, Eugene Hoffman, a beneficiary of the estates of his sister (Ellen Sherry Hoffman) and her husband (Richard W. Accurso). Copies are attached. I will not restate their contents; the letters speak for themselves. You have not answered any of them. I ask you again to please provide me the answers to the questions in those letters.

While you have not answered my letters or complied with my request for the Form ET 6.02 for both the estates of Richard W. Accurso, deceased and Ellen Sherry Hoffman, deceased, you did file an Amended Appraisal of the Estate (Form ET 6.01) for Ms. Hoffman's estate. That Amended Appraisal raises three issues:

1. You indicate on the Form ET 6.01 that the Estate will not be required to file a Non-probate Inventory Form 6.02 (Part 1, Question J). However, an earlier Form ET 6.01 filed by Mr. Camilletti reflected an asset of \$330,000, that was described to be "Fidelity Investments." This asset was not listed on the Amended Form ET 6.01. If you deleted that asset from the amended Form ET 6.01 because it was an investment account, a qualified retirement account or some other type of account with a named beneficiary, that account should be treated as a non-probate asset reportable on an Inventory of the Estate (Form ET 6.02). And if the asset is reported on the Form ET 6.02, then the answer to Question J should have been "yes." In light of the above:

EXHIBIT  
N

# Bowles Rice

William H. Judy, III, Esquire

October 18, 2022

Page 2

- a. Please report as to the nature of the referenced asset in the prior Appraisal and whether it passed by its terms to a designated beneficiary or a joint owner.
  - b. If it passed by its terms to a designated beneficiary or a joint owner, please provide the completed Form ET 6.02 showing the value of the asset, to whom the asset passed upon Ms. Hoffman's death, and the relationship of that person to Ms. Hoffman.
  - c. If the account is not an investment account, qualified retirement plan, or some other type of account passing by designated beneficiary, please explain why it is not listed on the Amended Form ET 6.01.
2. I assume you left blank Part 4 Question 1 because of the Deed purportedly executed by Ms. Hoffman, through Judy Jones acting under a power of attorney, on the day of Ms. Hoffman's death.
  - a. Assuming, arguendo, that the transfer was proper, it was clearly a transfer without adequate consideration within three years of Ms. Hoffman's death. Accordingly, the answer to Question 1 of Part 2 should have been "Yes." Please amend the Form ET 6.01 accordingly.
  - b. Of course, there is a more substantive question concerning that transfer. I have already advised you that I have concerns about it and have asked you to investigate the circumstances surrounding it. I reiterate that request, particularly since the purported transfer was facilitated in multiple respects by your predecessor, who has recently been disciplined by the West Virginia Judicial Disciplinary Council based on complaints concerning his unprofessional conduct filed in close temporal proximity to Ms. Hoffman's death.
3. The Amended Form ET 6.01 makes no reference to the property in Mendoza Argentina in which, I understand, Ms. Hoffman had an interest. It remains listed on the Amended Form 6.01 of Mr. Accurso's estate. I previously provided you with contact information so that you can begin the process of valuing that property for the benefit of the estates and their beneficiaries. You appear to have done nothing in that regard. Without an explanation, your failure to have taken any action in that regard, as evidenced by the absence of any reference to that property on the Amended Form ET 6.01, is a breach of your fiduciary obligations. I repeat my demand that you begin immediately to marshal that asset and to further amend the Form ET 6.01 to reflect its inclusion in the estate.

Finally, I wish to reiterate what I advised you in my June 3, 2022 letter – my client will not consent to, and will specifically oppose, any request you may make for an extension of time to file accountings for the two estates. By copy of this letter to the Fiduciary

EXHIBIT  
N

# Bowles Rice

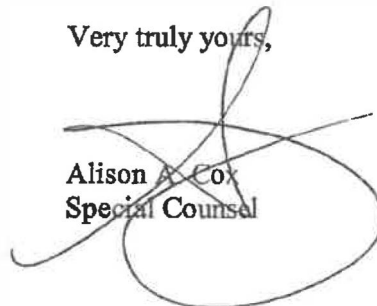
William H. Judy, III, Esquire

October 18, 2022

Page 3

Commissioner, we are putting that objection on the record. Notwithstanding that, we again ask you to advise the Fiduciary Commissioner of our position should you request such an extension.

Very truly yours,



Alison A. Cox  
Special Counsel

Enclosures

AAC

cc: Mr. Eugene Hoffman (via email)  
Mr. Jeffrey Freund (via email)  
Mr. Frank Hill, Fiduciary Commissioner  
Ms. Jaqueline C. Shadle, Clerk of the County Commission, Jefferson County, West Virginia



**AGENDA REQUEST FORM**  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: **Laura Kuhn**

Department or Organization: **Fleet & Facilities Management**

Estimation of amount of time needed for appointment: **10 minutes**

Date Requested – 1<sup>st</sup> Choice: **3/2/23**

*If a specific date is needed, please provide reason for specific date:*

Date Requested – 2<sup>nd</sup> Choice:

Subject (*Wording to be placed on agenda*): **Request for Approval to Advertise and Interview to Fill Vacant Custodial Position**

Please provide the County Commission with a description of your request or presentation, including any background information: **A custodian has given notice that he has accepted a new position and will be resigning sometime mid-March to April. The exact date has not been determined. I would like to begin the process to advertise and interview for the position in order to have someone in place as soon as possible. Being short one custodian seriously affects the services that we can provide.**

Is this a funding request? Y/N NO – Budget Neutral

If so, how much? \$

Provide exact financial impact/request:

Recommended motion (*Please type out the wording of the motion that you would like the Commission to approve*):

**Motion to authorize proceeding with the advertising and interview process to fill the upcoming vacant custodial position.**

Attach supporting documents for request, or request may be denied.

If not attached, explain:

Is equipment needed? Projector  Y/N Internet/Wi Fi  Y/N Telephone for conference call  Y/N

Contact information:

Email address: [LKuhn@jeffersoncountywv.org](mailto:LKuhn@jeffersoncountywv.org)

Phone Number: 304-728-3355

**FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/RECOMMENDATION**

not applicable

**Jefferson County  
Job Description**

<b>Position Title:</b>	Custodian	<b>Grade Level:</b>	II
<b>Department</b>	Fleet & Facilities Management	<b>Date:</b>	2/15/2023
<b>Reports to:</b>	Director of Fleet & Facilities	<b>FLSA Status</b>	NE

**Statement of Duties:** The employee is responsible for the cleanliness, orderliness and proper appearance of the County facilities assigned. Employee is required to perform all similar or related duties.

**Supervision Required:** Under general supervision of the Director of Fleet & Facilities, the employee is familiar with the work routine and uses initiative in carrying out recurring assignments independently with specific instruction. The supervisor provides additional, specific instruction for new, difficult or unusual assignments, including suggested work methods. The employee is expected to recognize instances which are out of the ordinary and which do not fall within existing instructions; the employee is then expected to seek advice and further instructions. Reviews and checks of the employee's work are applied to an extent sufficient to keep the supervisor aware of progress, and to insure that completed work and methods used are technically accurate and that instructions are being followed.

**Supervisor Responsibility:** Employee, as a regular and continuing part of the job, does not supervise other employees.

**Confidentiality:** Employee does not have access to confidential information.

**Accountability:** Consequences of errors, missed deadlines or poor judgment may include adverse public relations.

**Judgment:** Numerous standardized practices, procedures, or general instructions govern the work and in some cases, may require additional interpretation. Judgment is needed to locate, select, and apply the most pertinent practice, procedure, regulation or guideline.

**Complexity:** The work consists of a variety of duties which generally follow standardized practices, procedures, regulations or guidelines. The sequence of work and/or the procedures followed vary according to the nature of the transaction and/or the information involved, or sought, in a particular situation.

**Work Environment:** The work environment involves everyday discomforts typical of offices with occasional exposure to outside elements. Noise or physical surroundings may be distracting, but conditions are generally not unpleasant. Employee may be required to work beyond normal business hours

**Nature and Purpose of Public Contact:** Relationships are primarily with co-workers incidental to the purpose of the work involving giving and receiving factual information about the work. Ordinary courtesy and tact are required. Contacts with the public may be required on an occasional basis.

**Occupational Risk:** Working conditions involve occasional exposure to unpleasant elements such as odors, chemical fumes, heat, or cold. Work may involve general cleaning, occasional work at heights or in confined or cramped quarters, or work around machinery and its moving parts. Work may also involve occasional mental stress, such as completing several unrelated tasks within a relatively short period of time.

Fleet & Facilities  
Custodian  
2/15/2023

## Jefferson County Job Description

### **Essential Functions:**

*The essential functions or duties listed below are intended only as illustrations of the various type of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related, or a logical assignment to the position.*

1. Clean County buildings, including but not limited to disinfecting, sweeping, scrubbing, mopping, waxing and/or buffing floors, vacuuming and shampooing carpets, cleaning surfaces and baseboards, polishing glass, furniture, fixtures and woodwork, washing windows and emptying and cleaning garbage receptacles.
2. Clean and maintain bathrooms, toilets, showers, locker rooms and fixtures and ensure all bathroom necessities are provided.
3. Ensures the appropriate inventory of supplies.
4. Work alone, or as a member of the Fleet & Facilities team, to ensure smooth operations and satisfaction of departments served by the Department of Fleet & Facilities Management.
5. Ensures that safety is maintained at all times on the interior/exterior of the buildings for which responsible.
6. Maintains an awareness of maintenance deficiencies and corrects and/or reports such deficiencies to the Director of Fleet & Facilities.
7. Responds to emergencies at any time.
8. Promotes positive relationships with other departments and the public.
9. Refer all instructions from other departments and/or requests for assistance to the Director of Fleet & Facilities or office staff.

### **Recommended Minimum Qualifications:**

**Education and Experience:** High School degree or equivalent with one to three (1-3) years related work experience; or any equivalent combination of education, training and experience which provides the required knowledge, skills and abilities to perform the essential functions of the job.

**Special Requirements:** A valid driver's license is required for this position. Must pass a background check.

### **Knowledge, Abilities and Skill**

**Knowledge:** Common policies, practices and procedures of the department and building maintenance. Working knowledge of the safety precautions, supplies and materials needed to perform duties.

**Abilities:** Work independently and be self-motivated.

**Skills:** Efficient and thorough cleaning and maintenance of buildings and grounds, and attention to detail.

## Jefferson County Job Description

### **Physical and Mental Requirements**

*The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the position's essential functions.*

**Physical Demands:** Work requires some agility and physical strength, such as standing or walking most of the work period. Occasionally, work may require lifting heavy objects and carrying them. There may be a need to stretch and reach to retrieve materials. Usually, the work will require extended physical effort over a significant portion of the work day.

**Motor Skills:** Duties may require assignments requiring application of hand and eye coordination with finger dexterity and motor coordination for activities such as sweeping, scrubbing, cleaning, and moving objects.

**Visual Demands:** Visual demands include reading documents for general understanding.

**AGENDA REQUEST FORM**  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: **Jeffrey Polczynski, Director of Communications**

Department or Organization: **Emergency Communications Center – Dept 712**

Estimation of amount of time needed for appointment: **3 Minutes**

Date Requested – 1<sup>st</sup> Choice: **March 2, 2023**

*If a specific date is needed, please provide reason for specific date: **Timing in regards to coordinating onboarding of employees***

Date Requested – 2<sup>nd</sup> Choice:

Subject (*Wording to be placed on agenda*): **Appointment Request – CAD Administrator**

Please provide the County Commission with a description of your request or presentation, including any background information:

**The purpose of this agenda item is to request permission to appoint an individual to fill the vacancy of CAD Administrator for the Emergency Communications Center.**

Is this a funding request? Y/N

If so, how much? \$

Provide exact financial impact/request:

Recommended motion (*Please type out the wording of the motion that you would like the Commission to approve*):

***“Motion to approve the appointment of Damien Hart as the CAD Administrator at the hourly rate of \$29.8077 (62,000/year) with a starting date of March 20, 2023.*”**

Attach supporting documents for request, or request may be denied.

If not attached, explain:

Is equipment needed? Projector **Y/N** Internet/Wi Fi **Y/N** Telephone for conference call **NO**

Contact information: **Jeffrey Polczynski**

Email address: [jpolczynski@jeffersoncountywv.org](mailto:jpolczynski@jeffersoncountywv.org)

Phone Number: 304-728-3317

FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/RECOMMENDATION

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**AGENDA REQUEST FORM**  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: **Jeffrey Polczynski, Director of Communications**

Department or Organization: **Emergency Communications Center – Dept 712**

Estimation of amount of time needed for appointment: **5 Minutes**

Date Requested – 1<sup>st</sup> Choice: **March 2, 2023**

*If a specific date is needed, please provide reason for specific date: **Timing in regards to coordinating onboarding of employees***

Date Requested – 2<sup>nd</sup> Choice:

Subject (*Wording to be placed on agenda*): **Appointment Request – Full-Time Public Safety Dispatchers (Trainee)**

Please provide the County Commission with a description of your request or presentation, including any background information:  
**The purpose of this agenda item is to request permission to appoint two individuals to fill vacancies in the staffing at the Emergency Communications Center.**

Is this a funding request?    Y/N

If so, how much?            \$

Provide exact financial impact/request:

Recommended motion (*Please type out the wording of the motion that you would like the Commission to approve*):

***“Motion to approve the appointment of Brittany Moore as a Public Safety Dispatcher (Trainee) at the hourly rate of \$22.2422 (46,347/year) with the Training Incentive/Signing Bonus of \$2,000 and the post-training salary increase once full training is complete.”***

***“Motion to approve the appointment of Bethani Mummert as a Public Safety Dispatcher (Trainee) at the hourly rate of \$24.0875 (50,101.96/year) with the Training Incentive/Signing Bonus of \$2,000.***

Attach supporting documents for request, or request may be denied.

If not attached, explain:

Is equipment needed?    Projector    **Y/N**    Internet/Wi Fi    **Y/N**    Telephone for conference call    **NO**

Contact information: **Jeffrey Polczynski**

Email address: [jpolczynski@jeffersoncountywv.org](mailto:jpolczynski@jeffersoncountywv.org)

Phone Number: 304-728-3317

FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/RECOMMENDATION

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**AGENDA REQUEST FORM**  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: **Jeffrey Polczynski, Director of Communications**

Department or Organization: **Emergency Communications Center – Dept 712**

Estimation of amount of time needed for appointment: **3 Minutes**

Date Requested – 1<sup>st</sup> Choice: **March 2, 2023**

*If a specific date is needed, please provide reason for specific date: **Budget timing***

Date Requested – 2<sup>nd</sup> Choice:

Subject (*Wording to be placed on agenda*): **“Signing Bonus / Training Incentive Program”**

Please provide the County Commission with a description of your request or presentation, including any background information:

**The purpose of this agenda item is to provide information regarding the “signing bonus” program that was approved by Commission on October 15, 2022**

Is this a funding request? **Y/N**

If so, how much? **\$**

Provide exact financial impact/request: **No Change in Department Budget**

Recommended motion (*Please type out the wording of the motion that you would like the Commission to approve*):

**“Motion to acknowledge and approve the changes recommended by staff for the framework of the “Signing Bonus / Training Incentive” program at the Emergency Communications Center.”**

Attach supporting documents for request, or request may be denied.

If not attached, explain:

Is equipment needed?      Projector **Y/N**      Internet/Wi Fi **Y/N**      Telephone for conference call **NO**

Contact information: **Jeffrey Polczynski**

Email address: [jpolczynski@jeffersoncountywv.org](mailto:jpolczynski@jeffersoncountywv.org)

Phone Number: **304-728-3317**

FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/RECOMMENDATION

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# Jefferson County Emergency Communications TRAINING COMPLETION INCENTIVE AGREEMENT

I, "**[Enter Candidate's Name]**", ("I" or "Employee") understand that Jefferson County Emergency Communications (ECC) will be furnishing me with significant training opportunities in my new position as a Public Safety Dispatcher. In view of my receiving this training, I and Jefferson County Emergency Communications ("Employer") agree as follows:

1. I wish to acquire the skills of a Public Safety Dispatcher by participating in a program of training under the supervision of my employer. The program is a formal training program and its duration will vary according to my progress. I understand that I am responsible for actively participating in my training and that I will be a probationary employee set forth in the "Offer of Employment" agreement where my work will be monitored and where I may receive additional guidance or instruction. I understand that I must reach each of the three benchmarks as described in this agreement in order to receive the full incentive of \$2,000.00 (two thousand dollars).
2. Benchmark #1 will be considered at the completion of the initial phase of training. The initial phase of training will consist of classroom driven training under the guidance of a certified training officer and is titled "Law/Calltaking Dispatch Academy". At the conclusion of the classroom training, Employer will pay me a fringe benefit payment known as "Law/Calltaking Dispatch Academy Completion" of the amount of \$500.00 (five hundred dollars). This benchmark payment will occur in the next pay period following the completion of the classroom academy training.
3. Benchmark #2 will be defined as the successful sign-off of the two initial phases of training (LAW dispatching and Calltaking) whereby allowing employee to work without CTO supervision as an employee that can satisfy the minimum staffing requirement in the ECC. I understand that Employer will pay me a fringe benefit payment known as "Law and Calltaking Sign-Off" for the amount of \$1000.00 (one thousand dollars). This benchmark payment will occur in the next pay period following the completion of my sign-off of LAW dispatching and Calltaking training.
4. Benchmark #3 will be defined as the completion of twenty-four (24) months of employment from initial start date. I understand that Employer will pay me a fringe benefit payment known as "Completion of 24 months" for the remaining amount of \$500.00 (five hundred dollars). This benchmark payment will occur in the next pay period following the completion of my 24 months of employment.
5. I understand that I will receive my agreed base pay throughout the benchmark period.

6. I understand and agree the training completion incentive is an additional fringe benefit within the meaning of W.V. Code §21-5-1. I further understand and agree that I am entitled to the training completion incentive only upon 1) successfully completing all benchmarks as defined in this agreement; 2) remaining a full-time employee in good standing throughout each benchmark period, after each period, the fringe benefit payment shall be paid to me. I also understand and agree that, if I do not successfully complete each benchmark, I will not be entitled to that and any further portion of the fringe benefit.
7. I understand and agree the payment of the training completion fringe benefit is taxable compensation to me and will be subject to all normal wage withholding at the time the payment is made to me resulting in an amount paid to me of less than the \$2,000.00 face amount.
8. I understand that nothing in this Agreement provides me contractual rights to employment by Employer for a specified time. I also understand I remain an at-will employee of Employer both during and (if successful) after the formal training and period of probationary supervision.
9. This Agreement contains the entire agreement between the parties on this subject and supersedes all prior agreements or understandings on this subject. This Agreement can be modified only by a writing signed by both parties. The parties agree that this agreement shall be construed under the laws of the State of West Virginia, and that any unresolved disputes about this agreement shall be determined in the appropriate Court in Jefferson County, West Virginia.

AGREED by the Parties:

*Jefferson County Emergency Communications*

**"[Enter Director's Name]"**

Director of Communications

\_\_\_\_\_  
Signature

Dated: \_\_\_\_\_

I agree to be bound by the provisions of this document, which agreement includes consent to the payroll deduction provisions as stated above.

**"[Enter Candidate's Name]"**

Employee

\_\_\_\_\_  
Signature

Dated: \_\_\_\_\_

AGENDA REQUEST FORM  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: Roger Goodwin

Department or Organization: Engineering

Estimation of amount of time needed for appointment: 5 minutes

Date Requested – 1<sup>st</sup> Choice: March 2, 2023

*if a specific date is needed, please provide reason for specific date:* Click here to enter text.

Date Requested – 2<sup>nd</sup> Choice: Click here to enter text.

Subject (*Wording to be placed on agenda*): Release of the \$10,000.00 site stability bond/Tolling of Bond Agreement for Beallair Homes, LLC, for the Beallair Subdivision, Phase 2, Lots 50-133 & Residue A (File #05-41).

Please provide the County Commission with a description of your request or presentation, including any background information: This request is for a complete release of the \$10,000.00 site stability bond/Tolling of Bond Agreement for Beallair Homes, LLC, for the Beallair Subdivision, Phase 2, Lots 50-133 & Residue A (File #05-41) which is secured by Cash-in-Escrow with the Bank of Charles Town, Charles Town, WV..

Is this a funding request? Y/NO

If so, how much? \$Click here to enter text.

Recommended motion (*Please type out the wording of the motion that you would like the Commission to approve*): Move to authorize a complete release of the remaining funds being held in Cash-in-Escrow Account #3211479 with the Bank of Charles Town as security for the site stability bond/Tolling of Bond Agreement for Beallair Homes, LLC., for the Beallair Subdivision, Phase 2, Lots 50-133, & Residue A (File #05-41).

Attach supporting documents for request, or request may be denied:

Escrow Release Letter

Site Location Map

Is equipment needed? Projector Y/NO Internet/Wi Fi Y/NO Telephone for conference call Y/NO

Contact information:

Email address: [engineering@jeffersoncountywv.org](mailto:engineering@jeffersoncountywv.org) Phone Number: 304-728-3257

**FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/COMMENTS**

Click here to enter text.



## JEFFERSON COUNTY COMMISSION

124 East Washington Street, P.O. Box 250, Charles Town, WV 25414

Phone: (304) 728-3284 Fax: (304) 725-7916

Web: [www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)

PRESIDENT

*Steve Stolipher*

VICE PRESIDENT

*Clare Ath*

March 2, 2023

COMMISSIONER

*Tricia Jackson*

Ms. Alice Frazier, President

Bank of Charles Town

111 E. Washington Street

Charles Town, WV 25414

COMMISSIONER

*Jennifer Krouse*

COMMISSIONER

*Jane Tabb*

RE: Cash-in-Escrow Account #3211479 for Beallair Homes, LLC - Beallair Subdivision,  
Phase 2 Site Stability Bond.

Dear Ms. Frazier:

The Jefferson County Commission authorizes a complete release of the funds being held in Cash-in-Escrow account #3211479 for the site stability bond/Tolling of Bonding Agreement for Beallair Homes, LLC – Beallair Subdivision, Phase 2, Lots 50-133 & Residue Parcel A (File #05-41). This project is located on the east side of Old Country Club Road (Route 24) adjacent to the CSX Railroad and the Sleepy Hollow Golf Course.

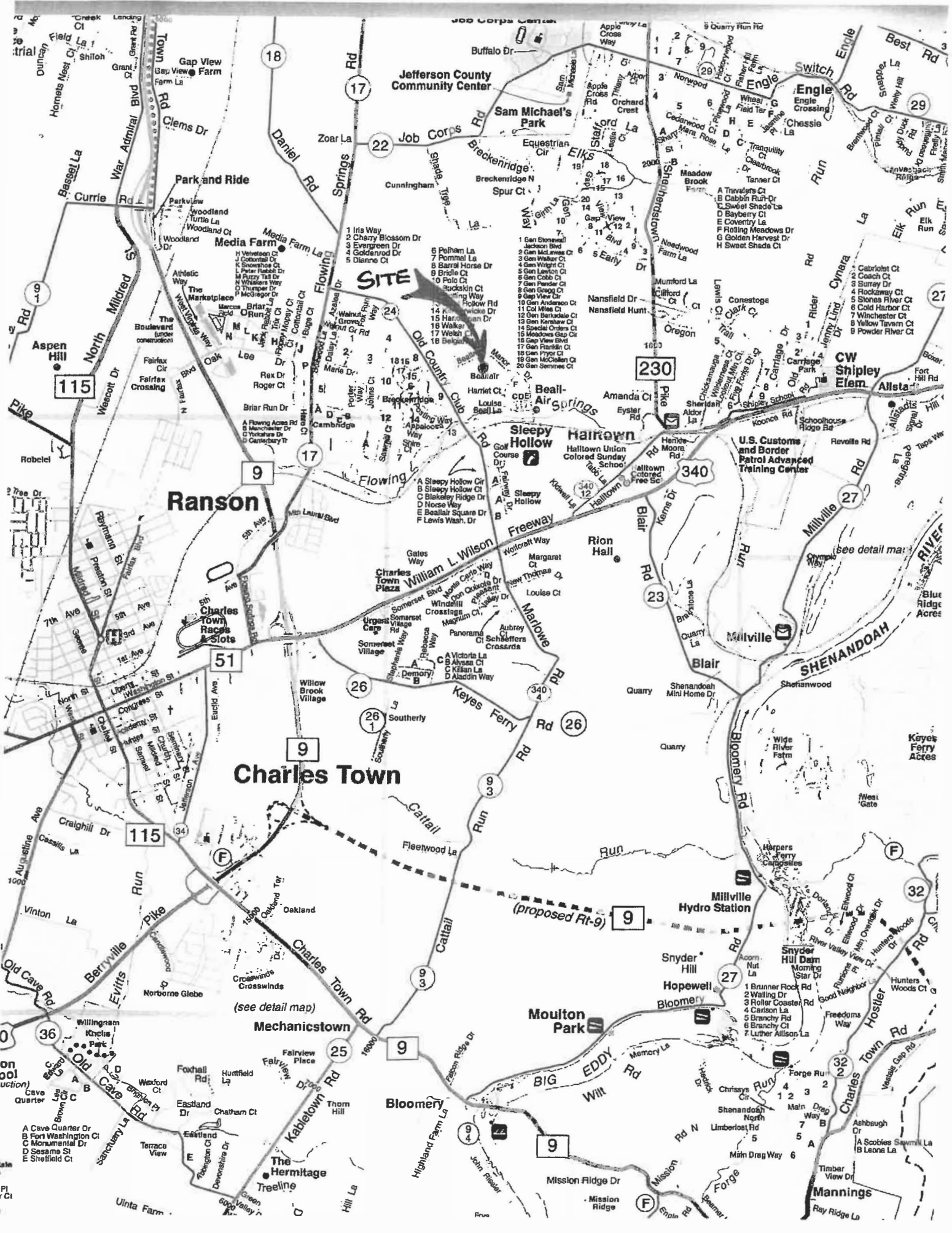
In summary, you are hereby authorized to fully release the above referenced Cash-in-Escrow account, originally issued in the amount of \$10,000.00. Please contact the Jefferson County Department of Engineering at (304)-728-3257 if you have any questions.

Sincerely,

Steve Stolipher, President  
Jefferson County Commission

SS:rfb

cc: Beallair Homes, LLC



Jefferson County Community Center

Sam Michael's Park

**SITE**

**Ranson**

**Charles Town**

Mechanicstown

Moulton Park

Bloomery

Millville Hydro Station

Snyder Hill

Hopewell

Bloomery

Charles Town

Hostler

Mannings

Ray Ridge La

- A Cave Quarter Dr
- B Fort Washington Ct
- C Monumental Dr
- D Sesame St
- E Sheffield Ct

- 1 Brunner Rock Rd
- 2 Walling Dr
- 3 Roller Coaster Rd
- 4 Carlson Rd
- 5 Branchy Rd
- 6 Branchy Ct
- 7 Luther Allison La

Scale

Blue Ridge Acres

Keyes Ferry Acres

West Gate

Hunters Woods Ct

Good Neighbor

Forge Run

Forge Run

Forge Run

Forge Run

Forge Run

Forge Run

Forge Run

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Forge Run

Forge Run

Forge Run

**AGENDA REQUEST FORM**  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



**Name: Roger Goodwin, Chief County Engineer**

**Department or Organization: Department of Engineering, Planning & Zoning**

**Estimation of amount of time needed for appointment: 10 minutes**

**Date Requested – 1<sup>st</sup> Choice: March 2, 2023**

**Date Requested – 2<sup>nd</sup> Choice: March 16, 2023**

**Subject (*Wording to be placed on agenda*): Request Approval of Employment Offer to Fill the Position of Planning Clerk in the Department of Engineering, Planning & Zoning.**

Please provide the County Commission with a description of your request or presentation, including any background information:

**The Director of Engineering, Planning & Zoning is requesting approval of employment offer to fill the position of Planning Clerk in the Department of Engineering, Planning & Zoning. The position has been vacant since January 6, 2023. The position is critical to the mission of the Office of Planning & Zoning, especially with helping with the 2045 Comprehensive Plan update.**

**The position was advertised, resumes and applications received and reviewed, interviews conducted, and a qualified person selected for the position.**

**The current budgeted salary amount is 37,650/year. The proposed action is an FY 2023 budget neutral action. No additional funding is needed.**

Is this a funding request? **No; funding is already provided in the FY 2023 Engineering, Planning & Zoning Department budget.**

If so, how much?

Motion Requested: **Yes**

Recommended motion (*Please type out the wording of the motion that you would like the Commission to approve*):

**Move to approve the offer of employment, at \$37,650 per year, to fill the position of Planning Clerk in the Department of Engineering, Planning & Zoning.**

Attach supporting documents for request, or request may be denied.

If not attached, explain: **N/A**

Is equipment needed? Projector Y/N **No** Internet/Wi Fi Y/N **No** Telephone for conference call Y/N **No**

Contact information:

Email address: [engineering@jeffersoncountywv.org](mailto:engineering@jeffersoncountywv.org) Phone Number: 304-728-3257

<u>FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/COMMENTS</u>

**Jefferson County, West Virginia  
Planning Clerk - Job Description**

<b>Position Title:</b>	Planning Clerk (Planning)	<b>Grade Level:</b>	III
<b>Department</b>	Office of Engineering, Planning & Zoning	<b>Date:</b>	July 1, 2016 Rev: 01/09/23
<b>Reports to:</b>	Deputy Director	<b>FLSA Status</b>	Non-Exempt

**Statement of Duties:** The employee performs administrative support including research and data collection; as well as provides clerical services in support of the daily operations of the Office of Planning within the Department of Engineering, Planning and Zoning Department. Employee is required to perform all similar or related duties as assigned.

**Supervision Required:** Under general supervision of the Chief County Planner, the employee is familiar with the work routine and uses initiative in carrying out recurring assignments independently with specific instruction. The Chief County Planner provides instruction for new or unusual assignments. Unusual situations are referred to the Chief County Planner for advice and further instructions. The Chief County Planner reviews work to remain aware of progress, work methods, and technical accuracy. In many cases, the work is self-checking, for example, managing Planning Commission applications and preparing draft meeting documents including agendas, staff reports, and meeting minutes.

**Supervisory Responsibility:** Employee, as a regular continuing part of the job, does not regularly supervise other employees.

**Confidentiality:** Employee has access to some confidential information obtained during performance of essential functions, where the effect of any disclosure would probably be negligible or where the full significance of the overall confidential matter would not be apparent in the work performed.

**Accountability:** Consequences of errors, missed deadlines or poor judgment may include time loss, adverse public relations, monetary loss, labor/material loss, jeopardize programs and legal repercussions.

**Judgment:** Numerous standardized practices, procedures, or general instructions govern the work and in some cases, may require additional interpretation. Judgment is needed to locate, select, and apply the most pertinent practice, procedure, regulation or guideline.

**Complexity:** The work consists of a variety of duties which generally follow standardized practices, procedures, regulations or guidelines. The sequence of work and/or the procedures followed vary according to the nature of the transaction and/or the information involved, or sought, in a particular situation.

**Work Environment:** Typical indoor environment/office setting. Noise or physical surroundings may be distracting, but conditions are generally not unpleasant. Employee will be required to work beyond normal business hours to attend evening meetings.

**Nature and Purpose of Personal Contact:** Relationships are primarily with co-workers and the public involving frequent explanation, discussion or interpretation of practices, procedures, regulations or guidelines in order to render service, plan or coordinate work efforts, or resolve operating problems. Other regular contacts are with service recipients and employees of outside organizations such as vendors, banks and/or developers/ contractors. More than ordinary courtesy, tact, and diplomacy may be required to resolve complaints or deal with uncooperative or uninformed persons. Employee may furnish news media with routine information such as meeting agendas, press releases or departmental procedures.

**Occupational Risk:** Duties of the job present little potential for injury. Risk exposure is similar to that found in typical office settings.

**Jefferson County, West Virginia**  
**Planning Clerk - Job Description**

**Essential Functions:**

*The essential functions or duties listed below are intended only as illustrations of the various type of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related, or a logical assignment to the position.*

1. Assist with administrative functions in support of the Office of Planning and Zoning including research and data gathering through the utilization and management of an online content management program (MyPermitNow) and an excel database.
2. Support the Chief County Planner by conducting data collection and analysis functions for planning related projects, as well as managing project deadlines. Strong time management skills is critical.
3. Prepare Planning Commission documents including meeting agendas and staff reports. Additional duties include preparing correspondence with the public as well as developers (e.g. land surveyors, engineers, and consultants). Additional duties include assembling and distributing agenda packets, attending at least one evening meeting a month, and additional evening meetings as needed.
4. Provide Clerical support to the Planning Commission in the capacity of Recording Secretary, with duties to include but not limited to attending evening meetings, setting up meeting room, managing audio/video recordings of meetings, managing virtual meeting room (e.g. ZOOM meetings), take meeting notes and draft meeting minutes.
5. Prepare Legal Advertisements for each Planning Commission project file in accordance with State Law, Subdivision Regulations, and/or policy standards; prepare and post Notice of Public Hearings to County's website, distribute through the County's email alerts system, and send to additional Governmental Agencies as needed.
6. Serve as the primary customer service personnel interacting with members of the public, applicants, and customers addressing questions concerning the Subdivision Regulations and Zoning Ordinance, as well as managing application submissions and review workflow.
7. Accept and process new application data into a digital content management software program (including fee collection); and manage resubmittals of applications into content management system.
8. Manage digital workflow including distribution of project data and tasks to pertinent review staff, collection of review comments, and generation of summary review reports for distribution to applicants within prescribed time frames.
9. Provide primary telephone coverage and public inquiries, referring calls to professional staff as necessary.
10. Produce accurate and complete documents to the Chief County Planner to review and approve. Proof-read documents to identify grammar and spelling errors.
11. Complete professional development training to improve skills.
12. Willingness to cross-train as a temporary fill-in for other positions in the office when deemed necessary by the Deputy Director, the Chief County Planner, and/or the Office Manager.
13. Willingness to take on additional duties as needed in support of Departmental and County goals and objectives.

**Jefferson County, West Virginia  
Planning Clerk - Job Description**

**Recommended Minimum Qualifications:**

**Education and Experience:** High School degree with one to three (1-3) years related work experience; or any equivalent combination of education, training and experience which provides the required knowledge, skills and abilities to perform the essential functions of the job.

**Special Requirements:** Driver's license may be required.

**Knowledge, Abilities and Skill**

**Knowledge:** Common policies, practices and procedures of the department and office operations; laws and regulations pertinent to position functions.

**Abilities:** Use good judgment and decision making abilities, prioritize tasks and work independently with minimum supervision, and follow established office policies. Ability to communicate professionally with people of diverse backgrounds and levels of education is required.

**Skills:** Proficiency in utilizing Microsoft Office Programs including Word, Outlook Email, Excel, and PowerPoint. Proficiency in Adobe Pro (e.g. ability to prepare and assemble PDF documents). Basic computer literacy, including working knowledge of how to navigate the World Wide Web and strong typing skills. Must possess strong written and verbal communication skills; strong organizational skills including record keeping and time management; and effective customer service skills.

**Physical and Mental Requirements**

*The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the position's essential functions.*

**Physical Demands:** Little or no physical demands are required to perform the work. Work effort principally involves sitting to perform work tasks, with intermittent periods of stooping, walking, and standing. There may also be some occasional lifting of objects such as books, office equipment and computer paper (up to 30lbs).

**Motor Skills:** Duties are largely mental rather than physical, but the job may occasionally require minimal motor skills for activities such as moving objects, operating a telephone system, computer and/or most other office equipment, typing and/or word processing, filing, and sorting.

**Visual Demands:** Visual demands require the employee to constantly read documents for general understanding and for analytical purposes.

**AGENDA REQUEST FORM**  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: **Russell Burgess**

Department or Organization: **Information Technology**

Estimation of amount of time needed for appointment: **15 minutes**

Date Requested – 1<sup>st</sup> Choice: **March 2, 2023**

*If a specific date is needed, please provide reason for specific date:*

Date Requested – 2<sup>nd</sup> Choice:

Subject (*Wording to be placed on agenda*): **CGI Video Project for Jefferson County, WV**

Please provide the County Commission with a description of your request or presentation, including any background information:

- **Jefferson County originally joined the CGI Video Project for Jefferson County, WV as part of the West Virginia Association of Counties promoting tourism in West Virginia. Requesting permission to update this project and add it to our County Website.**

Is this a funding request? Y/N **NO**

If so, how much? \$

Provide exact financial impact/request:

Recommended motion (*Please type out the wording of the motion that you would like the Commission to approve*):

- **Motion to approve the CGI Video Project for Jefferson County, WV as part of promoting and improving tourism in Jefferson County, West Virginia and adding to the Jefferson County, WV Website.**

Attach supporting documents for request, or request may be denied.

If not attached, explain:

Is equipment needed? Projector **Y/N** Internet/Wi Fi **Y/N** Telephone for conference call **Y/N**

Contact information: **Russell Burgess**

Email address: [rburgess@jeffersoncountywv.org](mailto:rburgess@jeffersoncountywv.org)

Phone Number: (304) 728-5605

FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/RECOMMENDATION

not applicable



[Welcome](#)

[Education](#)

[Quality of Life](#)

[Homes & Real Estate](#)

[Economic Development](#)

[Parks and Recreation](#)

[Tourism and Things To Do](#)

[History](#)

[Sheperdstown Spotlight](#)

[Charles Town Spotlight](#)

[Harpers Ferry Spotlight](#)

[Bolivar Spotlight](#)

[Ranson Spotlight](#)

[Community Organizations](#)

**AGENDA REQUEST FORM**  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: **Mike Sine**

Department or Organization: **Jefferson County Emergency Service Agency**

Estimation of amount of time needed for appointment: 15 mins

Date Requested – 1<sup>st</sup> Choice: **March 2, 2023**

*If a specific date is needed, please provide reason for specific date:*

Date Requested – 2<sup>nd</sup> Choice:

Subject (*Wording to be placed on agenda*):

Request for reimbursement to JCESA for the cost of supplies, equipment, and services for the EMS Transition During the month of January, 2023 in the amount of \$30,306.41.

Please provide the County Commission with a description of your request or presentation, including any background information:

Is this a funding request? Y/N **YES**

If so, how much? \$

Provide exact financial impact/request:

Recommended motion (*Please type out the wording of the motion that you would like the Commission to approve*):

Approve the reimbursement of \$30,306.41 to JCESA for the cost of supplies, equipment, and services for the EMS Transition during the month of January, 2023 to be funded from the ARPA: EMS System allocation.

Attach supporting documents for request, or request may be denied.

If not attached, explain:

Is equipment needed? Projector **Y/N** Internet/Wi Fi **Y/N** Telephone for conference call **Y/N**

Contact information:

Email address: [msine@jcesa.org](mailto:msine@jcesa.org)

Phone Number:

**FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/RECOMMENDATION**



# JCC REIMBURSEMENT – ARPA: EMS SYSTEM

## JANUARY 2023

VENDOR	INVOICE #	INVOICE DATE	AMOUNT
HomeDepot	AuthCode 030609/0511007	01.02.23	\$40.93
Amazon	Order#113-8259913-2873000	01.04.23	\$57.38
Amazon	Order#113-5058942-2873843	01.04.23	\$62.97
HomeDepot	AuthCode 038543/4613279	01.08.23	\$21.75
Henry Schein	32463650	01.04.23	\$2,603.50
Henry Schein	32463651	01.06.23	\$99.95
McKesson	20183172	01.03.23	\$735.65
McKesson	20184697	01.04.23	\$1,391.39
McKesson	20185376	01.04.23	\$741.08
McKesson	20196615	01.06.23	\$240.06
PAXUSA LLC	743	01.10.23	\$1,096.47
Amazon	Order#112-6163972-3201838	01.11.23	\$21.99
Amazon	Order#112-1832457-2478651	01.11.23	\$41.90
Witmer	174900	01.04.23	\$319.00
Roberts Oxygen Company	884669 IFC	01.04.23	\$97.50
McKesson	20202277	01.10.23	\$63.90
McKesson	20202148	01.10.23	\$91.81
McKesson	20201983	01.09.23	\$15.28
McKesson	20201854	01.09.23	\$149.60
McKesson	20197864	01.09.23	\$43.70
McKesson	20197608	01.09.23	\$1,389.01
McKesson	20197244	01.08.23	\$77.03
McKesson	20197185	01.08.23	\$74.80
McKesson	20196916	01.08.23	\$1,148.16
Bound Tree	84816235	01.05.23	\$1,199.00
Amazon	Order#112-9080076-5338663	01.15.23	\$11.98
McKesson	20210467	01.11.23	\$689.07
McKesson	20210469	01.11.23	\$123.12
McKesson	20217557	01.14.23	\$59.20
Roberts Oxygen Company	898304	01.11.23	\$50.50
Roberts Oxygen Company	899526	01.11.23	\$74.00
Roberts Oxygen Company	899527	01.11.23	\$60.00
Uline	159036692	01.22.23	\$70.67
ACM&I	33071	01.19.23	\$800.00
McKesson	20218445	01.16.23	\$1,733.36
McKesson	20218446	01.16.23	\$445.00
McKesson	20218449	01.16.23	\$733.70
McKesson	20227128	01.19.23	\$123.12
McKesson	20227133	01.19.23	\$1,193.56
Teleflex	9506485851	01.17.23	\$1,345.50

McKesson	20241051	01.23.23	\$350.13
McKesson	20241054	01.23.23	\$521.85
McKesson	20246311	01.25.23	\$67.40
McKesson	20246313	01.25.23	\$436.48
Roberts Oxygen Company	927109	01.25.23	\$97.50
Roberts Oxygen Company	927478	01.25.23	\$43.00
Witmer	190652	01.26.23	\$350.00
Amazon	Order#114-2100372-2293804	01.31.23	\$59.90
ESO	102931	01.31.23	\$4,075.00
Stryker	4027736M	01.24.23	\$1,986.08
Stryker	4033424M	01.30.23	\$1,088.98
Roberts Oxygen Company	G01523	01.31.23	\$153.00
Roberts Oxygen Company	G01522	01.31.23	\$200.75
Roberts Oxygen Company	G01521	01.31.23	\$267.25
Roberts Oxygen Company	G01520	01.31.23	\$186.75
Roberts Oxygen Company	G01519	01.31.23	\$278.75
Roberts Oxygen Company	G01518	01.31.23	\$240.75
Roberts Oxygen Company	G01517	01.31.23	\$100.50
McKesson	20271189	01.31.23	\$465.75
<b>TOTAL JAN ARPA EMS EXPENSES</b>			<b>\$30,306.41</b>

ARPA EMS SYS.

Mike P. Card



ARPA EMS SYS

How doers  
get more done.

230 OAK LEE DR RANSON, WV 25438  
304-728-6464

4805 00051 97025 01/02/23 06:45 PM  
SALE SELF CHECKOUT

887480009781 5MM WASHER <A>	1.25
5MM FLAT WASHER STNLS	
887480424188 MTRC WSHR <A>	1.25
METRIC LOCK WASHER STAINLESS 5M	
887480117981 CAP NUT <A>	
5MM-.8 METRIC CAP NUT	
2@2.75	5.50
887480439687 MACH SCREW <A>	
MTR MACH SCW FT HD PHI SS 5M-.8X80M	
4@2.75	11.00
6970670970467 20L-EXTENDER <A>	4.98
2-OUTLET EXTENDER 6 INCH BLK	
6970670970436 4-OUTLET MET <A>	14.27
4-OUTLET METAL POWER BLOCK	

SUBTOTAL	38.25
SALES TAX	2.68
TOTAL	\$40.93

XXXXXXXXXXXX8145 VISA USD\$ 40.93  
 AUTH CODE 030609/0511007 TA  
 Chip Read  
 AID A0000000031010 VISA CREDIT

P.O.#/JOB NAME AT106 Transition

4805 01/02/23 06:45 PM



4805 51 97025 01/02/2023 1626

RETURN POLICY DEFINITIONS		
POLICY ID	DAYS	POLICY EXPIRES ON
A	1	90 04/02/2023

\*\*\*\*\*  
DID WE NAIL IT?

Take a short survey for a chance TO WIN  
A \$5,000 HOME DEPOT GIFT CARD

Opine en español

[www.homedepot.com/survey](http://www.homedepot.com/survey)

User ID: H89 199144 194390  
PASSWORD: 23052 194339

Entries must be completed within 14 days  
of purchase. Entrants must be 18 or  
older to enter. See complete rules on  
website. No purchase necessary.

ARPA EMS SVS ✓



Details for Order #113-8259913-2873000

Order Placed: January 4, 2023  
PO number : EMSTRANSSUPPLIES  
Amazon.com order number: 113-8259913-2873000  
Order Total: \$57.38

Not Yet Shipped	
<b>Items Ordered</b>	<b>Price</b>
1 of: <i>Brother P-Touch PT-D210BK Label Maker</i> Sold by: Triplanet Pricing INC ( <a href="#">seller profile</a> ) Business Price Condition: New	\$57.38
<b>Shipping Address:</b> Deborah Lancaster 419 16TH AVE RANSON, WV 25438-5732 United States	
<b>Shipping Speed:</b> Expedited Shipping	

Payment information	
<b>Payment Method:</b> Visa   Last digits: 8772	Item(s) Subtotal: \$57.38
	Shipping & Handling: \$0.00
	-----
<b>Billing address</b> Jefferson County Emergency Services Agency JCESA 419 Sixteenth Ave. Ranson, WV 25438 United States	Total before tax: \$57.38
	<b>Estimated Tax:</b> \$0.00
	-----
	<b>Grand Total: \$57.38</b>

To view the status of your order, return to [Order Summary](#).

ARPA EMS SYS ✓



Details for Order #113-5058942-2873843

Order Placed: January 4, 2023  
PO number : EMSTRANSSUPPLIES  
Amazon.com order number: 113-5058942-2873843  
Order Total: \$62.97

Not Yet Shipped	
<b>Items Ordered</b>	<b>Price</b>
1 of: <i>Compatible Label Tape for Brother TZe-231 Tape 12mm 0.47 Laminated White Tz231 Tz-231 TZe231 Tz Tape for Brother P-Touch 2040 D210 H100 D410 D400 D220, 6-Pack, by Pristar</i> Sold by: Pristar ( <a href="#">seller profile</a> ) Business Price Condition: New	\$16.99
2 of: <i>Coleman Cooler-Chiller 16 Quart Portable Cooler</i> Sold by: Amazon.com Condition: New	\$22.99
<b>Shipping Address:</b> Deborah Lancaster 419 16TH AVE RANSON, WV 25438-5732 United States	
<b>Shipping Speed:</b> FREE Prime Delivery	

Payment information	
<b>Payment Method:</b> Visa   Last digits: 8772	Item(s) Subtotal: \$62.97 Shipping & Handling: \$0.00 -----
<b>Billing address</b> Jefferson County Emergency Services Agency JCESA 419 Sixteenth Ave. Ranson, WV 25438 United States	Total before tax: \$62.97 Estimated Tax: \$0.00 ----- <b>Grand Total: \$62.97</b>

To view the status of your order, return to [Order Summary](#) .

ARPA EMS 885

Part for #2 amb

G. Wilson



1104 amb

How doers  
get more done.

230 OAK LEE DR RANSON, WV 25438  
304-728-6464

4805 00061 43671 01/08/23 02:41 PM  
SALE SELF CHECKOUT

078477714690 GFCI <A> 20.33  
20A BLACK/RED BUTTON GFCI, WHITE

SUBTOTAL 20.33  
SALES TAX 1.42  
TOTAL \$21.75

XXXXXXXXXXXX4201 VISA

USD\$ 21.75

AUTH CODE 038543/4613279

TA

Chip Read

AID A0000000031010

VISA CREDIT

P.O.#/JOB NAME: AMB 2 REPAIR

4805 01/08/23 02:41 PM



4805 61 43671 01/08/2023 1573

RETURN POLICY DEFINITIONS

POLICY ID	DAYS	POLICY EXPIRES ON
A 1	90	04/08/2023

\*\*\*\*\*

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PASSWORD: 23058 87631

Entries must be completed within 14 days  
of purchase. Entrants must be 18 or  
older to enter. See complete rules on  
website. No purchase necessary.

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

**HENRY SCHEIN®**  
 MEDICAL EMS  
 135 Duryea Road • Melville, NY 11747  
 1.800.472.4346  
 www.henryschein.com



# INVOICE

**Ship/Sold-To: 2715014**  
 Jefferson Co Emerg Serv Agency  
 419 16th Ave  
 Ranson, WV 25438-5732

**Bill-To: 2715013**  
 Jefferson Co Emerg Serv Agency  
 419 16th Ave  
 Accounts Payable  
 Ranson, WV 25438-5732

010000271501332463650110000000002603500104232

Jefferson Co Emerg Serv Agency  
 419 16th Ave  
 Accounts Payable  
 Ranson, WV 254385732

<b>Invoice#</b> 32463650	<b>Invoice Date</b> 01/04/23	<b>Due Date</b> 02/03/23	<b>Invoice Total</b> \$2603.50
<b>Purchase Order#</b> EMS Transition Supplies		<b>Payment Terms</b> Invoice Date + 30 days	
<b>Customer DEA#</b>		<b>Customer State Reg#</b>	
<b>HSI Federal ID#</b> 11-3136595		<b>HSI D&amp;B#</b>	

Please detach here and mail above with your payment

LINE NO.	ITEM CODE	UNIT SIZE	DESCRIPTION	QTY ORDERED	QTY SHIPPED	CODES	UNIT PRICE	EXT. PRICE	BOX NO.	SHIP FROM
1	700-4329	EA	<b>Fora GD20 Glucose Meter</b> <i>ESTIMATED DELIVERY DATE: 01/06/23</i>	60	60		.01	.60	3	IN
2	700-4328	50/BX	<b>Fora GD20 Glucose Test Strips</b> <i>ESTIMATED DELIVERY DATE: 01/09/23</i>	150	150		9.13	1,369.50	5	TX
3	700-4327	1/BX	<b>FORA GD20 Control Solution Hi-Lo</b> <i>ESTIMATED DELIVERY DATE: 01/06/23</i>	20	20		4.63	92.60	3	IN
4	935-6155	(CS=40/EA)	<b>Blue Sensor SP Electrodes</b> <i>CASE GOOD ITEM, MAY BE SHIPPED SEPARATELY.</i>	2	2	C	570.40	1,140.80	2	PA

YOUR ORDER 37386667 HAS BEEN SPLIT INTO MULTIPLE SHIPMENTS.  
 YOU WILL BE BILLED FOR THESE ITEMS WHEN THEY ARE SHIPPED.  
 =====

**APPROVED**

**SCANNED**

**MERCHANDISE TOTAL**  
**INVOICE TOTAL**

**\$2,603.50**  
**\$2,603.50**

Please refer to our standard Terms of Sale and disclosures at <https://www.henryschein.com/us-en/medical/LegalTerms.aspx>, including customer obligations regarding discounts/rebates. Such terms are incorporated herein by reference.

**Thank you for your order!**

<b>Ship To#</b> 2715014	<b>Bill To#</b> 2715013	<b>Invoice#</b> 32463650	<b>Invoice Date</b> 01/04/23	<b>Invoice Total</b> \$2603.50	<b>CODE STATUS KEY</b> S-Special Schein Pricing B-Backordered; Item will follow C-Case Good Item D-Discontinued; Item no longer available F-Special Offer M-Item will ship directly from manufacturer NC-No Charge P-Prescription Drug; Return Authorization Required *-Item has Safety Data Sheet (SDS) R-Refrigerated Item; May be shipped separately SK-School Kit SM-Shipped from Multiple Buildings T-Taxable Item U-Temporarily Unavailable; please reorder W-Warranty Item WH, MN, M2, DM-DSCSA CODES
<b>Order#</b> 37386667	<b>Order Date</b> 01/03/23	<b># of Boxes</b> 5	<b>PO#</b> EMS Transition Supplies		

**Distribution Names/Address**

IN: 5315 W 74th St. Indianapolis, IN 46268 DEA#: RH0162494 State Reg#: 48001176A Chem. Reg#: 006574HNY	TX: 1001 Nolan Dr. #400 Grapevine, TX 76051 DEA#: RH0238192 State Reg#: 0039006 Chem. Reg#: 006515HNY	PA: 41 Weaver Rd. Derswer, PA 17517 DEA#: RH0236567 State Reg#: 8000000663 Chem. Reg#: 006573HNY
--	---	--

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

**HENRY SCHEIN®**  
 MEDICAL EMS  
 135 Duryea Road • Melville, NY 11747  
 1.800.472.4346  
 www.henryschein.com



**INVOICE**

**Ship/Sold-To: 2715014**  
 Jefferson Co Emerg Serv Agency  
 419 16th Ave  
 Ranson, WV 25438-5732

**Bill-To: 2715013**  
 Jefferson Co Emerg Serv Agency  
 419 16th Ave  
 Accounts Payable  
 Ranson, WV 25438-5732

010000271501332463651110000000000099950106234

Jefferson Co Emerg Serv Agency  
 419 16th Ave  
 Accounts Payable  
 Ranson, WV 254385732

<b>Invoice#</b> 32463651	<b>Invoice Date</b> 01/06/23	<b>Due Date</b> 02/05/23	<b>Invoice Total</b> \$99.95
<b>Purchase Order#</b> EMS Transition Supplies		<b>Payment Terms</b> Invoice Date + 30 days	
<b>Customer DEA#</b>		<b>Customer State Reg#</b>	
<b>HSI Federal ID#</b> 11-3136595		<b>HSI D&amp;B#</b>	

Please detach here and mail above with your payment

LINE NO.	ITEM CODE	UNIT SIZE	DESCRIPTION	QTY ORDERED	QTY SHIPPED	CODES	UNIT PRICE	EXT. PRICE	BOX NO.	SHIP FROM	
1	499-6611	10/BG	<b>Chemlight GreenFoil Military 6"</b> DIRECT SHIPMENT FROM THE MANUFACTURER	5	5	M	19.99	99.95			
2	700-4250	EA	<b>Recover Pro X Inf Contr Bag Red</b> DIRECT SHIPMENT FROM THE MANUFACTURER ITEM BACK ORDERED, WILL FOLLOW SHORTLY	2	0	M B					
3	700-4260	EA	<b>Xtra Fill Module 1cc</b> DIRECT SHIPMENT FROM THE MANUFACTURER ITEM BACK ORDERED, WILL FOLLOW SHORTLY	4	0	M B					
YOUR ORDER 37386667 HAS BEEN SPLIT INTO MULTIPLE SHIPMENTS. YOU WILL BE BILLED FOR THESE ITEMS WHEN THEY ARE SHIPPED. =====											
								<b>MERCHANDISE TOTAL</b>			<b>\$99.95</b>
								<b>INVOICE TOTAL</b>			<b>\$99.95</b>



Please refer to our standard Terms of Sale and disclosures at <https://www.henryschein.com/us-en/medical/LegalTerms.aspx>, including customer obligations regarding discounts/rebates. Such terms are incorporated herein by reference.

Thank you for your order!

<b>Ship To#</b> 2715014	<b>Bill To#</b> 2715013	<b>Invoice#</b> 32463651	<b>Invoice Date</b> 01/06/23	<b>Invoice Total</b> \$99.95	<b>CODE STATUS KEY</b> \$-Special Schein Pricing B-Backordered; Item will follow C-Case Good Item D-Discontinued; Item no longer available F-Special Offer M-Item will ship directly from manufacturer NC-No Charge P-Prescription Drug; Return Authorization Required *-Item has Safety Data Sheet (SDS) R-Refrigerated Item; May be shipped separately SK-School Kit SM-Shipped from Multiple Buildings T-Taxable Item U-Temporarily Unavailable; please reorder W-Warranty Item WH, MN, MZ, DM-DSCSA CODES
<b>Order#</b> 37386667	<b>Order Date</b> 01/03/23	<b># of Boxes</b>	<b>PO#</b> EMS Transition Supplies		

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

## Invoice

Page 1 of 1

Shipped From: RCHE1DPD01  
 MCKESSON MEDICAL-SURGICAL INC  
 4250 PATRIOT DRIVE, STE 100  
 GRAPEVINE, TX 76051  
 SHIPPED FROM LICENSE: WD0557325

1/9/23

*Rob B*

**APPROVED**

**SCANNED**

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	84358867	<b>Invoice Number</b>	20184697
<b>Sales Order Date</b>	12/28/2022	<b>Invoice Date</b>	01/04/2023
<b>PO Number</b>		<b>Payment Due Date</b>	02/03/2023
<b>Sales Rep Name</b>	GAGNON, PATRICK LOUIS	<b>Invoice Amount</b>	\$1,391.39

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

### Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
853740	Vendor: KENRSP Vend Cat#: 009822	SAMPLING LINE, ORAL/NASAL SMAR PO LN 1	4	CS	4	347.25	1389.00	.00	
Tracking # 1Z7E08560363139004 Shipped: 01/04/2023 From: Dallas Via: UPS GROUND Broker Lic: WD0560158									
1195747	Vendor: KENRSP Vend Cat#: MVAO100U	LINE, SAMPLING ORAL/NASAL CO2 PO LN 2	1	PK	0	1389.01	.00	.00	
		FUEL SURCHARGE PO LN 3	1	EA	1	2.39	2.39	.00	
<b>SUB TOTAL</b>							<b>\$1,391.39</b>		
<b>FREIGHT</b>							<b>\$0.00</b>		
<b>TAX</b>							<b>\$0.00</b>		
<b>AMOUNT</b>							<b>\$1,391.39</b>		

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.  
 PRICING IS CONFIDENTIAL AND PROPRIETARY.

## Invoice

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

RCHE1DPD01

<b>Account Number</b>	58736372	<b>Date</b>	01/04/2023
<b>Document Number</b>	20184697	<b>Terms</b>	AR NET 30 DAYS
<b>Pay This Amount Before</b>	02/03/2023		<b>\$1,391.39</b>

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

**Please Remit To:**  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

## Invoice

Page 1 of 1

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC (AUBURN)  
 2530 B STREET, NW STE 101A  
 AUBURN, WA 98001

*Robert* 1/9/23  
**APPROVED**

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

**SCANNED**

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	84767629	<b>Invoice Number</b>	20185376
<b>Sales Order Date</b>	01/03/2023	<b>Invoice Date</b>	01/04/2023
<b>PO Number</b>	EMS TRANSITION SUPPLIES	<b>Payment Due Date</b>	02/03/2023
<b>Sales Rep Name</b>	GAGNON, PATRICK LOUIS	<b>Invoice Amount</b>	\$741.08

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

### Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
827024	Vendor: SMITHS Vend Cat#: 326510	CATHETER, IV VIA VALUE SFTY 18 PO LN 4	2	CS	2	370.54	741.08	.00	
Tracking #		1Z71698V0345431091							
Shipped: 01/04/2023		From: Seattle Via: UPS GROUND Broker Lic: WD0560158							

<b>SUB TOTAL</b>	<b>FREIGHT</b>	<b>TAX</b>	<b>AMOUNT</b>
\$741.08	\$0.00	\$0.00	\$741.08

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.  
 PRICING IS CONFIDENTIAL AND PROPRIETARY.

## Invoice

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

<b>Account Number</b>	58736372	<b>Date</b>	01/04/2023
<b>Document Number</b>	20185376	<b>Terms</b>	AR NET 30 DAYS
<b>Pay This Amount Before</b>	02/03/2023		<b>\$741.08</b>

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

Please Remit To:  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

## Invoice

Page 1 of 1

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 4027 MARTINSBURG PIKE  
 CLEAR BROOK, VA 22624  
 SHIPPED FROM LICENSE: WD0559398

*Robert Burner*  
**APPROVED**  
 1/9/23  
**SCANNED**

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	84767629	<b>Invoice Number</b>	20196615
<b>Sales Order Date</b>	01/03/2023	<b>Invoice Date</b>	01/06/2023
<b>PO Number</b>	EMS TRANSITION SUPPLIES	<b>Payment Due Date</b>	02/05/2023
<b>Sales Rep Name</b>	GAGNON, PATRICK LOUIS	<b>Invoice Amount</b>	\$240.06

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

### Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
1069803	Vendor: MDSOUR Vend Cat#: MS-BOD100	BAG, BODY WHY 36"X90" (10/CS) PO LN 2	2	CS	2	120.03	240.06	.00	
			MMS PO#	31680496					
						<b>SUB TOTAL</b>	<b>FREIGHT</b>	<b>TAX</b>	<b>AMOUNT</b>
						\$240.06	\$0.00	\$0.00	\$240.06

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.  
 PRICING IS CONFIDENTIAL AND PROPRIETARY.

## Invoice

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

RCHE1DP001

<b>Account Number</b>	58736372	<b>Date</b>	01/06/2023
<b>Document Number</b>	20196615	<b>Terms</b>	AR NET 30 DAYS
<b>Pay This Amount Before</b>	02/05/2023	<b>Amount</b>	\$240.06

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

Please Remit To:  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

## Invoice

Page 1 of 2

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 4027 MARTINSBURG PIKE  
 CLEAR BROOK, VA 22624  
 SHIPPED FROM LICENSE: WD0559398

*1/9/23*

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	<b>84767629</b>	<b>Invoice Number</b>	<b>20183172</b>
<b>Sales Order Date</b>	<b>01/03/2023</b>	<b>Invoice Date</b>	<b>01/03/2023</b>
<b>PO Number</b>	<b>EMS TRANSITION SUPPLIES</b>	<b>Payment Due Date</b>	<b>02/02/2023</b>
<b>Sales Rep Name</b>	<b>GAGNON, PATRICK LOUIS</b>	<b>Invoice Amount</b>	<b>\$735.65</b>

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

### Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
1031802	Vendor: MGM16 Vend Cat#: 16-S20C	SYRINGE, LL 20CC (100/BX 8BX/C PO LN 1	1	CS	1	296.00	296.00	.00	
	Tracking # 1Z31FW670327179620								
	Shipped: 01/04/2023	From: Winchester Via: UPS GRD RES NORTHCOAST ONLY							Broker Lic: WD0560158
1069803	Vendor: MDSOUR Vend Cat#: MS-BOD100	BAG, BODY WHY 36"X90" (10/CS) PO LN 2	2	CS	0	120.03	.00	.00	
825684	Vendor: SMITHS Vend Cat#: 326010	CATHETER, IV VIA VALUE STRT HU PO LN 3	2	BX	2	88.44	176.88	.00	
	Tracking # 1Z31FW670327181199								
	Shipped: 01/04/2023	From: Winchester Via: UPS GRD RES NORTHCOAST ONLY							Broker Lic: WD0560158
827024	Vendor: SMITHS Vend Cat#: 326510	CATHETER, IV VIA VALUE SFTY 18 PO LN 4	2	CS	0	370.54	.00	.00	
632530	Vendor: LARDAL Vend Cat#: 845211	BAG, RESUSCITATOR SNGL ADLT (1 PO LN 5	2	CS	0	123.12	.00	.00	

## Invoice

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

<b>Account Number</b>	<b>58736372</b>	<b>Date</b>	<b>01/03/2023</b>
<b>Document Number</b>	<b>20183172</b>	<b>Terms</b>	<b>AR NET 30 DAYS</b>
<b>Pay This Amount Before</b>	<b>02/02/2023</b>		<b>\$735.65</b>

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

Please Remit To:  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# McKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

Bill To: 58736372  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

## Invoice

Page 2 of 2  
 RCHEIDPD01

Shipped To:  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

<b>Invoice Number</b> 20183172	<b>PO Number</b> EMS TRANSITION SUPPLIES	<b>Invoice Date</b> 01/03/2023
--------------------------------	--	--------------------------------

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
974418	Vendor: BBRAUN NDC Num: & 00264780009	SOD CHL, IVSOL 0.9% 1000ML (12 PO LN 6	7	CS	7	37.22	260.54	.00	
	Tracking #	1Z31FW670327179639	1Z31FW670327179648	1Z31FW670327179657					
	Tracking #	1Z31FW670327179666	1Z31FW670327179675	1Z31FW670327179684					
	Tracking #	1Z31FW670327179693							
	Shipped: 01/04/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158								
704524	Vendor: SMITHS Vend Cat#: 100/102/065	TUBE, TRACHEAL CLR MURPHY AIRC PO LN 7	2	BX	0	33.70	.00	.00	
		FUEL SURCHARGE PO LN 8	1	EA	1	2.23	2.23	.00	
<b>SUB TOTAL</b>						<b>\$735.65</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$735.65</b>
<b>FREIGHT</b>						<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>TAX</b>						<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>AMOUNT</b>						<b>\$735.65</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$735.65</b>

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.  
 PRICING IS CONFIDENTIAL AND PROPRIETARY.



# INVOICE

PAXUSA LLC  
W226S8100 Guthrie Dr  
Big Bend Wisconsin 53103  
U.S.A

ARPA EMS SYS ✓  
(EMS Transition)

BALANCE DUE **\$0.00**

## Jefferson County Emergency Services

419 sixteenth Ave  
Ranson  
25438 West Virginia  
U.S.A419 sixteenth AveRanson25438

Invoice#	INV-000743
Invoice Date	10 Jan 2023
P.O.#	50-00928
Terms	PrePay
Due Date	10 Jan 2023
PO number	1102023

#	ITEM & DESCRIPTION	AMOUNT
1	200670307 SKU : Gladdy -Blue	\$1,066.47 3 Each x 355.49

Sub Total	1,066.47
Shipping charge	30.00
<b>Total</b>	<b>\$1,096.47</b>
Payment Made	(-) 1,096.47
Balance Due	\$0.00

\* Bags for ea. ambulance

J. Lyons Pcard - PAID

Details for Order #112-6163972-3201838

[Print this page for your records.](#)

**Order Placed:** January 11, 2023  
**PO number:** EMSTRANSSUPPLIES  
**Amazon.com order number:** 112-6163972-3201838  
**Order Total:** \$21.99

**Not Yet Shipped**

**Items Ordered**

1 of: *Nano Tape Clear Double Sided Adhesive Mounting Tape Heavy Duty Removable, Strong Picture Hanging Strips No Damage Wall Hangers, Sticky Tack Gel Putty Glue for Poster, Photo, Mirror, Carpet(9.85 Ft-3 Pack)*  
Sold by: FengHuaYing1 ([seller profile](#))

**Price**  
\$21.99

Condition: New

**Shipping Address:**

Deborah Lancaster  
419 16TH AVE  
RANSON, WV 25438-5732  
United States

**Shipping Speed:**

FREE Prime Delivery

**Payment information**

**Payment Method:**

Visa | Last digits: 8772

Item(s) Subtotal: \$21.99  
Shipping & Handling: \$0.00

**Billing address**

Jefferson County Emergency Services Agency  
JCESA  
419 Sixteenth Ave.  
Ranson, WV 25438  
United States

Total before tax: \$21.99  
Estimated tax to be collected: \$0.00

**Grand Total: \$21.99**

To view the status of your order, return to [Order Summary](#).

ARPA EMS SYS ✓

**Details for Order #112-1832457-2478651**

[Print this page for your records.](#)

**Order Placed:** January 11, 2023  
**PO number:** EMSTRANSSUPPLIES  
**Amazon.com order number:** 112-1832457-2478651  
**Order Total:** \$41.90

**Not Yet Shipped**

<b>Items Ordered</b>	<b>Price</b>
2 of: <i>Global Lab Supply 102-8511-1 Pre-Collated Giroform Hitec 2 Part Carbonless Paper, 8-1/2" Length x 11" Width</i>	\$20.95
Sold by: Amazon.com Services LLC	
Condition: New	

**Shipping Address:**  
Deborah Lancaster  
419 16TH AVE  
RANSON, WV 25438-5732  
United States

**Shipping Speed:**  
Two-Day Shipping

**Payment information**

**Payment Method:**  
Visa | Last digits: 8772

Item(s) Subtotal: \$41.90  
Shipping & Handling: \$0.00

**Billing address**  
Jefferson County Emergency Services Agency  
JCESA  
419 Sixteenth Ave.  
Ranson, WV 25438  
United States

Total before tax: \$41.90  
Estimated tax to be collected: \$0.00

**Grand Total: \$41.90**

To view the status of your order, return to [Order Summary](#).



Witmer Public Safety Group  
101 Independence Way  
Coatesville, PA 19320

www.wpsginc.com  
610-857-8070

**BILL TO:**

Jefferson Co. Emergency Service Agency  
419 16th Ave  
Ranson, WV 25438-5732  
United States

Witmer Public Safety Group, Inc.  
—HOME OF—



INVOICE		INV174900
Date:	01/04/2023	
Customer:	4183 Jefferson Co. Emergency Service Agency	
Sales Order:	SO153952	
Terms:	Net 30	
P.O.#:	EMS Transition (1106)	
Sales Rep:	John Shipley	
Shipping Method:	Sales Rep Delivery	
Ship To:	Jefferson Co. Emergency Service Agency 419 16th Ave Ranson, WV 25438-5732 United States	
AMOUNT DUE:	<b>\$319.00</b>	

#	Item Name	Description	Ordered	Shipped	B/O	Each	Amount
1	44451	Streamlight Fire Vulcan LED, 12V DC Truck Mount Orange	2	2	0	\$159.50	\$319.00

Please direct all payment inquiries to Accounts Receivable  
Phone: 800-852-6088 • Email: Invoices@wpsginc.com  
NOTE: All outstanding invoices being paid with a credit card  
after 30 days will be charged a 3% processing fee.

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

Subtotal:	\$319.00
Discount:	\$0.00
Tax Total (%):	\$0.00
Freight:	\$0.00
Total:	\$319.00
Amount Paid:	\$0.00
<b>Amount Due:</b>	<b>\$319.00</b>

*Rob B* 1/12/23



Please return this section with payment. Your prompt payment is appreciated.

**Remit Payment To:**

Witmer Public Safety Group Inc.  
101 Independence Way  
Coatesville, PA 19320

**Customer:**

Jefferson Co. Emergency  
Service Agency

**Customer ID:**

4183

**Invoice #:**

INV174900

**Amount Due:**

\$319.00

**Amount Paid:**

**ROBERTS OXYGEN COMPANY, INC.**  
 15830 REDLAND ROAD  
 PO BOX 5507  
 ROCKVILLE, MD 20855  
 (540) 662-1180



Invoice Number 884669  
 Invoice Date 01/04/23  
 Invoice Amount 97.50 UR  
 Customer Number 100296

**SOLD TO: 100296**  
 JEFFERSON CO EMERGENCY SERV  
 419 SIXTEENTH AVE  
 RANSON, WV 25438

**SHIP TO: 3**  
**INDEPENDENT FIRE COMPANY INC**  
 200 WEST SECOND AVE  
 RANSON, WV 25438

REMIT TO: ROBERTS OXYGEN COMPANY, INC. PO Box 5507 Rockville, MD 20855

Please detach this portion and return with your payment.

Terms - Net on Receipt of Invoice, 1.5% monthly finance charge over 30 days, 18.0% per annum.

CUSTOMER NO.	PURCHASE ORDER NO.	DATE DELIVERED	DELIVERY TICKET	BRANCH	SHIPPED VIA	
100296		01/04/23	035209	WINCHESTER -	DELIVERED	
INVOICE NO.	INVOICE DATE	ORDER PLACED BY			PLACED BY PHONE NO.	
884669	01/04/23	AUTOMATIC				
QUANTITY		PART NUMBER	DESCRIPTION	UNIT PRICE	UNIT	TOTAL CHARGED
SHIPPED	RETURNED OR BACKORDERED					
2		2 R6	THERAPY OXYGEN, USP 141 CU FT	16.000	EA	32.00
5		5 R12RUAD	D-MED OXYGEN, USP 15CF RU. ALUM	7.500	EA	37.50

*Red B* 1/12/23



**NEW e-Storefront...Manage Your Account 24/7!**

Pay invoices online by credit card. Place your orders with a customized shopping list, review cylinder balances, delivery tickets and statements. Sign up today at [www.robertsoxygen.com](http://www.robertsoxygen.com) click on **Manage Your Account** then **Request Account**.

For questions about this invoice  
 Please call: (540) 662-1180

Fed ID# 520822869, Duns# 042646877, UEI# HF9HCHM74RY5  
 PLEASE VISIT OUR WEBSITE AT [WWW.ROBERTSOXYGEN.COM](http://WWW.ROBERTSOXYGEN.COM)

<b>SUB TOTAL</b>	69.50
<b>WV SALES TAX</b>	.00
<b>DELIVERY CHARGE</b>	28.00
<b>AMOUNT DUE</b>	<b>97.50</b>

**PLEASE REMIT TO:**  
 ROBERTS OXYGEN COMPANY, INC.  
 PO Box 5507  
 Rockville, MD 20855

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

**Invoice**

Page 1 of 1

Shipped From:  
 MCKESSON MEDICAL-SURGICAL (ROGERS)  
 12999 WILFRED LANE STE #100  
 ROGERS, MN 55374

*Rob B 1/12/23*



JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	85125162	<b>Invoice Number</b>	20202277
<b>Sales Order Date</b>	01/08/2023	<b>Invoice Date</b>	01/10/2023
<b>PO Number</b>	EMS Transition Supplies	<b>Payment Due Date</b>	02/09/2023
<b>Sales Rep Name</b>	GAGNON, PATRICK LOUIS	<b>Invoice Amount</b>	\$63.90

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

**Invoice Detail**

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
816875	Vendor: NARSCU Vend Cat#: ZZ-0056	NEEDLE, LUNG DECOMPRESS ARS 14 PO LN 17	5	EA	5	12.78	63.90	.00	
Shipped: 01/10/2023 From: Rogers Via: UPS GROUND Broker Lic: WD0560158									
						<b>SUB TOTAL</b>	<b>FREIGHT</b>	<b>TAX</b>	<b>AMOUNT</b>
						\$63.90	\$0.00	\$0.00	\$63.90

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.  
 PRICING IS CONFIDENTIAL AND PROPRIETARY.

**Invoice**

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

<b>Account Number</b>	58736372	<b>Date</b>	01/10/2023
<b>Document Number</b>	20202277	<b>Terms</b>	AR NET 30 DAYS
<b>Pay This Amount Before</b>	02/09/2023	<b>Amount</b>	\$63.90

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

**Please Remit To:**  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

## Invoice

Page 1 of 1

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 1005 SATELLITE BLVD.  
 SUWANEE, GA 30024  
 SHIPPED FROM LICENSE: WD0557915

*Robert Burner* 1/12/23  
**APPROVED**

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

**SCANNED**

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	85125162	<b>Invoice Number</b>	20202148
<b>Sales Order Date</b>	01/08/2023	<b>Invoice Date</b>	01/10/2023
<b>PO Number</b>	EMS Transition Supplies	<b>Payment Due Date</b>	02/09/2023
<b>Sales Rep Name</b>	GAGNON, PATRICK LOUIS	<b>Invoice Amount</b>	\$91.81

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

### Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
872674	Vendor: SUNMED Vend Cat#: 9-0212-82	INTRODUCER, ENDOTRACH ADLT COU PO LN 11	1	BX	1	91.81	91.81	.00	
Shipped: 01/10/2023 From: Atlanta Via: UPS GROUND Broker Lic: WD0560158									
<b>SUB TOTAL</b>						<b>\$91.81</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$91.81</b>
<b>FREIGHT</b>						<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>TAX</b>						<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>AMOUNT</b>						<b>\$91.81</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$91.81</b>

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 PRICING IS CONFIDENTIAL AND PROPRIETARY.

## Invoice

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

RCHE1DPD01

<b>Account Number</b>	58736372	<b>Date</b>	01/10/2023
<b>Document Number</b>	20202148	<b>Terms</b>	AR NET 30 DAYS
<b>Pay This Amount Before</b>		<b>02/09/2023</b>	<b>\$91.81</b>

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

**Please Remit To:**  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

**Invoice**

Page 1 of 1

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC(URBANCREST  
 3500 CENTERPOINT DRIVE STE A  
 URBANCREST,OH 43123  
 SHIPPED FROM LICENSE: WD0557597

*Patricia*  
**APPROVED**

1/12/23

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

**SCANNED**

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN:ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	85125162	<b>Invoice Number</b>	20201983
<b>Sales Order Date</b>	01/08/2023	<b>Invoice Date</b>	01/09/2023
<b>PO Number</b>	EMS Transition Supplies	<b>Payment Due Date</b>	02/08/2023
<b>Sales Rep Name</b>	GAGNON, PATRICK LOUIS	<b>Invoice Amount</b>	\$15.28

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

**Invoice Detail**

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
456600	Vendor: SCJDIS Vend Cat#: T603Q7	BRACKET, ALCARE DSPN W/CLIP (2 PO LN 3	4	EA	4	3.82	15.28	.00	
Shipped: 01/10/2023 From: Columbus Via: FEDERAL EXPRESS CORP Broker Lic: WD0560158									
			<b>SUB TOTAL</b>	<b>FREIGHT</b>	<b>TAX</b>	<b>AMOUNT</b>			
			\$15.28	\$0.00	\$0.00	\$15.28			

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.  
 PRICING IS CONFIDENTIAL AND PROPRIETARY.

**Invoice**

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

RCHE1DPD01

<b>Account Number</b>	58736372	<b>Date</b>	01/09/2023
<b>Document Number</b>	20201983	<b>Terms</b>	AR NET 30 DAYS
<b>Pay This Amount Before</b>		02/08/2023	\$15.28

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

**Please Remit To:**  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

**Invoice**

Page 1 of 1

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 4250 PATRIOT DRIVE, STE 100  
 GRAPEVINE, TX 76051  
 SHIPPED FROM LICENSE: WD0557325

*Robert Burner* 1/12/23  
**APPROVED**

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

**SCANNED**

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	85125162	<b>Invoice Number</b>	20201854
<b>Sales Order Date</b>	01/08/2023	<b>Invoice Date</b>	01/09/2023
<b>PO Number</b>	EMS Transition Supplies	<b>Payment Due Date</b>	02/08/2023
<b>Sales Rep Name</b>	GAGNON, PATRICK LOUIS	<b>Invoice Amount</b>	\$149.60

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

**Invoice Detail**

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
629871	Vendor: SUNMED Vend Cat#: 5-5332-01	BLADE, LARYNGOSCOPE MACINTOSH PO LN 18	10	EA	10	7.48	74.80	.00	
Tracking # 1Z7E08560363320325 Shipped: 01/10/2023 From: Dallas Via: UPS GROUND Broker Lic: WD0560158									
494233	Vendor: SUNMED Vend Cat#: 5-5333-02	BLADE, LARYNGOSCOPE MIL#2 DISP PO LN 23	10	EA	10	7.48	74.80	.00	
Tracking # 1Z7E08560363320325 Shipped: 01/10/2023 From: Dallas Via: UPS GROUND Broker Lic: WD0560158									

<b>SUB TOTAL</b>	<b>FREIGHT</b>	<b>TAX</b>	<b>AMOUNT</b>
\$149.60	\$0.00	\$0.00	\$149.60

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.  
 PRICING IS CONFIDENTIAL AND PROPRIETARY.

**Invoice**

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

<b>Account Number</b>	58736372	<b>Date</b>	01/09/2023
<b>Document Number</b>	20201854	<b>Terms</b>	AR NET 30 DAYS
<b>Pay This Amount Before</b>	02/08/2023		\$149.60

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

**Please Remit To:**  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

Invoice

Page 1 of 1

Shipped From:  
 MCKESSON MEDICAL SURGICAL (ROCH)  
 2404 INNOVATION WAY  
 ROCHESTER, NY 14624



JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	85125162	<b>Invoice Number</b>	20197864
<b>Sales Order Date</b>	01/08/2023	<b>Invoice Date</b>	01/09/2023
<b>PO Number</b>	EMS Transition Supplies	<b>Payment Due Date</b>	02/08/2023
<b>Sales Rep Name</b>	GAGNON, PATRICK LOUIS	<b>Invoice Amount</b>	\$43.70

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

**Invoice Detail**

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
494234	Vendor: SUNMED Vend Cat#: 5-5333-03	BLADE, LARYNGOSCOPE MIL#3 DISP PO LN 22	10	EA	10	4.37	43.70	.00	
Tracking # 1ZY753710328851132									
Shipped: 01/09/2023 From: Rochester Via: UPS GROUND Broker Lic: WD0560158									

SUB TOTAL	FREIGHT	TAX	AMOUNT
\$43.70	\$0.00	\$0.00	\$43.70

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.  
 PRICING IS CONFIDENTIAL AND PROPRIETARY.

**Invoice**

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

<b>Account Number</b>	58736372	<b>Date</b>	01/09/2023
<b>Document Number</b>	20197864	<b>Terms</b>	AR NET 30 DAYS
<b>Pay This Amount Before</b>	02/08/2023	<b>Amount</b>	\$43.70

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

**Please Remit To:**  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

JCC REIMBURSEMENT - ARPA:EMS SYSTEM

## Invoice

Page 1 of 1

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 4027 MARTINSBURG PIKE  
 CLEAR BROOK, VA 22624  
 SHIPPED FROM LICENSE: WD0559398

*Robert Burner* 1/12/23

APPROVED

SCANNED

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	84358867	<b>Invoice Number</b>	20197608
<b>Sales Order Date</b>	12/28/2022	<b>Invoice Date</b>	01/09/2023
<b>PO Number</b>		<b>Payment Due Date</b>	02/08/2023
<b>Sales Rep Name</b>	GAGNON, PATRICK LOUIS	<b>Invoice Amount</b>	\$1,389.01

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

### Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
1195747	Vendor: KENRSP Vend Cat#: MVAO100U	LINE, SAMPLING ORAL/NASAL CO2 PO LN 2	1	PK	1	1389.01	1389.01	.00	
Tracking # 1Z31FW670327281385									
Shipped: 01/09/2023		From: Winchester		Via: UPS GRD RES NORTHCOAST ONLY		Broker Lic: WD0560158			

<b>SUB TOTAL</b>	<b>FREIGHT</b>	<b>TAX</b>	<b>AMOUNT</b>
\$1,389.01	\$0.00	\$0.00	\$1,389.01

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.  
 PRICING IS CONFIDENTIAL AND PROPRIETARY.

## Invoice

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

RCHE1DPD01

<b>Account Number</b>	58736372	<b>Date</b>	01/09/2023
<b>Document Number</b>	20197608	<b>Terms</b>	AR NET 30 DAYS
<b>Pay This Amount Before</b>	02/08/2023	<b>Amount</b>	\$1,389.01

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

Please Remit To:  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

## JCC REIMBURSEMENT - ARPA: EMS SYSTEM

### Invoice

Page 1 of 1

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 4027 MARTINSBURG PIKE  
 CLEAR BROOK, VA 22624  
 SHIPPED FROM LICENSE: WD0559398

*Rob B* 1/12/23

**APPROVED**

**SCANNED**

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b> 85125162	<b>Invoice Number</b> 20197244
<b>Sales Order Date</b> 01/08/2023	<b>Invoice Date</b> 01/08/2023
<b>PO Number</b> EMS Transition Supplies	<b>Payment Due Date</b> 02/07/2023
<b>Sales Rep Name</b> GAGNON, PATRICK LOUIS	<b>Invoice Amount</b> \$77.03

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

#### Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
494230	Vendor: SUNMED Vend Cat#: 5-5332-04	BLADE, LARYNGOSCOPE MAC#4 PO LN 21	10	EA	10	7.48	74.80	.00	
	Tracking # 1Z88W8R40338608564								
	Shipped: 01/09/2023	From: Lehigh Valley							
		Via: UPS GROUND							
		Broker Lic: WD0560158							
		FUEL SURCHARGE	1	EA	1	2.23	2.23	.00	
		PO LN 27							
<b>SUB TOTAL</b>									
<b>FREIGHT</b>									
<b>TAX</b>									
<b>AMOUNT</b>									
<b>\$77.03</b>									
<b>\$0.00</b>									
<b>\$0.00</b>									
<b>\$77.03</b>									

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 PRICING IS CONFIDENTIAL AND PROPRIETARY.

### Invoice

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

RCHE1DPD01

<b>Account Number</b>	58736372	<b>Date</b>	01/08/2023
<b>Document Number</b>	20197244	<b>Terms</b>	AR NET 30 DAYS
<b>Pay This Amount Before</b>		<b>02/07/2023</b>	<b>\$77.03</b>

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

**Please Remit To:**  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# MCKESSON

JCC REIMBURSEMENT - ARPA: EMS SYSTEM

## Invoice

McKesson Medical-Surgical  
Government Solutions LLC  
9954 Mayland Drive Suite 5176  
Henrico, VA 23233  
Bill To: 58736372

Page 1 of 1

Shipped From: RCHE1DPD01  
MCKESSON MEDICAL SURGICAL INC (BARTLETT)  
375 SPITZER ROAD  
BARTLETT, IL 60103  
SHIPPED FROM LICENSE: WD0560363

*Rob B* 1/12/23

APPROVED

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
419 16TH AVE  
RANSON WV 25438-5732

SCANNED

Shipped To: 58736373  
JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
ATTN ROBERT BURNER  
419 16TH AVE  
RANSON WV 25438-5732  
REGULATORY LICENSE: 24340

TIN: 20-2046702  
DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	85125162	<b>Invoice Number</b>	20197185
<b>Sales Order Date</b>	01/08/2023	<b>Invoice Date</b>	01/08/2023
<b>PO Number</b>	EMS Transition Supplies	<b>Payment Due Date</b>	02/07/2023
<b>Sales Rep Name</b>	GAGNON, PATRICK LOUIS	<b>Invoice Amount</b>	\$74.80

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

### Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
494232	Vendor: SUNMED Vend Cat#: 5-5333-01	BLADE, LARYNGOSCOPE MIL#1 DISP PO LN 14	10	EA	10	7.48	74.80	.00	
Tracking #		1Z0467A20338782542							
Shipped: 01/09/2023		From: MMS Chicago Via: UPS GROUND Broker Lic: WD0560158							

SUB TOTAL	FREIGHT	TAX	AMOUNT
\$74.80	\$0.00	\$0.00	\$74.80

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PRICING IS CONFIDENTIAL AND PROPRIETARY

## Invoice

# MCKESSON

McKesson Medical-Surgical  
Government Solutions LLC  
9954 Mayland Drive Suite 5176  
Henrico, VA 23233

RCHE1DPD01

<b>Account Number</b>	58736372	<b>Date</b>	01/08/2023
<b>Document Number</b>	20197185	<b>Terms</b>	AR NET 30 DAYS
<b>Pay This Amount Before</b>	02/07/2023	<b>Amount</b>	\$74.80

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

Please Remit To:  
MCKESSON MEDICAL - SURGICAL  
PO BOX 936279  
ATLANTA GA 31193-6279

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

**Invoice**

Page 1 of 3

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 4027 MARTINSBURG PIKE  
 CLEAR BROOK, VA 22624  
 SHIPPED FROM LICENSE: WD0559398

*Robert Burner 1/12/23*  
  


JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	<b>85125162</b>	<b>Invoice Number</b>	<b>20196916</b>
<b>Sales Order Date</b>	<b>01/08/2023</b>	<b>Invoice Date</b>	<b>01/08/2023</b>
<b>PO Number</b>	<b>EMS Transition Supplies</b>	<b>Payment Due Date</b>	<b>02/07/2023</b>
<b>Sales Rep Name</b>	<b>GAGNON, PATRICK LOUIS</b>	<b>Invoice Amount</b>	<b>\$1,148.16</b>

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

**Invoice Detail**

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
348524	Vendor: MGM03 Vend Cat#: 25-5862	IV START KIT, W/TEGADERM STR L PO LN 1	10	CS	10	62.90	629.00	.00	
Tracking # 1Z31FW670327268533 1Z31FW670327268551 1Z31FW670327268597									
Shipped: 01/09/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158									
817159	Vendor: STYPHY Vend Cat#: 11171-000040	SENSOR, PULSE OXIMETRY PED ADH PO LN 2	1	BX	0	340.85	.00	.00	
456600	Vendor: SCJDIS Vend Cat#: T603Q7	BRACKET, ALCARE DSPN W/CLIP (2 PO LN 3	12	EA	8	3.82	30.56	.00	
Tracking # 1Z31FW670327270315									
Shipped: 01/09/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158									
704488	Vendor: SMITHS Vend Cat#: 100/102/030	TUBE, TRACHEAL CLR MURPHY AIRC PO LN 4	2	BX	0	50.28	.00	.00	
704516	Vendor: SMITHS Vend Cat#: 100/102/035	TUBE, TRACHEAL CLR MURPHY AIRC PO LN 5	2	BX	0	50.28	.00	.00	

**Invoice**

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

RCHE1DPD01

<b>Account Number</b>	<b>58736372</b>	<b>Date</b>	<b>01/08/2023</b>
<b>Document Number</b>	<b>20196916</b>	<b>Terms</b>	<b>AR NET 30 DAYS</b>
<b>Pay This Amount Before</b>		<b>02/07/2023</b>	<b>\$1,148.16</b>

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

Please Remit To:  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

Bill To: 58736372  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

## Invoice

RCHE10P001

Shipped To:  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

<b>Invoice Number</b> 20196916	<b>PO Number</b> EMS Transition Supplies	<b>Invoice Date</b> 01/08/2023
--------------------------------	--	--------------------------------

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
704517	Vendor: SMITHS Vend Cat#: 100/102/040	TUBE, TRACHEAL CLR MURPHY AIRC PO LN 6	2	BX	0	50.28	.00	.00	
704518	Vendor: SMITHS Vend Cat#: 100/102/045	TUBE, TRACHEAL CLR MURPHY AIRC PO LN 7	2	BX	0	50.28	.00	.00	
704519	Vendor: SMITHS Vend Cat#: 100/102/050	TUBE, TRACHEAL CLR MURPHY AIRC PO LN 8	2	BX	0	33.70	.00	.00	
704520	Vendor: SMITHS Vend Cat#: 100/102/055	TUBE, TRACHEAL CLR MURPHY AIRC PO LN 9	2	BX	0	33.70	.00	.00	
465321	Vendor: TELFAR Vend Cat#: 112480025	TUBE, MURPHY ENDOTRACH CUFF 2. PO LN 10	2	BX	0	29.60	.00	.00	
872674	Vendor: SUNMED Vend Cat#: 9-0212-82 Tracking # 1Z31FW670327270315 Shipped: 01/09/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158	INTRODUCER, ENDOTRACH ADLT COU PO LN 11	4	BX	3	91.81	275.43	.00	PO# EMS TRANSITION SUPPLIES
787948	Vendor: SUNMED Vend Cat#: 5-5333-20	BLADE, LARYNGOSCOPE GRNLINE DI PO LN 12	1	BX	0	149.61	.00	.00	
494231	Vendor: SUNMED Vend Cat#: 5-5333-00	BLADE, LARYNGOSCOPE MIL#0 DISP PO LN 13	10	EA	0	7.48	.00	.00	
494232	Vendor: SUNMED Vend Cat#: 5-5333-01	BLADE, LARYNGOSCOPE MIL#1 DISP PO LN 14	10	EA	0	7.48	.00	.00	PO# EMS TRANSITION SUPPLIES
232283	Vendor: KENRSP Vend Cat#: 85865 Tracking # 1Z31FW670327270315 Shipped: 01/09/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158	STYLET, INTUBATION 14FR (20/BX PO LN 15	1	BX	1	105.57	105.57	.00	PO# EMS TRANSITION SUPPLIES
1113482	Vendor: GPBLTC Vend Cat#: BAAM-MARK VI	MONITOR, BAAM AIRWAY DISP F/15 PO LN 16	1	CS	0	127.23	.00	.00	
816875	Vendor: NARSCU Vend Cat#: ZZ-0056 Tracking # 1Z31FW670327270315 Shipped: 01/09/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158	NEEDLE, LUNG DECOMPRESS ARS 14 PO LN 17	10	EA	5	12.78	63.90	.00	PO# EMS TRANSITION SUPPLIES
629871	Vendor: SUNMED Vend Cat#: 5-5332-01	BLADE, LARYNGOSCOPE MACINTOSH PO LN 18	10	EA	0	7.48	.00	.00	
494228	Vendor: SUNMED Vend Cat#: 5-5332-02	BLADE, LARYNGOSCOPE MAC#2 DISP PO LN 19	1	BX	0	149.61	.00	.00	

# McKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

Bill To: 58736372  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

## Invoice

RCHE1DPD01

Shipped To:  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

<b>Invoice Number</b> 20196916	<b>PO Number</b> EMS Transition Supplies	<b>Invoice Date</b> 01/08/2023
--------------------------------	--	--------------------------------

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
494229	Vendor: SUNMED Vend Cat#: 5-5332-03	BLADE, LARYNGOSCOPE MAC#3 PO LN 20	10	EA	10	4.37	43.70	.00	
Tracking # 1Z31FW670327270315									
Shipped: 01/09/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158									
494230	Vendor: SUNMED Vend Cat#: 5-5332-04	BLADE, LARYNGOSCOPE MAC#4 PO LN 21	10	EA	0	7.48	.00	.00	
494234	Vendor: SUNMED Vend Cat#: 5-5333-03	BLADE, LARYNGOSCOPE MIL#3 PO LN 22	10	EA	0	4.37	.00	.00	
494233	Vendor: SUNMED Vend Cat#: 5-5333-02	BLADE, LARYNGOSCOPE MIL#2 PO LN 23	10	EA	0	7.48	.00	.00	
549286	Vendor: SUNMED Vend Cat#: 5-5333-04	BLADE, LARYNGOSCOPE MIL#4 PO LN 24	1	BX	0	149.61	.00	.00	
541420	Vendor: SUNMED Vend Cat#: 5-0236-39	HANDLE, LARYN GREENLINE FIBER PO LN 25	4	EA	0	80.88	.00	.00	
515387	Vendor: SUNMED Vend Cat#: 5-0236-10	HANDLE, PENLIGHT FIBER OPTIC G PO LN 26	10	EA	0	61.75	.00	.00	
		FUEL SURCHARGE PO LN 27	1	EA	0	2.23	.00	.00	

SUB TOTAL	FREIGHT	TAX	AMOUNT
\$1,148.16	\$0.00	\$0.00	\$1,148.16

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 PRICING IS CONFIDENTIAL AND PROPRIETARY.



Correspondence Address:  
5000 Tuttle Crossing Blvd  
Dublin, OH 43016  
PHONE: (800) 533-0523  
FAX: (800) 257-5713  
www.boundtree.com

Please Remit to:  
**BOUND TREE MEDICAL, LLC**  
23537 Network Place  
Chicago, IL 60673-1235

# Invoice

Invoice	84816235
Date	1/5/2023
Page	1 of 1
Account #	214163

TIN# 31-1739487

Customer DEA License No:



304H0101

2 / 145 000000145 01 MB 0.515  
JEFFERSON CO AMBULANCE AUTHORITY  
ACCOUNTS PAYABLE  
419 16TH AVE  
RANSON, WV 25438-5732

Ship To: SHIP003  
JEFFERSON CO AMBULANCE AUTHORITY  
419 16TH AVE  
RANSON, WV 25438-5732

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

Purchase Order #	Sales Order #	Sales Person	Ship Via	Ship Date	Payment Terms		
EMS TRANSITION SUPPL	104241484	R D'AMORE	>\$150 NO FRT	01/05/2023	NET 30		
Item #	Description	Ordered	Shipped	B/O	Unit Price	UOM	Ext. Price
177268	<p>THE FOLLOWING ITEMS SHIPPED FROM: 12 1605 ZEAGER RD SUITE 101 ELIZABETHTOWN, PA 17022 BTM Distributor License No: WD0559884</p> <p>SMART CAPNOLINE PLUS NON INTUBATED, ORAL NASAL W/O2 TUBING, ADULT/INTERMEDIATE 100EA/BX</p> <p><i>Rob B</i> 1/12/23</p> <p><b>APPROVED</b></p> <p><b>SCANNED</b></p> <p>Tracking Numbers: 393055594488 Note: * Indicates taxable item</p>	1	1	0	\$1,199.00	BX	\$1,199.00

Correspondence and inquiries  
can be sent to:  
5000 Tuttle Crossing Blvd  
Dublin, OH 43016

Merchandise	1,199.00
Misc	0.00
Tax	0.00
Freight	0.00
Trade Discount	0.00
Payment Recv'd	0.00
<b>Total</b>	<b>1,199.00</b>



ARPA EMS SVS ✓

Details for Order #112-9080076-5338663

Order Placed: January 15, 2023  
PO number : EMSTrans/OfficeSupply  
Amazon.com order number: 112-9080076-5338663  
Order Total: \$11.98

Not Yet Shipped	
<b>Items Ordered</b>	<b>Price</b>
2 of: Pelican 1042 Foam Set (1040-400-000), Grey Sold by: Amazon.com Condition: New	\$5.99
<b>Shipping Address:</b> LT John Lyons 419 16TH AVE RANSON, WV 25438-5732 United States	
<b>Shipping Speed:</b> Two-Day Shipping	

Payment information	
<b>Payment Method:</b> Visa   Last digits: 8772	Item(s) Subtotal: \$11.98
	Shipping & Handling: \$0.00
<b>Billing address</b> Jefferson County Emergency Services Agency JCESA 419 Sixteenth Ave. Ranson, WV 25438 United States	Total before tax: \$11.98 Estimated Tax: \$0.00
	<b>Grand Total: \$11.98</b>

To view the status of your order, return to [Order Summary](#).

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# McKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

## Invoice

Page 1 of 1

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 4027 MARTINSBURG PIKE  
 CLEAR BROOK, VA 22624  
 SHIPPED FROM LICENSE: WD0559398

*Robert Burner 1/11/23*

**APPROVED**

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

**SCANNED**

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	84047502	<b>Invoice Number</b>	20210467
<b>Sales Order Date</b>	12/22/2022	<b>Invoice Date</b>	01/11/2023
<b>PO Number</b>	EMS Transition Supplies	<b>Payment Due Date</b>	02/10/2023
<b>Sales Rep Name</b>	GAGNON, PATRICK LOUIS	<b>Invoice Amount</b>	\$689.07

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

### Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
1136758	Vendor: BIMDIX Vend Cat#: P01-102	EXTENSION SET, SALINE LOCK HIG PO LN 1	4	CS	4	171.67	686.68	.00	
	Tracking # 1Z31FW670327375417								
	Shipped: 01/12/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158								
		FUEL SURCHARGE PO LN 2	1	EA	1	2.39	2.39	.00	
<b>SUB TOTAL</b>							<b>\$689.07</b>		
<b>FREIGHT</b>							<b>\$0.00</b>		
<b>TAX</b>							<b>\$0.00</b>		
<b>AMOUNT</b>							<b>\$689.07</b>		

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.

PRICING IS CONFIDENTIAL AND PROPRIETARY.

## Invoice

# McKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

RCHE1DPD01

<b>Account Number</b>	58736372	<b>Date</b>	01/11/2023
<b>Document Number</b>	20210467	<b>Terms</b>	AR NET 30 DAYS
<b>Pay This Amount Before</b>	02/10/2023		<b>\$689.07</b>

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

**Please Remit To:**  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

## Invoice

Page 1 of 1

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 4027 MARTINSBURG PIKE  
 CLEAR BROOK, VA 22624  
 SHIPPED FROM LICENSE: WD0559398

*Robert Burner 1/18/23*  
**APPROVED**  
**SCANNED**

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	<b>84767629</b>	<b>Invoice Number</b>	<b>20210469</b>
<b>Sales Order Date</b>	<b>01/03/2023</b>	<b>Invoice Date</b>	<b>01/11/2023</b>
<b>PO Number</b>	<b>EMS TRANSITION SUPPLIES</b>	<b>Payment Due Date</b>	<b>02/10/2023</b>
<b>Sales Rep Name</b>	<b>GAGNON, PATRICK LOUIS</b>	<b>Invoice Amount</b>	<b>\$123.12</b>

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

### Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
632530	Vendor: LARDAL Vend Cat#: 845211	BAG, RESUSCITATOR SNGL ADLT (1 POL LN 5	1	CS	1	123.12	123.12	.00	
Tracking # 1Z31FW670327374918									
Shipped: 01/12/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158									

<b>SUB TOTAL</b>	<b>FREIGHT</b>	<b>TAX</b>	<b>AMOUNT</b>
<b>\$123.12</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$123.12</b>

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.

PRICING IS CONFIDENTIAL AND PROPRIETARY

## Invoice

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

RCHE1DPD01

<b>Account Number</b>	<b>58736372</b>	<b>Date</b>	<b>01/11/2023</b>
<b>Document Number</b>	<b>20210469</b>	<b>Terms</b>	<b>AR NET 30 DAYS</b>
<b>Pay This Amount Before</b>	<b>02/10/2023</b>	<b>Amount</b>	<b>\$123.12</b>

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

**Please Remit To:**  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

## Invoice

Page 1 of 1

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 4250 PATRIOT DRIVE, STE 100  
 GRAPEVINE, TX 76051  
 SHIPPED FROM LICENSE: WD0557325

*Robert Burner* 1/18/23

APPROVED

SCANNED

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	<b>85125162</b>	<b>Invoice Number</b>	<b>20217557</b>
<b>Sales Order Date</b>	<b>01/08/2023</b>	<b>Invoice Date</b>	<b>01/14/2023</b>
<b>PO Number</b>	<b>EMS Transition Supplies</b>	<b>Payment Due Date</b>	<b>02/13/2023</b>
<b>Sales Rep Name</b>	<b>GAGNON, PATRICK LOUIS</b>	<b>Invoice Amount</b>	<b>\$59.20</b>

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

### Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
465321	Vendor: TELFAR Vend Cat#: 112480025	TUBE, MURPHY ENDOTRACH CUFF 2. PO LN 10	2	BX	2	29.60	59.20	.00	
Tracking # 1Z7E08560363483678									
Shipped: 01/14/2023 From: Dallas Via: UPS GROUND Broker Lic: WD0560158									

<b>SUB TOTAL</b>	<b>FREIGHT</b>	<b>TAX</b>	<b>AMOUNT</b>
<b>\$59.20</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$59.20</b>

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.  
 PRICING IS CONFIDENTIAL AND PROPRIETARY.

## Invoice

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

RCHE1DPD01

<b>Account Number</b>	<b>58736372</b>	<b>Date</b>	<b>01/14/2023</b>
<b>Document Number</b>	<b>20217557</b>	<b>Terms</b>	<b>AR NET 30 DAYS</b>
<b>Pay This Amount Before</b>	<b>02/13/2023</b>	<b>\$59.20</b>	

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

Please Remit To:  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

JCC REIMBURSEMENT SYS  
 ARPA:EMS SYSTEM

# INVOICE

**ROBERTS OXYGEN COMPANY, INC.**  
 15830 REGLAND ROAD  
 PO BOX 5507  
 ROCKVILLE, MD 20855  
 (540) 662-1180



**Invoice Number** 898304  
**Invoice Date** 01/11/23  
**Invoice Amount** 50.50 UR  
**Customer Number** 100296

**SOLD TO: 100296**  
 JEFFERSON CO EMERGENCY SERV  
 419 SIXTEENTH AVE  
 RANSON, WV 25438

**SHIP TO: 6**  
 SHEPHERDSTOWN FIRE DEPT  
 8052 MARTINSBURG PIKE  
 SHEPHERDSTOWN, WV 25443

**REMIT TO: ROBERTS OXYGEN COMPANY, INC. PO Box 5507 Rockville, MD 20855**

Please detach this portion and return with your payment.

Terms - Net on Receipt of Invoice, 1.5% monthly finance charge over 30 days, 18.0% per annum.

CUSTOMER NO.		PURCHASE ORDER NO.	DATE DELIVERED	DELIVERY TICKET	BRANCH	SHIPPED VIA	
100296			01/11/23	046167	WINCHESTER -	DELIVERED	
INVOICE NO.		INVOICE DATE	ORDER PLACED BY			PLACED BY PHONE NO.	
898304		01/11/23	AUTOMATIC DELIVERY				
QUANTITY		PART NUMBER	DESCRIPTION	UNIT PRICE	UNIT	TOTAL CHARGED	
SHIPPED	RETURNED OR BACKORDERED						
3	3	R6	THERAPY OXYGEN, USP 141 CU FT		EA	.00	
		R12RUAD	D-MED OXYGEN, USP 15CF RU ALUM	7.500	EA	22.50	

*Red B 1/11/23*  
 APPROVED  
 SCANNED

**NEW e-Storefront...Manage Your Account 24/7!**

Pay invoices online by credit card. Place your orders with a customized shopping list, review cylinder balances, delivery tickets and statements. Sign up today at [www.robertsoxygen.com](http://www.robertsoxygen.com) click on Manage Your Account then Request Account.

For questions about this invoice  
 Please call: (540) 662-1180

Fed ID# 520822869, Duns# 042646877, UEI# HF9HCHM74RY5  
 PLEASE VISIT OUR WEBSITE AT [WWW.ROBERTSOXYGEN.COM](http://WWW.ROBERTSOXYGEN.COM)

SUB TOTAL	22.50
WV SALES TAX	.00
DELIVERY CHARGE	28.00
<b>AMOUNT DUE</b>	<b>50.50</b>

**PLEASE REMIT TO:**  
 ROBERTS OXYGEN COMPANY, INC.  
 PO Box 5507  
 Rockville, MD 20855

JCC REIMBURSEMENT ARPA EMS SYSTEM

# INVOICE

**ROBERTS OXYGEN COMPANY, INC.**  
 15830 REDLAND ROAD  
 PO BOX 5507  
 ROCKVILLE, MD 20855  
 (540) 662-1180



Invoice Number 899526  
 Invoice Date 01/11/23  
 Invoice Amount 74.00 UR  
 Customer Number 100296

**SOLD TO: 100296**  
 JEFFERSON CO EMERGENCY SERV  
 419 SIXTEENTH AVE  
 RANSON, WV 25438

**SHIP TO: 2**  
 CITIZENS FIRE COMPANY  
 245 CITIZENS WAY  
 CHA

REMIT TO: ROBERTS OXYGEN COMPANY, INC. PO Box 5507 Rockville, MD 20855

Please detach this portion and return with your payment.

Terms - Net on Receipt of Invoice, 1.5% monthly finance charge over 30 days, 18.0% per annum.

CUSTOMER NO. 100296	PURCHASE ORDER NO.	DATE DELIVERED 01/11/23	DELIVERY TICKET 046164	BRANCH WINCHESTER -	SHIPPED VIA DELIVERED
INVOICE NO. 899526	INVOICE DATE 01/11/23	ORDER PLACED BY AUTOMATIC			PLACED BY PHONE NO.

QUANTITY		PART NUMBER	DESCRIPTION	UNIT PRICE	UNIT	TOTAL CHARGED
SHIPPED	RETURNED OR BACKORDERED					
4	4	R12RUAD	D-MED OXYGEN, USP 15CF RU ALUM	7.500	EA	30.00
1	1	R6	THERAPY OXYGEN, USP 141 CU FT	16.000	EA	16.00

*Robt B*  
 APPROVED  
 01/18/23  
 SCANNED

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For questions about this invoice  
 Please call: (540) 662-1180

Fed ID# 520822869, Duns# 042646877, UEI# HF9HCHM74RY5  
 PLEASE VISIT OUR WEBSITE AT [WWW.ROBERTSOXYGEN.COM](http://WWW.ROBERTSOXYGEN.COM)

SUB TOTAL	46.00
WV SALES TAX	.00
DELIVERY CHARGE	28.00
<b>AMOUNT DUE</b>	<b>74.00</b>

**PLEASE REMIT TO:**  
 ROBERTS OXYGEN COMPANY, INC.  
 PO Box 5507  
 Rockville, MD 20855

# INVOICE

**ROBERTS OXYGEN COMPANY, INC.**  
 15830 REDLAND ROAD  
 PO BOX 5507  
 ROCKVILLE, MD 20855  
 (540) 662-1180



Invoice Number 899527  
 Invoice Date 01/11/23  
 Invoice Amount 60.00 UR  
 Customer Number 100296

**SOLD TO: 100296**  
 JEFFERSON CO EMERGENCY SERV  
 419 SIXTEENTH AVE  
 RANSON, WV 25438

**SHIP TO: 4**  
 FRIENDSHIP FIRE CO  
 1000 WASHINGTON ST  
 HARPERS FERRY, WV 25425

**REMIT TO: ROBERTS OXYGEN COMPANY, INC. PO Box 5507 Rockville, MD 20855**

Please detach this portion and return with your payment.

Terms - Net on Receipt of Invoice, 1.5% monthly finance charge over 30 days, 18.0% per annum.

CUSTOMER NO.	PURCHASE ORDER NO.	DATE DELIVERED	DELIVERY TICKET	BRANCH	SHIPPED VIA	
100296		01/11/23	046166	WINCHESTER -	DELIVERED	
INVOICE NO.	INVOICE DATE	ORDER PLACED BY			PLACED BY PHONE NO.	
899527	01/11/23	AUTOMATIC				
QUANTITY		PART NUMBER	DESCRIPTION	UNIT PRICE	UNIT	TOTAL CHARGED
SHIPPED	RETURNED OR BACKORDERED					
2	2	R12RUAD R6	D-MED OXYGEN, USP 15CF RU ALUM THERAPY OXYGEN, USP 141 CU FT	16.000	EA EA	.00 32.00

*Paul B*  
 1/18/23  
**APPROVED**  
**SCANNED**

**NEW e-Storefront...Manage Your Account 24/7!**

Pay invoices online by credit card. Place your orders with a customized shopping list, review cylinder balances, delivery tickets and statements. Sign up today at [www.robertsoxygen.com](http://www.robertsoxygen.com) click on **Manage Your Account** then **Request Account**.

For questions about this invoice  
 Please call: (540) 662-1180

Fed ID# 520822869, Duns# 042646877, UEI# HF9HCHM74RY5  
 PLEASE VISIT OUR WEBSITE AT [WWW.ROBERTSOXYGEN.COM](http://WWW.ROBERTSOXYGEN.COM)

SUB TOTAL	32.00
WV SALES TAX	.00
DELIVERY CHARGE	28.00
<b>AMOUNT DUE</b>	<b>60.00</b>

**PLEASE REMIT TO:**  
 ROBERTS OXYGEN COMPANY, INC.  
 PO Box 5507  
 Rockville, MD 20855



# ALBRIGHT CRUMBACKER & MOUL & ITELL

*Certified  
Public  
Accountants  
& Business  
Consultants*

1110 Professional Court, Suite 300  
Hagerstown, MD 21740  
301-739-5300  
E-mail: info@albrightcpa.com  
Web: www.albrightcpa.com

**Client #:** 14176000

**Invoice:** 33071

Jefferson County Emergency Services Agency  
Attn: Bob Burner  
419 16th Avenue  
Ranson, WV 25438

*Bob Burner* 1/26/23

**Date:** 01/19/2023

**APPROVED**

**Office:** Hagerstown

**SCANNED**

**Accounting and tax services rendered during December 31, 20 22:**

Prepared your accounts payable disbursements for the month ended December 31, 2022.

Payroll services for the month of December 2022, including related tax deposits.

Reconciled your bank account for the month ended November 30, 2022. \$1,600.00

Additional work during October 2022 related to EMS transition.

**JCC REIMBURSEMENT - ARPA:EMS SYSTEM** 400.00

Additional work during November 2022 related to EMS transition.

400.00

Billed Time & Expenses	\$2,400.00
Invoice Total	\$2,400.00

Date	Type	Reference	Debit	Credit	Balance	
01/01/23	Beginning Balance				\$6,240.00	
01/05/23	Check	6499		1,600.00	4,640.00	
01/19/23	Invoice #33071		2,400.00		7,040.00	
01/19/23	Amount Due				\$7,040.00	
	01/19/2023	12/31/2022	11/30/2022	10/31/2022	09/30/2022+	Total
	2,400.00	3,040.00	1,600.00	0.00	0.00	\$7,040.00

**Please return this portion with payment.**

**ID:** 14176000      **Office:** Hagerstown  
Jefferson County Emergency Services Agency  
304-728-3310

**Invoice:** 33071

**Date:** 01/19/2023

**Amount Due:** \$7,040.00



Card Type: \_\_\_\_\_

**Amount Enclosed:** \$ \_\_\_\_\_

Card#: \_\_\_\_\_

Exp Date: \_\_\_\_\_

Security Code: \_\_\_\_\_

Signature: \_\_\_\_\_

Zip Code Associated with Card: \_\_\_\_\_

**Invoices are due upon receipt. Your prompt payment is appreciated.**

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

JCC REIMBURSEMENT - ARPA: EMS SYSTEM

## Invoice

Page 1 of 2

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 4027 MARTINSBURG PIKE  
 CLEAR BROOK, VA 22624  
 SHIPPED FROM LICENSE: WD0559398

*Robert* 1/26/23

APPROVED

SCANNED

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	<b>85775630</b>	<b>Invoice Number</b>	<b>20218445</b>
<b>Sales Order Date</b>	<b>01/16/2023</b>	<b>Invoice Date</b>	<b>01/16/2023</b>
<b>PO Number</b>	<b>ALS Meds</b>	<b>Payment Due Date</b>	<b>02/15/2023</b>
<b>Sales Rep Name</b>	<b>GAGNON, PATRICK LOUIS</b>	<b>Invoice Amount</b>	<b>\$1,733.36</b>

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

### Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
916242	Vendor: 9FREKB NDC Num: & 63323001302	THIAMINE HCL, VL 100MG/ML 2ML PO LN 1	1	BX	1	366.25	366.25	.00	
	Tracking # 1Z31FW670327447134								
	Shipped: 01/17/2023	From: Winchester							Broker Lic: WD0560158
1112075	Vendor: LIFNUT Vend Cat#: 6739	GLUCOSE, GEL STRAWBERRY 15GM 1 PO LN 2	5	PK	5	8.17	40.85	.00	
	Tracking # 1Z31FW670327447134								
	Shipped: 01/17/2023	From: Winchester							Broker Lic: WD0560158
1185593	Vendor: 9AMPHA Vend Cat#: & 00548585000	GLUCAGON EMERGENCY KIT, VL W/S PO LN 3	4	EA	4	314.74	1258.96	.00	
	Tracking # 1Z31FW670327447134								
	Shipped: 01/17/2023	From: Winchester							Broker Lic: WD0560158
1071772	Vendor: NARSCU Vend Cat#: ZZ-0259	CASE, MEDICATION STORAGE ARMAD PO LN 4	1	EA	0	48.99	.00	.00	

## Invoice

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

RCHE1DPD01

<b>Account Number</b>	<b>58736372</b>	<b>Date</b>	<b>01/16/2023</b>
<b>Document Number</b>	<b>20218445</b>	<b>Terms</b>	<b>AR NET 30 DAYS</b>
<b>Pay This Amount Before</b>	<b>02/15/2023</b>	<b>Amount</b>	<b>\$1,733.36</b>

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

Please Remit To:  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# McKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

Bill To: 58736372  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

## Invoice

Page 2 of 2  
 RCHE1DPD01

Shipped To:  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

<b>Invoice Number</b> 20218445	<b>PO Number</b> ALS Meds	<b>Invoice Date</b> 01/16/2023
--------------------------------	---------------------------	--------------------------------

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
1167175	Vendor: 9AMNEL Vend Cat#: & 70121158105	SUCCINYLCHOLINE CHLORIDE, MDV PO LN 5	1	CT	0	471.17	.00	.00	
1006741	Vendor: 9XGENP Vend Cat#: & 39822420006	ROCURONIUM BROMIDE, VL 10MG/ML PO LN 6	1	BX	0	76.02	.00	.00	
944336	Vendor: 9HIKMP Vend Cat#: & 00641601310	DILTIAZEM HCL, SDV 5MG/ML 5ML PO LN 7	2	PK	0	88.14	.00	.00	
218100	Vendor: BBRAUN Vend Cat#: & L5202	DEX, IVSOL 10% 250ML (24/CS) PO LN 8	1	CS	1	67.30	67.30	.00	
	Tracking # 1Z31FW670327442406								
	Shipped: 01/17/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158								
		FUEL SURCHARGE PO LN 9	1	EA	0	2.23	.00	.00	

SUB TOTAL	FREIGHT	TAX	AMOUNT
\$1,733.36	\$0.00	\$0.00	\$1,733.36

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.  
 PRICING IS CONFIDENTIAL AND PROPRIETARY.

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

**Invoice**

Page 1 of 1

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 4027 MARTINSBURG PIKE  
 CLEAR BROOK, VA 22624  
 SHIPPED FROM LICENSE: WD0559398

*Robert Burner* 1/26/23

**APPROVED**

**SCANNED**

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	85776501	<b>Invoice Number</b>	20218446
<b>Sales Order Date</b>	01/16/2023	<b>Invoice Date</b>	01/16/2023
<b>PO Number</b>	EMS Transition Supplies	<b>Payment Due Date</b>	02/15/2023
<b>Sales Rep Name</b>	GAGNON, PATRICK LOUIS	<b>Invoice Amount</b>	\$445.00

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

**Invoice Detail**

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
812748	Vendor: TELFAR Vend Cat#: 350	GAUZE, COMBAT LE Z-FOLD STR WH PO LN 1	10	EA	10	44.50	445.00	.00	
Tracking #		1Z31FW670327447134							
Shipped: 01/17/2023		From: Winchester		Via: UPS GRD RES NORTHCOAST ONLY		Broker Lic: WD0560158			

<b>SUB TOTAL</b>	<b>FREIGHT</b>	<b>TAX</b>	<b>AMOUNT</b>
\$445.00	\$0.00	\$0.00	\$445.00

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.  
 PRICING IS CONFIDENTIAL AND PROPRIETARY.

**Invoice**

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

<b>Account Number</b>	58736372	<b>Date</b>	01/16/2023
<b>Document Number</b>	20218446	<b>Terms</b>	AR NET 30 DAYS
<b>Pay This Amount Before</b>	02/15/2023	<b>Amount</b>	\$445.00

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

**Please Remit To:**  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

**Invoice**

Page 1 of 2

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 4027 MARTINSBURG PIKE  
 CLEAR BROOK, VA 22624  
 SHIPPED FROM LICENSE: WD0559398

*Robert Burner* 1/26/23

**APPROVED**

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

**SCANNED**

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	<b>85775630</b>	<b>Invoice Number</b>	<b>20218449</b>
<b>Sales Order Date</b>	<b>01/16/2023</b>	<b>Invoice Date</b>	<b>01/16/2023</b>
<b>PO Number</b>	<b>ALS Meds</b>	<b>Payment Due Date</b>	<b>02/15/2023</b>
<b>Sales Rep Name</b>	<b>GAGNON, PATRICK LOUIS</b>	<b>Invoice Amount</b>	<b>\$733.70</b>

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

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**Invoice Detail**

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
1167175	Vendor: 9AMNEL Vend Cat#: & 70121158105	SUCCINYLCHOLINE CHLORIDE, MDV PO LN 5	1	CT	1	471.17	471.17	.00	
Tracking # 1Z31FW670127447558 Shipped: 01/17/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158									
1006741	Vendor: 9XGENP Vend Cat#: & 39822420006	ROCURONIUM BROMIDE, VL 10MG/ML PO LN 6	1	BX	1	76.02	76.02	.00	
Tracking # 1Z31FW670127447558 Shipped: 01/17/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158									
944336	Vendor: 9HIKMP Vend Cat#: & 00641601310	DILTIAZEM HCL, SDV 5MG/ML 5ML PO LN 7	2	PK	2	88.14	176.28	.00	
Tracking # 1Z31FW670127447558 Shipped: 01/17/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158									
		FUEL SURCHARGE PO LN 9	1	EA	1	2.23	2.23	.00	

**Invoice**

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

RCHE1DP501

<b>Account Number</b>	<b>58736372</b>	<b>Date</b>	<b>01/16/2023</b>
<b>Document Number</b>	<b>20218449</b>	<b>Terms</b>	<b>AR NET 30 DAYS</b>
<b>Pay This Amount Before</b>		<b>02/15/2023</b>	<b>\$733.70</b>

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

Please Remit To:  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279



# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

Invoice

Page 1 of 1

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 4027 MARTINSBURG PIKE  
 CLEAR BROOK, VA 22624  
 SHIPPED FROM LICENSE: WD0559398

*Robert Burner* 1/26/23

**APPROVED**

**SCANNED**

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	84767629	<b>Invoice Number</b>	20227128
<b>Sales Order Date</b>	01/03/2023	<b>Invoice Date</b>	01/19/2023
<b>PO Number</b>	EMS TRANSITION SUPPLIES	<b>Payment Due Date</b>	02/18/2023
<b>Sales Rep Name</b>	GAGNON, PATRICK LOUIS	<b>Invoice Amount</b>	\$123.12

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**Invoice Detail**

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
632530	Vendor: LARDAL Vend Cat#: 845211	BAG, RESUSCITATOR SNGL ADLT (1 PO LN 5	1	CS	1	123.12	123.12	.00	
Shipped: 01/19/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158									

<b>SUB TOTAL</b>	<b>FREIGHT</b>	<b>TAX</b>	<b>AMOUNT</b>
\$123.12	\$0.00	\$0.00	\$123.12

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**Invoice**

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

RCHE1DPD01

<b>Account Number</b>	58736372	<b>Date</b>	01/19/2023
<b>Document Number</b>	20227128	<b>Terms</b>	AR NET 30 DAYS
<b>Pay This Amount Before</b>	02/18/2023		\$123.12

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

**Please Remit To:**  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

## Invoice

Page 1 of 2

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 4027 MARTINSBURG PIKE  
 CLEAR BROOK, VA 22624  
 SHIPPED FROM LICENSE: WD0559398

*Robert Burner* 1/26/23

**APPROVED**

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

**SCANNED**

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	<b>85125162</b>	<b>Invoice Number</b>	<b>20227133</b>
<b>Sales Order Date</b>	<b>01/08/2023</b>	<b>Invoice Date</b>	<b>01/19/2023</b>
<b>PO Number</b>	<b>EMS Transition Supplies</b>	<b>Payment Due Date</b>	<b>02/18/2023</b>
<b>Sales Rep Name</b>	<b>GAGNON, PATRICK LOUIS</b>	<b>Invoice Amount</b>	<b>\$1,193.56</b>

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

### Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
787948	Vendor: SUNMED Vend Cat#: 5-5333-20	BLADE, LARYNGOSCOPE GRNLINE DI PO LN 12	1	BX	1	149.61	149.61	.00	
	Tracking # 1Z31FW670327506892								
	Shipped: 01/19/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158								
1113482	Vendor: GPBLTC Vend Cat#: BAAM-MARK VI	MONITOR, BAAM AIRWAY DISP F/15 PO LN 16	1	CS	1	127.23	127.23	.00	
	Tracking # 1Z31FW670327534665								
	Shipped: 01/19/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158								
494228	Vendor: SUNMED Vend Cat#: 5-5332-02	BLADE, LARYNGOSCOPE MAC#2 DISP PO LN 19	1	BX	1	149.61	149.61	.00	
	Tracking # 1Z31FW670327506918								
	Shipped: 01/19/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158								
549286	Vendor: SUNMED Vend Cat#: 5-5333-04	BLADE, LARYNGOSCOPE MIL#4 DISP PO LN 24	1	BX	1	149.61	149.61	.00	
	Tracking # 1Z31FW670327506892								

## Invoice

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

RCHEIDPD01

<b>Account Number</b>	<b>58736372</b>	<b>Date</b>	<b>01/19/2023</b>
<b>Document Number</b>	<b>20227133</b>	<b>Terms</b>	<b>AR NET 30 DAYS</b>
<b>Pay This Amount Before</b>	<b>02/18/2023</b>	<b>Amount</b>	<b>\$1,193.56</b>

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

Please Remit To:  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# McKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

Bill To: 58736372  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

## Invoice

RCHE1DPD01

Shipped To:  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

<b>Invoice Number</b> 20227133	<b>PO Number</b> EMS Transition Supplies	<b>Invoice Date</b> 01/19/2023
--------------------------------	--	--------------------------------

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
Shipped: 01/19/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158									
515387	Vendor: SUNMED Vend Cat#: 5-0236-10	HANDLE, PENLIGHT FIBER OPTIC G PO LN 26	10	EA	10	61.75	617.50	.00	
Tracking # 1Z31FW670327506892									
Shipped: 01/19/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158									
<b>SUB TOTAL</b>						<b>FREIGHT</b>	<b>TAX</b>	<b>AMOUNT</b>	
<b>\$1,193.56</b>						<b>\$0.00</b>	<b>\$0.00</b>	<b>\$1,193.56</b>	

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 PRICING IS CONFIDENTIAL AND PROPRIETARY.

ARPA EMS SYS.



3015 Carrington Mill Blvd, Suite 300  
Morrisville, NC 27560  
USA



Invoice			
Number	Date	Page	Due Date
9506485851	01/17/2023	Page 1 of 1	02/16/2023
Payer Account No. 1227236			

Bill To Party Account No. 1227236

|||||  
T1 P1 \*\*\*\*\*SNGPL  
##-0001-##-52-74-74-65  
JEFFERSON COUNTY EMERGENCY  
SERVICES AGE  
419 16TH AVENUE  
RANSON WV 25438-5732  
USA



Ship To Party Account No. 1227236  
JEFFERSON COUNTY EMERGENCY  
ATTN: LT. LYONS  
419 16TH AVENUE  
RANSON, WV 25438-5732  
USA

Payment Remittance Address:  
Teleflex LLC  
c/o Teleflex Funding LLC  
PO Box 936729  
Atlanta, GA 31193-6729

Wire Transfer Remittance:  
Teleflex LLC, c/o Teleflex Funding LLC  
Account No. 4708086079  
Wells Fargo Bank, N.A.  
Routing/ABA No. 121000248  
SWIFT Code: WFBUS65

Overnight Remittance Address:  
Teleflex LLC  
c/o Teleflex Funding LLC  
Attn: PO Box 936729  
3585 Atlanta Avenue  
Hapeville, GA 30354-1705

Purchase Order Number	Sales Order Number	Order Placed By	Delivery Number	Carrier/Level of Service
EMS Transition Supplies	9755596	John Lyons	8009857031	UPS SUPPLY CHAIN SOLUTION
Tracking Number	Freight Terms	Incoterms	Payment Terms	Currency
126069230382064848	Pre-pay & Add	FOB Origin	Net 30	USD

Line	Material	Material Description	UOM	Shipped Qty	Back Order Qty	Unit Price	Total
000010	9018P-VC-005	EZ IO 15MM NEEDLE SET + STABILIZER	BX	2		665.00	1,330.00
Brand: Arrow Batch Number: 66529946 Expiration Date: 09/30/2026 Country of Origin: USA							

*John Lyons*  
1/26/23  
**APPROVED**  
**SCANNED**

Comments: The prices reflected on this invoice incorporate applicable discounts to Teleflex's list prices for the named products and may be subject to further discounts, rebates and/or warranties (if any) per your agreement with Teleflex. Consistent with 42 U.S.C. 1320a-7b(b)(3)(A) and/or 42 C.F.R. 1001.952(h), this disclaimer constitutes Teleflex's notice to you that you must fully and accurately report any reduced price received as a discount, rebate or warranty in applicable cost reports and agree to provide certain related information to state and federal agencies upon request as required by law or regulation.

Sub-Total	1,330.00
Freight Ground	15.50
Tax	0.00
<b>Total USD</b>	<b>1,345.50</b>

The terms on our Acknowledgment and Invoices state Teleflex LLC's entire contract. Teleflex LLC shall not be bound by any different, additional, or conflicting terms and conditions contained in Buyer's Purchase Order unless expressly agreed to in writing by Teleflex LLC. Teleflex LLC's Acknowledgment will not hereafter be subject to any change, modification, or conflicting language without Teleflex LLC's prior written consent. To access our terms and conditions please visit <https://www.teleflex.com/usa/en/legal/terms-and-conditions-of-sale/>

Tel 866-246-6990 | Email [cs@teleflex.com](mailto:cs@teleflex.com) | [www.teleflex.com](http://www.teleflex.com) | EIN: 83-1629418

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

## Invoice

Page 1 of 1

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 4250 PATRIOT DRIVE, STE 100  
 GRAPEVINE, TX 76051  
 SHIPPED FROM LICENSE: WD0557325

1/31/23

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	86290717	<b>Invoice Number</b>	20241051
<b>Sales Order Date</b>	01/23/2023	<b>Invoice Date</b>	01/23/2023
<b>PO Number</b>	ALS MEDS	<b>Payment Due Date</b>	02/22/2023
<b>Sales Rep Name</b>	GAGNON, PATRICK LOUIS	<b>Invoice Amount</b>	\$350.13

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

### Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
1201171	Vendor: IMDSYS Vend Cat#: & 76329330201	DEXTROSE, SYR 50% 50ML (10/CT) PO LN 1	2	CT	2	173.95	347.90	.00	
	Tracking # 1Z7E08560363733844	1Z7E08560363761555							
	Shipped: 01/24/2023	From: Dallas Via: UPS GROUND							Broker Lic: WD0560158
		FUEL SURCHARGE PO LN 2	1	EA	1	2.23	2.23	.00	
<b>SUB TOTAL</b>						<b>\$350.13</b>			
<b>FREIGHT</b>						<b>\$0.00</b>			
<b>TAX</b>						<b>\$0.00</b>			
<b>AMOUNT</b>						<b>\$350.13</b>			

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.

PRICING IS CONFIDENTIAL AND PROPRIETARY

## Invoice

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

<b>Account Number</b>	58736372	<b>Date</b>	01/23/2023
<b>Document Number</b>	20241051	<b>Terms</b>	AR NET 30 DAYS
<b>Pay This Amount Before</b>	02/22/2023		<b>\$350.13</b>

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

**Please Remit To:**  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

## Invoice

Page 1 of 1

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 4250 PATRIOT DRIVE, STE 100  
 GRAPEVINE, TX 76051  
 SHIPPED FROM LICENSE: WD0557325

*Robert Burner* 1/31/23

**APPROVED**

**SCANNED**

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	<b>86297475</b>	<b>Invoice Number</b>	<b>20241054</b>
<b>Sales Order Date</b>	<b>01/23/2023</b>	<b>Invoice Date</b>	<b>01/23/2023</b>
<b>PO Number</b>	<b>ALS MEDS</b>	<b>Payment Due Date</b>	<b>02/22/2023</b>
<b>Sales Rep Name</b>	<b>GAGNON, PATRICK LOUIS</b>	<b>Invoice Amount</b>	<b>\$521.85</b>

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

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### Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
1201171	Vendor: IMDSYS Vend Cat#: & 76329330201	DEXTROSE, SYR 50% 50ML (10/CT) PO LN 1	3	CT	3	173.95	521.85	.00	
Tracking # 1Z7E08560363733844									
Shipped: 01/24/2023 From: Dallas Via: UPS GROUND Broker Lic: WD0560158									

<b>SUB TOTAL</b>	<b>FREIGHT</b>	<b>TAX</b>	<b>AMOUNT</b>
<b>\$521.85</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$521.85</b>

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.  
 PRICING IS CONFIDENTIAL AND PROPRIETARY.

## Invoice

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

RCHE10PD01

<b>Account Number</b>	<b>58736372</b>	<b>Date</b>	<b>01/23/2023</b>
<b>Document Number</b>	<b>20241054</b>	<b>Terms</b>	<b>AR NET 30 DAYS</b>
<b>Pay This Amount Before</b>	<b>02/22/2023</b>	<b>\$521.85</b>	

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

**Please Remit To:**  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

Invoice

Page 1 of 1

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 4027 MARTINSBURG PIKE  
 CLEAR BROOK, VA 22624  
 SHIPPED FROM LICENSE: WD0559398

*Robert Burner*  
 1/31/23

**APPROVED**

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

**SCANNED**

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	84767629	<b>Invoice Number</b>	20246311
<b>Sales Order Date</b>	01/03/2023	<b>Invoice Date</b>	01/25/2023
<b>PO Number</b>	EMS TRANSITION SUPPLIES	<b>Payment Due Date</b>	02/24/2023
<b>Sales Rep Name</b>	GAGNON, PATRICK LOUIS	<b>Invoice Amount</b>	\$67.40

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

**Invoice Detail**

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
704524	Vendor: SMITHS Vend Cat#: 100/102/065	TUBE, TRACHEAL CLR MURPHY AIRC PO LN 7	2	BX	2	33.70	67.40	.00	
Tracking # 1Z31FW670327648631									
Shipped: 01/25/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158									

<b>SUB TOTAL</b>	<b>FREIGHT</b>	<b>TAX</b>	<b>AMOUNT</b>
\$67.40	\$0.00	\$0.00	\$67.40

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.  
 PRICING IS CONFIDENTIAL AND PROPRIETARY.

**Invoice**

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

<b>Account Number</b>	58736372	<b>Date</b>	01/25/2023
<b>Document Number</b>	20246311	<b>Terms</b>	AR NET 30 DAYS
<b>Pay This Amount Before</b>	02/24/2023	<b>Amount</b>	\$67.40

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

**Please Remit To:**  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233  
 Bill To: 58736372

**JCC REIMBURSEMENT - ARPA: EMS SYSTEM**

Invoice

Page 1 of 2

Shipped From:  
 MCKESSON MEDICAL-SURGICAL INC  
 4027 MARTINSBURG PIKE  
 CLEAR BROOK, VA 22624  
 SHIPPED FROM LICENSE: WD0559398

*Pat B*  
 1/31/23

**APPROVED**

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

**SCANNED**

Shipped To: 58736373  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

TIN: 20-2046702  
 DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
 Customer Service: 1-833-343-2700

<b>Sales Order Number</b>	85125162	<b>Invoice Number</b>	20246313
<b>Sales Order Date</b>	01/08/2023	<b>Invoice Date</b>	01/25/2023
<b>PO Number</b>	EMS Transition Supplies	<b>Payment Due Date</b>	02/24/2023
<b>Sales Rep Name</b>	GAGNON, PATRICK LOUIS	<b>Invoice Amount</b>	\$436.48

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

**Invoice Detail**

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
704488	Vendor: SMITHS Vend Cat#: 100/102/030	TUBE, TRACHEAL CLR MURPHY AIRC PO LN 4	2	BX	2	50.28	100.56	.00	
Tracking # 1Z31FW670327648631 Shipped: 01/25/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158									
704516	Vendor: SMITHS Vend Cat#: 100/102/035	TUBE, TRACHEAL CLR MURPHY AIRC PO LN 5	2	BX	2	50.28	100.56	.00	
Tracking # 1Z31FW670327648631 Shipped: 01/25/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158									
704517	Vendor: SMITHS Vend Cat#: 100/102/040	TUBE, TRACHEAL CLR MURPHY AIRC PO LN 6	1	BX	1	50.28	50.28	.00	
Tracking # 1Z31FW670327648631 Shipped: 01/25/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158									
704518	Vendor: SMITHS Vend Cat#: 100/102/045	TUBE, TRACHEAL CLR MURPHY AIRC PO LN 7	1	BX	1	50.28	50.28	.00	
Tracking # 1Z31FW670327648631									

Invoice

# MCKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

RCHE1DPD01

<b>Account Number</b>	58736372	<b>Date</b>	01/25/2023
<b>Document Number</b>	20246313	<b>Terms</b>	AR NET 30 DAYS
<b>Pay This Amount Before</b>	02/24/2023		<b>\$436.48</b>

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
 RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

**Please Remit To:**  
 MCKESSON MEDICAL - SURGICAL  
 PO BOX 936279  
 ATLANTA GA 31193-6279

# McKESSON

McKesson Medical-Surgical  
 Government Solutions LLC  
 9954 Mayland Drive Suite 5176  
 Henrico, VA 23233

Bill To: 58736372  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 419 16TH AVE  
 RANSON WV 25438-5732

## Invoice

Page 2 of 2  
 RCHE1DPD01

Shipped To:  
 JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
 ATTN ROBERT BURNER  
 419 16TH AVE  
 RANSON WV 25438-5732  
 REGULATORY LICENSE: 24340

<b>Invoice Number</b> 20246313	<b>PO Number</b> EMS Transition Supplies	<b>Invoice Date</b> 01/25/2023
--------------------------------	--	--------------------------------

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
Shipped: 01/25/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158									
704519	Vendor: SMITHS Vend Cat#: 100/102/050	TUBE, TRACHEAL CLR MURPHY AIRC PO LN 8	2	BX	2	33.70	67.40	.00	
Tracking # 1Z31FW670327648631									
Shipped: 01/25/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158									
704520	Vendor: SMITHS Vend Cat#: 100/102/055	TUBE, TRACHEAL CLR MURPHY AIRC PO LN 9	2	BX	2	33.70	67.40	.00	
Tracking # 1Z31FW670327648631									
Shipped: 01/25/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158									

SUB TOTAL	FREIGHT	TAX	AMOUNT
\$436.48	\$0.00	\$0.00	\$436.48

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.  
 PRICING IS CONFIDENTIAL AND PROPRIETARY.

ARPA EMS SYS

INVOICE

**ROBERTS OXYGEN COMPANY, INC.**  
 15830 REOLAND ROAD  
 PO BOX 5507  
 ROCKVILLE, MD 20855  
 (540) 662-1180



Invoice Number 927109  
 Invoice Date 01/25/23  
 Invoice Amount 97.50 UR  
 Customer Number 100296

**SOLD TO: 100296**  
 JEFFERSON CO EMERGENCY SERV  
 419 SIXTEENTH AVE  
 RANSON, WV 25438

**SHIP TO: 3**  
 INDEPENDENT FIRE COMPANY INC  
 200 WEST SECOND AVE  
 RANSON, WV 25438

REMIT TO: ROBERTS OXYGEN COMPANY, INC. PO Box 5507 Rockville, MD 20855

Please detach this portion and return with your payment.

Terms - Net on Receipt of Invoice, 1.5% monthly finance charge over 30 days, 18.0% per annum.

CUSTOMER NO.		PURCHASE ORDER NO.		DATE DELIVERED	DELIVERY TICKET	BRANCH	SHIPPED VIA	
100296				01/25/23	064489	WINCHESTER -	DELIVERED	
INVOICE NO.		INVOICE DATE		ORDER PLACED BY			PLACED BY PHONE NO.	
927109		01/25/23		AUTOMATIC				
QUANTITY		PART NUMBER	DESCRIPTION	UNIT PRICE	UNIT	TOTAL CHARGED		
SHIPPED	RETURNED OR BACKORDERED							
2		R6	THERAPY OXYGEN, USP 141 CU FT	16.000	EA	32.00		
5		R12RUAD	D-MED OXYGEN, USP 15CF RU ALUM	7.500	EA	37.50		

*Red BJ* 1/31/23

**NEW e-Storefront...Manage Your Account 24/7!**

Pay invoices online by credit card. Place your orders with a customized shopping list, review cylinder balances, delivery tickets and statements. Sign up today at [www.robertsoxygen.com](http://www.robertsoxygen.com) click on **Manage Your Account** then **Request Account**.

For questions about this invoice  
 Please call: (540) 662-1180

Fed ID# 520822869, Duns# 042646877, UEI# HF9HCHM74RY5  
 PLEASE VISIT OUR WEBSITE AT [WWW.ROBERTSOXYGEN.COM](http://WWW.ROBERTSOXYGEN.COM)

<b>SUB TOTAL</b>	69.50
WV <b>SALES TAX</b>	.00
<b>DELIVERY CHARGE</b>	28.00
<b>AMOUNT DUE</b>	97.50

**PLEASE REMIT TO:**  
 ROBERTS OXYGEN COMPANY, INC.  
 PO Box 5507  
 Rockville, MD 20855

ARPA EMS SYS

**ROBERTS OXYGEN COMPANY, INC.**  
 15830 RECLAND ROAD  
 PO BOX 5507  
 ROCKVILLE, MD 20855  
 (540) 662-1180

**SOLD TO: 100296**  
 JEFFERSON CO EMERGENCY SERV  
 419 SIXTEENTH AVE  
 RANSON, WV 25438



**INVOICE**

Invoice Number 927478  
 Invoice Date 01/25/23  
 Invoice Amount 43.00 UR  
 Customer Number 100296

**SHIP TO: 2**  
 CITIZENS FIRE COMPANY  
 245 CITIZENS WAY  
 CHA

REMIT TO: ROBERTS OXYGEN COMPANY, INC. PO Box 5507 Rockville, MD 20855

Please detach this portion and return with your payment.

Terms - Net on Receipt of Invoice, 1.5% monthly finance charge over 30 days, 18.0% per annum.

CUSTOMER NO. 100296	PURCHASE ORDER NO.	DATE DELIVERED 01/25/23	DELIVERY TICKET 064488	BRANCH WINCHESTER -	SHIPPED VIA DELIVERED
INVOICE NO. 927478	INVOICE DATE 01/25/23	ORDER PLACED BY AUTOMATIC		PLACED BY PHONE NO.	

QUANTITY		PART NUMBER	DESCRIPTION	UNIT PRICE	UNIT	TOTAL CHARGED
SHIPPED	RETURNED OR BACKORDERED					
2	2	R12RUAD R6	D-MED OXYGEN, USP 15CF RU ALUM THERAPY OXYGEN, USP 141 CU FT	7.500	EA EA	15.00 .00

*Red B* 1/31/23

**NEW e-Storefront...Manage Your Account 24/7!**

Pay invoices online by credit card. Place your orders with a customized shopping list, review cylinder balances, delivery tickets and statements. Sign up today at [www.robertsoxygen.com](http://www.robertsoxygen.com) click on **Manage Your Account** then **Request Account**.

For questions about this invoice  
 Please call: (540) 662-1180

Fed ID# 520822869, Duns# 042646877, UEI# HF9HCHM74RY5  
 PLEASE VISIT OUR WEBSITE AT [WWW.ROBERTSOXYGEN.COM](http://WWW.ROBERTSOXYGEN.COM)

SUB TOTAL	15.00
WV SALES TAX	.00
DELIVERY CHARGE	28.00
<b>AMOUNT DUE</b>	<b>43.00</b>

**PLEASE REMIT TO:**

ROBERTS OXYGEN COMPANY, INC.  
 PO Box 5507  
 Rockville, MD 20855



PUBLIC SAFETY GROUP, INC.

Witmer Public Safety Group  
101 Independence Way  
Coatesville, PA 19320

www.wpsginc.com  
610-857-8070

**BILL TO:**

Jefferson Co. Emergency Service Agency  
419 16th Ave  
Ranson, WV 25438-5732  
United States

ARPA  
EMS  
SYS

Witmer Public Safety Group, Inc.  
—HOME OF—



<b>INVOICE</b>	INV190652
Date:	01/26/2023
Customer:	4183 Jefferson Co. Emergency Service Agency
Sales Order:	SO166227
Terms:	Net 30
PO#:	EMS Transition (1106)
Sales Rep:	John Shipley
Shipping Method:	Williamsport Pickup
Ship To:	Jefferson Co. Emergency Service Agency 419 16th Ave Ranson, WV 25438-5732 United States
<b>AMOUNT DUE:</b>	<b>\$350.00</b>

#	Item Name	Description	Ordered	Shipped	B/O	Each	Amount
1	44450	Streamlight Fire Vulcan LED, Standard System AC/DC, Orange	2	2	0	\$175.00	\$350.00

Please direct all payment inquiries to Accounts Receivable  
Phone: 800-852-6088 • Email: Invoices@wpsginc.com  
NOTE: All outstanding invoices being paid with a credit card  
after 30 days will be charged a 3% processing fee.

<b>Subtotal:</b>	\$350.00
<b>Discount:</b>	\$0.00
<b>Tax Total (%):</b>	\$0.00
<b>Freight:</b>	\$0.00
<b>Total:</b>	\$350.00
<b>Amount Paid:</b>	\$0.00
<b>Amount Due:</b>	<b>\$350.00</b>

*Red B* 1/31/23  
**APPROVED**  
**SCANNED**

-----  
Please return this section with payment. Your prompt payment is appreciated.

**Remit Payment To:**

Witmer Public Safety Group Inc.  
101 Independence Way  
Coatesville, PA 19320

**Customer:**

Jefferson Co. Emergency  
Service Agency

**Customer ID:**

4183

**Invoice #:**

INV190652

**Amount Due:**

\$350.00

**Amount Paid:**

ARPA EMS SYS ✓



Details for Order #114-2100372-2293804

Order Placed: January 31, 2023  
PO number : EMSTRANSSUPPLIES  
Amazon.com order number: 114-2100372-2293804  
Order Total: \$59.90

Not Yet Shipped	
<b>Items Ordered</b>	<b>Price</b>
10 Of: Pelican 1042 Foam Set (1040-400-000), Grey Sold by: Amazon.com Condition: New	\$5.99
<b>Shipping Address:</b> John Lyons 419 16TH AVE RANSON, WV 25438-5732 United States	
<b>Shipping Speed:</b> FREE Prime Delivery	

Payment information	
<b>Payment Method:</b> Visa   Last digits: 8772	Item(s) Subtotal: \$59.90 Shipping & Handling: \$0.00
<b>Billing address</b> Jefferson County Emergency Services Agency JCESA 419 Sixteenth Ave. Ranson, WV 25438 United States	----- Total before tax: \$59.90 Estimated Tax: \$0.00 ----- <b>Grand Total: \$59.90</b>

To view the status of your order, return to [Order Summary](#).



# Invoice

Please send payments to:  
 ESO Solutions, Inc.  
 PO Box 679449  
 Dallas, TX 75267-9449

Date:  
 Invoice #

1/31/2023  
 ESO-102931

Terms  
 Due Date  
 PO#

Net 30  
 3/2/2023

*Pat B* 2/1/23

APPROVED

SCANNED

**Bill To**

Jefferson County Emergency Services Agency  
 419 16th Avenue  
 Ranson WV 25437  
 United States  
[ehannon@icesa.org](mailto:ehannon@icesa.org)

**Ship To**

Jefferson County Emergency Services Agency  
 419 16th Avenue  
 Ranson  
 WV 25437  
 US

Item	From	To	QTY	UOM	Total
EHR Cardiac Monitor Integration Cardiac monitors integration. Allows for import of cardiac monitor data via local or cloud integration. Ongoing maintenance included. Unlimited connections.	2/9/2023	2/8/2024	6,500	Incidents	USD \$995.00
EHR Fax Enables faxing of patient care records to destination facilities.	2/9/2023	2/8/2024	6,500	Incidents	USD \$585.00
EHR CAD Integration Allows for integration of CAD data into EHR mobile and web application. Ongoing maintenance included. Additional fees from your CAD vendor may apply.	2/9/2023	2/8/2024	6,500	Incidents	USD \$2,495.00

**Invoice Message:**

Total (Without Tax):	USD \$4,075.00
Tax:	USD \$0.00
Grand Total:	USD \$4,075.00
Amount Paid/Credit:	USD \$0.00
Total Recurring:	USD \$4,075.00
Total One-Time:	
<b>Invoice Balance:</b>	<b>USD \$4,075.00</b>

**ACH/EFT bank information:**

PNC Bank  
 Routing: 031207607  
 Account Number: 8026412499  
 Swift Code: PNCCUS33

**Check Remittance lockbox address:**

ESO Solutions, Inc.  
 PO Box 679449  
 Dallas, TX 75267-9449

Please submit payment remittances to [accountsreceivable@eso.com](mailto:accountsreceivable@eso.com) to ensure correct invoice application.

Amounts invoiced are per your agreement(s) which may include annual uplift and an increase in quantities based on usage overages. Your payment of this invoice serves as acceptance of such increases.

Questions? Contact: [AccountsReceivable@eso.com](mailto:AccountsReceivable@eso.com) 866-766-9471 option 8

Tax ID: 36-4566209

**ESO will never e-mail you soliciting payment information. Please call us or e-mail [AccountsReceivable@eso.com](mailto:AccountsReceivable@eso.com) if you have any questions or wish to make a change.**

**This invoice presents the total net price of the product(s) and/or service(s) which is inclusive (net) of any discount. As the buyer of such product(s)/service(s), you may have additional reporting obligations to federal or state health care programs (including pursuant to 42 CFR 1001.952(h)) and/or upon inquiry by the HHS Secretary or other state or federal agencies. As the buyer, you must adhere to any other relevant federal or third-party payer requirements.**

**Pay Online**

[For a 3% fee, pay via Card](#)

Direct Card Payment Link: [https://app.suitesync.io/payments/acct\\_1FelgtGvY2g6ha8S/custinvc/4576837?amount=419725.00](https://app.suitesync.io/payments/acct_1FelgtGvY2g6ha8S/custinvc/4576837?amount=419725.00)

[Pay via Online Bank Transfer](#)



Please send payments to:  
ESO Solutions, Inc.  
PO Box 679449  
Dallas, TX 75267-9449

# Invoice

<b>Date:</b>	1/31/2023
<b>Invoice #</b>	ESO-102931
<b>Terms</b>	Net 30
<b>Due Date</b>	3/2/2023
<b>PO#</b>	

Direct Bank Transfer Link: [https://app.suitesync.io/payments/acct\\_1FelgtGvY2g6ha8S/custinvc/4576837?card=false](https://app.suitesync.io/payments/acct_1FelgtGvY2g6ha8S/custinvc/4576837?card=false)

# INVOICE

JCC REIMBURSEMENT - ARPA: EMS SYSTEM



SHIP TO: 1249744	MAKE PAYMENT TO:
JEFFERSON COUNTY EMER SVCS AGENCY 419 16TH AVE RANSON WV 25438-5732	STRYKER SALES, LLC P.O. BOX 93308 CHICAGO, IL 60673-3308 PH - 1-800-733-2383
BILL TO: 1249744	The price shown on this invoice is net of discounts provided at the time of purchase. Some of the products listed on this invoice may be subject to rebates or additional discounts, for which documentation is provided by Stryker. You must properly report and appropriately reflect discounts and rebates in Medicare/Medicaid cost reports and all claims for payment filed with third party payors as required by law or contract, and provide agents of the United States or a state agency with access to all information from Stryker concerning discounts and rebates upon request.
JEFFERSON COUNTY EMER SVCS AGENCY 419 16TH AVE RANSON WV 25438-5732	

**STRYKER MEDICAL**  
 1901 Romence Rd Parkway  
 Portage, MI 49002  
 Phone Number: (800) 327-0770  
 Fax Number: (866) 551-2618  
 www.stryker.com

INVOICE NUMBER	DATE	CUSTOMER P.O.	SALES REP	ORDER NUMBER	PAGE
4027736 M	01/24/23	EMS Transition-John Lyons	WARD, CHRISTOPHER	11719677 SO	1 of 1

TERMS	SHIPPING METHOD
Net 30 days	

SHIPPING INSTRUCTIONS	DELIVERY INSTRUCTIONS

LINE NO.	DESCRIPTION	ITEM NUMBER	GTIN	PROMO CODE	SERIAL NUMBER	QUANTITY SHIPPED	UNIT PRICE	EXTENDED PRICE
1.000	FILTERLINE,ADV, AD, ORAL-N, O2	MVAO100U				2	954.8500	1,909.70
2.000	STD, S-TERM, 100 GENERAL FREIGHT	5555522000				1	76.3800	76.38

*Paul B* 2/1/23

CLAIMS FOR SHORT SHIPMENT MUST BE MADE WITHIN 30 DAYS OF RECEIPT. NO MERCHANDISE MAY BE RETURNED TO STRYKER FOR CREDIT WITHOUT OUR EXPRESS PERMISSION IN ADVANCE.	CURRENCY	SUBTOTAL	SALES TAX	TOTAL
	USD	1,986.08		1,986.08
Subject to applicable shipping and handling charges				

FINANCE CHARGE OF 1 1/2% (ANNUAL PERCENTAGE RATE IS 18%) IS ADDED TO ALL PAST DUE ACCOUNTS.  
 \* Lease payment plans are available. If interested, please contact A/R immediately to start the application process. 01/24/2023 22:11:15

# INVOICE

ARPA EMS SYS

191229 0 8567-2.2



**SHIP TO:** 1249744  
**JEFFERSON COUNTY EMER SVCS AGENCY**  
 419 16TH AVE  
 RANSON WV 25438-5732

**MAKE PAYMENT TO:**  
**STRYKER SALES, LLC**  
 P.O. BOX 93308  
 CHICAGO, IL 60673-330  
 PH - 1-800-733-2383

**CONTACT:**  
**STRYKER MEDICAL**  
 1901 Romence Rd Parkway  
 Portage, MI 49002  
 Phone Number: (800) 327-0770  
 Fax Number: (866) 551-2618  
 www.stryker.com

**BILL TO:** 1249744  
**JEFFERSON COUNTY EMER SVCS AGENCY**  
 419 16TH AVE  
 RANSON WV 25438-5732

INVOICE NUMBER	DATE	CUSTOMER P.O.	SALES REP	ORDER NUMBER	PAGE
4033424 M	01/30/23	EMS Transition 1-13-23	WARD, CHRISTOPHER	11719817 SO	1 of 1

TERMS	SHIPPING METHOD
Net 30 days	UNITED PARCEL SERVICE

SHIPPING INSTRUCTIONS	DELIVERY INSTRUCTIONS

LINE NO.	DESCRIPTION	ITEM NUMBER	GTIN	PROMO CODE	SERIAL NUMBER	QUANTITY SHIPPED	UNIT PRICE	EXTENDED PRICE
1.000	SMRT BATTERY PACK OPTION	6500033000	07613327401110			2	514.8000	1,029.60
2.000	24V NI-CAD BATTERY PACK GENERAL FREIGHT	5555522000				1	59.3800	59.38

*Thompson*  
 2/10/23  
**APPROVED**  
**SCANNED**

CLAIMS FOR SHORT SHIPMENT MUST BE MADE WITHIN 30 DAYS OF RECEIPT. NO MERCHANDISE MAY BE RETURNED TO STRYKER FOR CREDIT WITHOUT OUR EXPRESS PERMISSION IN ADVANCE.	CURRENCY	SUBTOTAL	SALES TAX	TOTAL
Subject to applicable shipping and handling charges.	USD	1,088.98		1,088.98



**FINANCE CHARGE OF 1 1/2% (ANNUAL PERCENTAGE RATE IS 18%) IS ADDED TO ALL PAST DUE ACCOUNTS.**  
 Finance payment plans are available. If interested, please contact A/R immediately to start the application process.

ARPA EMS 545

**INVOICE**

**ROBERTS OXYGEN COMPANY, INC.**  
 PO BOX 5507  
 ROCKVILLE, MD 20855

Invoice Number G01523  
 Invoice Date 01/31/23  
 Invoice Amount 153.00  
 Customer Number 100296

**SOLD TO: 100296**  
 JEFFERSON CO EMERGENCY SERV  
 419 SIXTEENTH AVE  
 RANSON, WV 25438

**SHIP TO: 1**  
 JEFFERSON CO EMERGENCY SCV'S  
 419 SIXTEENTH AVE  
 33310 CODE  
 RANSON, WV 25438

**REMIT TO: ROBERTS OXYGEN COMPANY, INC. PO BOX 5507 ROCKVILLE, MD 20855**

Please detach this portion and return with your payment.

Terms - Net on Receipt of Invoice, 1.5% monthly finance charge over 30 days, 18.0% per annum.

DESCRIPTION	1 BEGINNING BALANCE	2 SHIPPED	3 RETURNED	4 ENDING BALANCE	MONTH OF		7 NUMBER OF DAYS	8 PURCHASE ORDER NO	
					5 OFFSET	6 PREPAID			
THIS IS A MONTHLY STATEMENT SHOWING EQUIPMENT CHARGED TO YOU. PLEASE INVENTORY EQUIPMENT CHARGED TO SEE IF IT AGREES WITH THESE RECORDS. BALANCE ASSUMED CORRECT IF WE ARE NOT NOTIFIED WITHIN 10 DAYS. →					TOTAL EQUIPMENT IN YOUR POSSESSION	JANUARY		31	
THERAPY OXYGEN, USP 141 CU FT	5			5					
SUBTOTAL	5			5			6.250		31.25
D-MED OXYGEN, USP 15CF RU ALUM	15			15					
SUBTOTAL	15			15			6.750		101.25
HAZARDOUS MATERIAL CHARGE									20.50

*Thompson 2/6/23*

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For questions about this invoice  
 Please call: (301) 948-8100

Fed ID# 520822869, Duns# 042646877, UEI# HF9HCHM74RY5

WV SALES TAX	.00
<b>AMOUNT DUE</b>	<b>153.00</b>

**PLEASE REMIT TO:**

ROBERTS OXYGEN COMPANY, INC.  
 PO BOX 5507  
 ROCKVILLE, MD 20855

Invoice Number G01523 01/31/23  
 Customer Number

ARPA EMS SVS

INVOICE

ROBERTS OXYGEN COMPANY, INC.  
 PO BOX 5507  
 ROCKVILLE, MD 20855

Invoice Number G01522  
 Invoice Date 01/31/23  
 Invoice Amount 200.75  
 Customer Number 100296

**SOLD TO: 100296**  
 JEFFERSON CO EMERGENCY SERV  
 419 SIXTEENTH AVE  
 RANSON, WV 25438

**SHIP TO: 2**  
 CITIZENS FIRE COMPANY  
 245 CITIZENS WAY  
 CHA  
 CHARLES TOWN, WV 25414

**REMIT TO: ROBERTS OXYGEN COMPANY, INC. PO BOX 5507 ROCKVILLE, MD 20855**

Please detach this portion and return with your payment.

Terms - Net on Receipt of Invoice, 1.5% monthly finance charge over 30 days, 18.0% per annum.

DESCRIPTION	1 BEGINNING BALANCE	2 SHIPPED	3 RETURNED	4 ENDING BALANCE	MONTH OF		7 RATE	8 CHARGE
					5 OFFSET	6 PREPAID		
THIS IS A MONTHLY STATEMENT SHOWING EQUIPMENT CHARGED TO YOU. PLEASE INVENTORY EQUIPMENT CHARGED TO SEE IF IT AGREES WITH THESE RECORDS. BALANCE ASSUMED CORRECT IF WE ARE NOT NOTIFIED WITHIN 10 DAYS. →					TOTAL EQUIPMENT IN YOUR POSSESSION	JANUARY	31	PURCHASE ORDER NO
THERAPY OXYGEN, USP 141 CU FT	4	1	1	4				
SUBTOTAL	4	1	1	4			6.250	25.00
D-MED OXYGEN, USP 15CF RU ALUM	23	6	6	23				
SUBTOTAL	23	6	6	23			6.750	155.25
HAZARDOUS MATERIAL CHARGE								20.50

*Checked 2/6/23*

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For questions about this invoice  
 Please call: (301) 948-8100

Fed ID# 520822869, Duns# 042646877, UEI# HF9HCHM74RY5

WV SALES TAX	.00
--------------	-----

**PLEASE REMIT TO:**

ROBERTS OXYGEN COMPANY, INC.  
 PO BOX 5507  
 ROCKVILLE, MD 20855

<b>AMOUNT DUE</b>	200.75
-------------------	--------

Invoice Number G01522 01/31/23  
 Customer Number

ARPA EMS SVS

**INVOICE**

**ROBERTS OXYGEN COMPANY, INC.**  
 PO BOX 5507  
 ROCKVILLE, MD 20855

Invoice Number **G01521**  
 Invoice Date **01/31/23**  
 Invoice Amount **267.25**  
 Customer Number **100296**

**SOLD TO: 100296**  
 JEFFERSON CO EMERGENCY SERV  
 419 SIXTEENTH AVE  
 RANSON, WV 25438

**SHIP TO: 3**  
 INDEPENDENT FIRE COMPANY INC  
 200 WEST SECOND AVE  
 RANSON, WV 25438

**REMIT TO: ROBERTS OXYGEN COMPANY, INC. PO BOX 5507 ROCKVILLE, MD 20855**

Please detach this portion and return with your payment.

Terms - Net on Receipt of Invoice, 1.5% monthly finance charge over 30 days, 18.0% per annum.

DESCRIPTION	1 BEGINNING BALANCE	2 SHIPPED	3 RETURNED	4 ENDING BALANCE	MONTH OF		7 RATE	8 CHARGE
					5 OFFSET	6 PREPAID		
THIS IS A MONTHLY STATEMENT SHOWING EQUIPMENT CHARGED TO YOU. PLEASE INVENTORY EQUIPMENT CHARGED TO SEE IF IT AGREES WITH THESE RECORDS. BALANCE ASSUMED CORRECT IF WE ARE NOT NOTIFIED WITHIN 10 DAYS. →					TOTAL EQUIPMENT IN YOUR POSSESSION	JANUARY	31	PURCHASE ORDER NO
THERAPY OXYGEN, USP 141 CU FT	6	4	4	6				
SUBTOTAL	6	4	4	6			6.250	37.50
D-MED OXYGEN, USP 15CF RU ALUM	31	10	10	31				
SUBTOTAL	31	10	10	31			6.750	209.25
HAZARDOUS MATERIAL CHARGE								20.50

*Handwritten signature* 2/6/23

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 Sign up today at [www.robertsoxygen.com](http://www.robertsoxygen.com) click on **Manage Your Account** then **Request Account**.

For questions about this invoice  
 Please call: (301) 948-8100

Fed ID# 520822869, Duns# 042646877, UEI# HF9HCHM74RY5

**PLEASE REMIT TO:**

ROBERTS OXYGEN COMPANY, INC.  
 PO BOX 5507  
 ROCKVILLE, MD 20855

WV SALES TAX	.00
<b>AMOUNT DUE</b>	<b>267.25</b>

Invoice Number **G01521 01/31/23**  
 Customer Number

ARPA EMS SYS

INVOICE

**ROBERTS OXYGEN COMPANY, INC.**  
 PO BOX 5507  
 ROCKVILLE, MD 20855

Invoice Number G01520  
 Invoice Date 01/31/23  
 Invoice Amount 186.75  
 Customer Number 100296

**SOLD TO: 100296**  
 JEFFERSON CO EMERGENCY SERV  
 419 SIXTEENTH AVE  
 RANSON, WV 25438

**SHIP TO: 4**  
 FRIENDSHIP FIRE CO  
 1000 WASHINGTON ST  
 HARPERS FERRY, WV 25425

**REMIT TO: ROBERTS OXYGEN COMPANY, INC. PO BOX 5507 ROCKVILLE, MD 20855**

Please detach this portion and return with your payment.

Terms - Net on Receipt of Invoice, 1.5% monthly finance charge over 30 days, 18.0% per annum.

DESCRIPTION	1 BEGINNING BALANCE	2 SHIPPED	3 RETURNED	4 ENDING BALANCE	MONTH OF		7 RATE	8 CHARGE
					5 OFFSET	6 PREPAID		
THIS IS A MONTHLY STATEMENT SHOWING EQUIPMENT CHARGED TO YOU. PLEASE INVENTORY EQUIPMENT CHARGED TO SEE IF IT AGREES WITH THESE RECORDS. BALANCE ASSUMED CORRECT IF WE ARE NOT NOTIFIED WITHIN 10 DAYS. →					TOTAL EQUIPMENT IN YOUR POSSESSION	JANUARY	31	PURCHASE ORDER NO
THERAPY OXYGEN, USP 141 CU FT	5	2	2	5				
SUBTOTAL	5	2	2	5			6.250	31.25
D-MED OXYGEN, USP 15CF RU ALUM	20			20				
SUBTOTAL	20			20			6.750	135.00
HAZARDOUS MATERIAL CHARGE								20.50

*Handwritten signature*  
 APPROVED  
 SCANNED

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Pay invoices online by credit card. Place your orders with a customized shopping list, review cylinder balances, delivery tickets and statements.  
 Sign up today at [www.robertsoxygen.com](http://www.robertsoxygen.com) click on **Manage Your Account** then **Request Account**.

For questions about this invoice  
 Please call: (301) 948-8100

Fed ID# 520822869, Duns# 042646877, UEI# HF9HCHM74RY5

**PLEASE REMIT TO:**

ROBERTS OXYGEN COMPANY, INC.  
 PO BOX 5507  
 ROCKVILLE, MD 20855

WV SALES TAX	.00
<b>AMOUNT DUE</b>	<b>186.75</b>

Invoice Number G01520 01/31/23  
 Customer Number

ARPA EMS SYS

**INVOICE**

**ROBERTS OXYGEN COMPANY, INC.**  
 PO BOX 5507  
 ROCKVILLE, MD 20855

Invoice Number G01519  
 Invoice Date 01/31/23  
 Invoice Amount 278.75  
 Customer Number 100296

**SOLD TO: 100296**  
 JEFFERSON CO EMERGENCY SERV  
 419 SIXTEENTH AVE  
 RANSON, WV 25438

**SHIP TO: 5**  
 BLUE RIDGE MOUNTAIN VOL FIRE  
 100 MISSION ROAD  
 HARPERS FERRY, WV 25425

**REMIT TO:** ROBERTS OXYGEN COMPANY, INC. PO BOX 5507 ROCKVILLE, MD 20855

Please detach this portion and return with your payment.

Terms - Net on Receipt of Invoice, 1.5% monthly finance charge over 30 days, 18.0% per annum.

DESCRIPTION	1 BEGINNING BALANCE	2 SHIPPED	3 RETURNED	4 ENDING BALANCE	MONTH OF		7 RATE	8 CHARGE
					5 OFFSET	6 PREPAID		
THIS IS A MONTHLY STATEMENT SHOWING EQUIPMENT CHARGED TO YOU. PLEASE INVENTORY EQUIPMENT CHARGED TO SEE IF IT AGREES WITH THESE RECORDS. BALANCE ASSUMED CORRECT IF WE ARE NOT NOTIFIED WITHIN 10 DAYS. →					TOTAL EQUIPMENT IN YOUR POSSESSION	JANUARY	31	PURCHASE ORDER NO
THERAPY OXYGEN, USP 141 CU FT	10			10				
SUBTOTAL	10			10			6.250	62.50
D-MED OXYGEN, USP 15CF RU ALUM	29			29				
SUBTOTAL	29			29			6.750	195.75
HAZARDOUS MATERIAL CHARGE								20.50

*Debra M 2/6/23*

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For questions about this invoice  
 Please call: (301) 948-8100

Fed ID# 520822869, Duns# 042646877, UEI# HF9HCHM74RY5

WV SALES TAX .00

**PLEASE REMIT TO:**

ROBERTS OXYGEN COMPANY, INC.  
 PO BOX 5507  
 ROCKVILLE, MD 20855

**AMOUNT DUE** 278.75

Invoice Number G01519 01/31/23  
 Customer Number

ARPA EMS SVS

INVOICE

ROBERTS OXYGEN COMPANY, INC.  
 PO BOX 5507  
 ROCKVILLE, MD 20855

Invoice Number G01518  
 Invoice Date 01/31/23  
 Invoice Amount 240.75  
 Customer Number 100296

**SOLD TO: 100296**  
 JEFFERSON CO EMERGENCY SERV  
 419 SIXTEENTH AVE  
 RANSON, WV 25438

**SHIP TO: 6**  
 SHEPHERDSTOWN FIRE DEPT  
 8052 MARTINSBURG PIKE  
 SHEPHERDSTOWN, WV 25443

REMIT TO: ROBERTS OXYGEN COMPANY, INC. PO BOX 5507 ROCKVILLE, MD 20855

Please detach this portion and return with your payment.

Terms - Net on Receipt of Invoice, 1.5% monthly finance charge over 30 days, 18.0% per annum.

DESCRIPTION	1 BEGINNING BALANCE	2 SHIPPED	3 RETURNED	4 ENDING BALANCE	MONTH OF		7 RATE	8 CHARGE
					5 OFFSET	6 PREPAID		
THIS IS A MONTHLY STATEMENT SHOWING EQUIPMENT CHARGED TO YOU. PLEASE INVENTORY EQUIPMENT CHARGED TO SEE IF IT AGREES WITH THESE RECORDS. BALANCE ASSUMED CORRECT IF WE ARE NOT NOTIFIED WITHIN 10 DAYS. →					TOTAL EQUIPMENT IN YOUR POSSESSION	JANUARY	31	PURCHASE ORDER NO
THERAPY OXYGEN, USP 141 CU FT	5			5				
SUBTOTAL	5			5			6.250	31.25
D-MED OXYGEN, USP 15CF RU ALUM	28	3	3	28				
SUBTOTAL	28	3	3	28			6.750	189.00
HAZARDOUS MATERIAL CHARGE								20.50

*Handwritten signature*  
 2/1/23  
 APPROVED  
 SCANNED

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Pay invoices online by credit card. Place your orders with a customized shopping list, review cylinder balances, delivery tickets and statements. Sign up today at [www.robertsoxygen.com](http://www.robertsoxygen.com) click on **Manage Your Account** then **Request Account**.

For questions about this invoice  
 Please call: (301) 948-8100

Fed ID# 520822869, Duns# 042646877, UEI# HF9HCHM74RY5

**PLEASE REMIT TO:**

ROBERTS OXYGEN COMPANY, INC.  
 PO BOX 5507  
 ROCKVILLE, MD 20855

WV SALES TAX	.00
<b>AMOUNT DUE</b>	<b>240.75</b>

Invoice Number G01518 01/31/23  
 Customer Number

ARPA EMS SVS

INVOICE

ROBERTS OXYGEN COMPANY, INC.  
 PO BOX 5507  
 ROCKVILLE, MD 20855

Invoice Number G01517  
 Invoice Date 01/31/23  
 Invoice Amount 100.50  
 Customer Number 100296

SOLD TO: 100296  
 JEFFERSON CO EMERGENCY SERV  
 419 SIXTEENTH AVE  
 RANSON, WV 25438

SHIP TO: 7  
 BAKERTON FIRE DEPARTMENT  
 891 CARTER AVE  
 HARPERS FERRY, WV 25425

REMIT TO: ROBERTS OXYGEN COMPANY, INC. PO BOX 5507 ROCKVILLE, MD 20855

Please detach this portion and return with your payment.

Terms - Net on Receipt of Invoice, 1.5% monthly finance charge over 30 days, 18.0% per annum.

DESCRIPTION	1 BEGINNING BALANCE	2 SHIPPED	3 RETURNED	4 ENDING BALANCE	MONTH OF		7 NUMBER OF DAYS	8 PURCHASE ORDER NO
					5 OFFSET	6 PREPAID		
THIS IS A MONTHLY STATEMENT SHOWING EQUIPMENT CHARGED TO YOU. PLEASE INVENTORY EQUIPMENT CHARGED TO SEE IF IT AGREES WITH THESE RECORDS. BALANCE ASSUMED CORRECT IF WE ARE NOT NOTIFIED WITHIN 10 DAYS. →					TOTAL EQUIPMENT IN YOUR POSSESSION	JANUARY	31	
THERAPY OXYGEN, USP 141 CU FT	2			2				
SUBTOTAL	2			2			6.250	12.50
D-MED OXYGEN, USP 15CF RU ALUM	10			10				
SUBTOTAL	10			10			6.750	67.50
HAZARDOUS MATERIAL CHARGE								20.50

*Handwritten signature*  
 APPROVED  
 SCANNED

NEW e-Storefront...Manage Your Account 24/7!

Pay invoices online by credit card. Place your orders with a customized shopping list, review cylinder balances, delivery tickets and statements. Sign up today at [www.robertsoxygen.com](http://www.robertsoxygen.com) click on Manage Your Account then Request Account.

For questions about this invoice Please call: (301) 948-8100 Fed ID# 520822869, Duns# 042646877, UEI# HF9HCHM74RY5

PLEASE REMIT TO:

ROBERTS OXYGEN COMPANY, INC.  
 PO BOX 5507  
 ROCKVILLE, MD 20855

WV SALES TAX	.00
<b>AMOUNT DUE</b>	<b>100.50</b>

Invoice Number G01517 01/31/23  
 Customer Number

ARPA EMS SYS

# MCKESSON

McKesson Medical-Surgical  
Government Solutions LLC  
9954 Mayland Drive Suite 5176  
Henrico, VA 23233  
Bill To: 58736372

## Invoice

Page 1 of 1

RCHE1DP001

Shipped From:  
MCKESSON MEDICAL-SURGICAL INC  
4027 MARTINSBURG PIKE  
CLEAR BROOK, VA 22624  
SHIPPED FROM LICENSE: WD0559398

*Reuben 2/6/23*

**APPROVED**

JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
419 16TH AVE  
RANSON WV 25438-5732

**SCANNED**

Shipped To: 58736373  
JEFFERSON COUNTY EMERGENCY SVCS AGENCY  
ATTN ROBERT BURNER  
419 16TH AVE  
RANSON WV 25438-5732  
REGULATORY LICENSE: 24340

TIN: 20-2046702  
DUNS: 05-142-0107

Payment / Account Balance Inquires: 1-800-453-5180  
Customer Service: 1-833-343-2700

Sales Order Number	80979434	Invoice Number	20271189
Sales Order Date	11/14/2022	Invoice Date	01/31/2023
PO Number	ALS MEDS	Payment Due Date	03/02/2023
Sales Rep Name	GAGNON, PATRICK LOUIS	Invoice Amount	\$465.75

Notes: By doing business with McKesson, Customer acknowledges that it is familiar with McKesson's Terms of Sale and is responsible for reviewing in full the complete Terms of Sale that apply to this purchase, located at <https://mms.mckesson.com/content/terms-of-sale-government-solutions>. McKesson's acceptance of Customer's order was expressly conditioned upon Customer's assent to the complete Terms of Sale.

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com)

### Invoice Detail

Item Number	Vendor / Vendor Cat #	Description	Ordered	Unit	Shipped	Unit Price	Amount	Sales Tax	Codes (*)
1184236	Vendor: HOSPLG NDC Num: & 00409493301	EPINEPHRINE, ABJT 0.1MG/ML PO LN 8	5	PK	5	93.15	465.75	.00	
Tracking # 1Z31FW670327793386									
Shipped: 02/01/2023 From: Winchester Via: UPS GRD RES NORTHCOAST ONLY Broker Lic: WD0560158									

SUB TOTAL	FREIGHT	TAX	AMOUNT
\$465.75	\$0.00	\$0.00	\$465.75

The prices on this invoice may be subject to rebates, credits and other price adjustments. You are obligated to properly disclose and appropriately reflect all discounts, including rebates, in claims and costs submitted to federal and state government health care programs (including Medicare and Medicaid) and to provide this invoice and other discount documentation to government authorities on request, in accordance with all applicable laws and regulations, including 42 USC 1320a-7b(b) and the discount safe harbor. In addition, the purchase of products hereunder may qualify customer for discounts on certain purchases made under a distribution agreement between customer and McKesson Corporation.  
PRICING IS CONFIDENTIAL AND PROPRIETARY.

## Invoice

RCHE1DP001

# MCKESSON

McKesson Medical-Surgical  
Government Solutions LLC  
9954 Mayland Drive Suite 5176  
Henrico, VA 23233

Account Number	58736372	Date	01/31/2023
Document Number	20271189	Terms	AR NET 30 DAYS
<b>Pay This Amount Before</b>		<b>03/02/2023</b>	<b>\$465.75</b>

JEFFERSON COUNTY EMERGENCY SVCS AGENCY

419 16TH AVE  
RANSON WV 25438-5732

Please contact us regarding electronic payment options at [MMS.Treasury@McKesson.com](mailto:MMS.Treasury@McKesson.com).

Please Remit To:  
MCKESSON MEDICAL - SURGICAL  
PO BOX 936279  
ATLANTA GA 31193-6279

**AGENDA REQUEST FORM**  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: Ryan Snyder

Department or Organization: Jefferson County Development Authority (JCDA)

Estimation of amount of time needed for appointment: 10 Minutes.

Date Requested – 1<sup>st</sup> Choice: March 2, 2023

*If a specific date is needed, please provide reason for specific date:*

Date Requested – 2<sup>nd</sup> Choice:

Subject (*Wording to be placed on agenda*):

Please provide the County Commission with a description of your request or presentation, including any background information:  
The JCDA is seeking permission to advertise for the vacant JCDA Executive Director position.

Is this a funding request? Y/N

If so, how much?

Provide exact financial impact/request:

Recommended motion (*Please type out the wording of the motion that you would like the Commission to approve*):

The Jefferson County Commission approves the advertising of the Jefferson County Development Authority Executive Director position.

Attach supporting documents for request, or request may be denied.

If not attached, explain:

Is equipment needed? Projector Y/N Internet/Wi Fi Y/N Telephone for conference call Y/N

Contact information:

Email address: ryan@jcda.net

Phone Number: 304-728-3255

**FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/RECOMMENDATION**

not applicable



**AGENDA REQUEST FORM**  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: **Nathan Cochran**

Department or Organization: **Prosecuting Attorney's Office**

Estimation of amount of time needed for appointment:

Date Requested – 1<sup>st</sup> Choice: **March 2, 2023**

*If a specific date is needed, please provide reason for specific date:*

Date Requested – 2<sup>nd</sup> Choice: **March 16, 2023**

Subject (*Wording to be placed on agenda*):

- a. **Report by counsel on opioid case and consideration of recent developments in the case (Jefferson County Commission v. Purdue Pharmaceutical, et al. US District Court, Northern District of West Virginia, Civil Action #1:17-OP-45170, MDL 17-md-02804-DAP In Re: National Prescription Opiate Litigation) and related matters.**

Is this a funding request? **No**

If so, how much? **N/A**

Provide exact financial impact/request:

Attach supporting documents for request, or request may be denied.

If not attached, explain:

Is equipment needed?      Projector    **N**                      Internet/Wi Fi    **N**                      Telephone for conference call    **N**

Contact information:

Email address:

Phone Number:

FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/RECOMMENDATION

*not applicable*



AGENDA REQUEST FORM  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: Jennifer Myers  
Department or Organization: Jefferson County Parks & Recreation  
Estimation of amount of time needed for appointment: 5 min.

Date Requested – 1<sup>st</sup> Choice: Feb 16th  
If a specific date is needed, please provide reason for specific date:

Date Requested – 2<sup>nd</sup> Choice: N/A

Subject (Wording to be placed on agenda): Request funding for 2023 fireworks at Sam Michaels Park.

Please provide the County Commission with a description of your request or presentation, including any background information:

The JCPRC would like to bring back Independence Day fireworks to Jefferson County residents. Event would be held July 1, 2023.

Is this a funding request?  YES  NO  
If so, how much? \$ 10,000  
Provide exact financial impact/request: Looking for support from county & municipalities to make it a community funded event.

Recommended motion (Please type out the wording of the motion that you would like the Commission to approve):

Approval of \$10,000 request for fireworks at Sam Michael Park.

Attach supporting documents for request, or request may be denied.  
If not attached, explain:

Is equipment needed? Projector  Internet/Wi Fi  Telephone for conference call

Contact information:  
Email address:

Phone Number:

FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/RECOMMENDATION

Not applicable



**AGENDA REQUEST FORM**  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: Steve Stolipher, Commissioner

Department or Organization: **Jefferson County Commission**

Estimation of amount of time needed for appointment: 5 minutes

Date Requested – 1<sup>st</sup> Choice: **March 2, 2023**

*If a specific date is needed, please provide reason for specific date:*

Date Requested – 2<sup>nd</sup> Choice:

Subject (*Wording to be placed on agenda*):

- ✦ **Memorandum of Understanding – Shepherd University Emergency Action Plan (SS)**
- ✦ **County Ambulance dispatch in the CAD System (SS)**

**Please provide the County Commission with a description of your request or presentation, including any background information:**

Is this a funding request? Y/N NO

If so, how much? \$

Provide exact financial impact/request:

Recommended motion (*Please type out the wording of the motion that you would like the Commission to approve*): I move to approve a letter of support to Senator Joe Manchin requesting grant funding consideration for the Charles Town Utility Board and authorize the President of the Commission to affix his signature to the document.

Attach supporting documents for request, or request may be denied.

If not attached, explain:

Is equipment needed?      Projector    Y/N      Internet/Wi Fi    Y/N      Telephone for conference call    Y/N

Contact information:

Email address:

Phone Number:

**FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/RECOMMENDATION**

not applicable



**AGENDA REQUEST FORM**  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: **Jennifer Krouse**

Department or Organization: **Commissioner**

Estimation of amount of time needed for appointment: **5 minutes**

Date Requested – 1<sup>st</sup> Choice: **March 2nd**

*If a specific date is needed, please provide reason for specific date:*

Date Requested – 2<sup>nd</sup> Choice:

Subject (*Wording to be placed on agenda*): **WVAW's purchase of JUI and rate increase**

Please provide the County Commission with a description of your request or presentation, including any background information:  
**Discussion and possible action regarding WVAW rate increase to rate payers. Vote to send a letter to PSC asking for no rate increase or, in the alternative, as small an increase as possible and that any such increase be implemented over time.**

Is this a funding request? **Y/No**

If so, how much? **\$**

Provide exact financial impact/request:

Recommended motion (*Please type out the wording of the motion that you would like the Commission to approve*):

**I make a motion to approve the draft letter and send it to PSC**

Attach supporting documents for request, or request may be denied.

If not attached, explain:

**Draft letter attached**

Is equipment needed?      Projector    **Y/No**      Internet/Wi Fi    **Y/No**      Telephone for conference call    **Y/No**

Contact information:

Email address: **jckrouse@gmail.com**

Phone Number: **(304) 404-7878**

**FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/RECOMMENDATION**

not applicable



March 02, 2023

Chairman Charlotte R. Lane  
WV Public Service Commission  
201 Brooks Street  
Charleston, WV 25301

RE: WV American Water's Purchase of Jefferson Utilities

Dear Chairman Lane,

We are aware that the WV Public Service Commission is currently reviewing WV American Water's ("WVAW") offer to purchase Jefferson Utilities. As part of this purchase, WVAW will be requesting a rate increase. Although we take no position on the purchase itself, we do take a position on the rate increase.

The residents of Jefferson County are already suffering under the highest levels of inflation in a generation. Many are fighting a daily struggle to make ends meet. Water isn't a luxury; it's a necessity in the most literal sense. Substantially increasing the cost of this necessity will be burdensome for all, and catastrophic for those least able to afford it.

As such, the Jefferson County Commission respectfully requests that you reject any proposed rate increase. Alternatively, if you do approve a rate increase, we request that it be as small as possible. Finally, we request that if you do approve an increase, it is implemented over a period of years rather than all at once. Our hope is that this will allow time for wages to catch up to costs.

We thank you for your attention to this important matter.

Very truly yours,

Steve Stolipher  
President, Jefferson County Commission

CC: Renee A. Larrick – Commissioner, WV Public Service Commission  
William B. Raney – Commissioner, WV Public Service Commission



**AGENDA REQUEST FORM**  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: Commissioner Jackson

Department or Organization: **County Commission**

Estimation of amount of time needed for appointment: 15 minutes

Date Requested – 1<sup>st</sup> Choice:

*If a specific date is needed, please provide reason for specific date: 3/2/2023*

Date Requested – 2<sup>nd</sup> Choice:

Subject (*Wording to be placed on agenda*):

The purpose of this request is to secure an outside attorney/law firm to assist with human resources and personnel matters where the county attorney is conflicted out. There are often instances where the county attorney is unable to provide guidance or advice to the commission based on his day-to-day engagement with county personnel, specifically personnel that reports directly to the commission. Securing an outside firm that can quickly answer questions or provide guidance on personnel issues will help the commission move much quicker by making decisions related to human resources' best practices.

The intent is to have representation for the county commission as it relates to the county commission staff and the directors and/or department heads that report into the county commission.

Letter of engagement and Ms. Greve's bio is attached.

Is this a funding request? Y/N Yes

If so, how much? \$

Provide exact financial impact/request:

Ms. Greve does not require a retainer, instead is requesting an hourly rate based on an as needed basis. The commission should consider budgeting approximately \$5,000 for FY24 from Professional Services until it is determined how often services are needed and adjust accordingly.

Recommended motion (*Please type out the wording of the motion that you would like the Commission to approve*):

Motion to direct the commission president to sign the letter of agreement between the county commission and Ms. Wendy Greve, Esq. of Pullin, Fowler, Flanagan, Brown, & Poe to begin July 1, 2023

Attach supporting documents for request, or request may be denied.

If not attached, explain:

Is equipment needed? Projector  Internet/Wi Fi  Telephone for conference call

Contact information:

Email address:

Phone Number:





## Wendy E. Greve

### Areas of Practice

- [Bad Faith Litigation and Coverage Work](#)
- [Civil Rights Litigation](#)
- Contractor Liability
- [Medical Malpractice](#)
- Personal Injury Defense
- State and Municipal Liability Defense Work

### Education

- West Virginia University College of Law, Morgantown, West Virginia, 1994 J.D.
- American University, Washington, D.C., USA, 1988 B.A. Major: Psychology

Wendy Greve is a member of Pullin, Fowler, Flanagan, Brown & Poe, PLLC where she enjoys representing elected officials, municipalities, the State of West Virginia, counties, individuals, corporations, and insurance companies in all areas of litigation including contractual claims, product liability, toxic tort, employment actions, and vehicular negligence. In addition to general defense, Ms. Greve has an active practice in defending claims against state and municipal entities including civil rights and constitutional claims as well as sexual harassment and retaliation claims under the West Virginia Human Rights Act.

Ms. Greve obtained her law degree from West Virginia University College of Law. She has been admitted to practice in the Northern and Southern Federal District Courts of West Virginia, the West Virginia Supreme Court of Appeals, the Fourth Circuit Court of Appeals, and the United States Court of Appeals for the Federal Circuit.

Ms. Greve provides consulting, training, and investigations in all areas of government. She has provided skills training at the West Virginia State Police as well as training for

city and county law enforcement officers and elected officials. Her training has been accredited by the West Virginia Bureau of Criminal Justice Services. In addition to her work with law enforcement, Ms. Greve has presented as an expert in panel presentations on investigations, restraint use, and risk management in physical and non-physical interventions. She has also presented on the use of experts at trial in defending sexual harassment suits.



PULLIN, FOWLER  
FLANAGAN,  
& BROWN & POE PLLC

JAMESMARK BUILDING  
901 QUARRIER STREET  
CHARLESTON, WV 25301

PHONE: (304) 344-0100  
FAX: (304) 342-1545

252 GEORGE STREET  
BECKLEY, WV 25801

PHONE: (304) 254-9300  
FAX: (304) 255-5519

2414 CRANBERRY SQUARE  
MORGANTOWN, WV 26508

PHONE: (304) 225-2200  
FAX: (304) 225-2214

261 AIKENS CENTER  
SUITE 301  
MARTINSBURG, WV 25404

PHONE: (304) 260-1200  
FAX: (304) 260-1208

REPLY TO: Charleston

SENDERS E-MAIL: [wgreve@pffwv.com](mailto:wgreve@pffwv.com)  
[www.pffwv.com](http://www.pffwv.com)

February 27, 2023

Steve Stolipher, President  
Jefferson County Commission  
124 E. Washington Street  
P.O. Box 250  
Charles Town, WV 25414

**RE: General Matters**

Dear Mr. Stolipher:

As we discussed we will advise the Commission on human resources policies and procedures as needed and provide legal advice regarding the same on an as needed basis. The work will not include any issue that is presented or could be presented in pending litigation involving Ms. Gordon that would in any way present a conflict or appearance of a conflict with our clients in that case.

Wendy Greve - \$250.00 per hour  
Associate - \$185.00 per hour  
Paralegal - \$95.00 per hour

We will issue monthly bills for any pending matters. As always, I will attempt to minimize legal expenses by utilizing the most cost effective approach on a case by case matter. While we cannot guarantee the success of any given venture, lawsuit, or transaction, we will represent the County vigorously and professionally. I will have primary responsibility for your file.

We will keep accurate records of the time devoted to your work for billing purposes, including conferences conducted in person or by telephone, negotiations, legal research, file review, document preparation and revision, travel on behalf of your corporation and other activities related to this representation. Reimbursable costs include, by way of example, filing fees, travel expense, telecopy charges, courier charges, computer research and photocopying. Statements are due and payable when received by you and must be paid promptly in order for Pullin, Fowler, Flanagan, Brown & Poe to continue to render legal services to you or on your behalf.

If the terms presented in this Agreement are acceptable to you, please sign the enclosed duplicate original of this letter and return it to me. If you have any questions, please feel free to call me.

Very truly yours,

A handwritten signature in blue ink, appearing to read 'Wendy E. Greve', with a stylized, cursive flourish.

Wendy E. Greve, Esq.

WEG/jah  
Enclosure

---

Steve Stolipher, President  
Jefferson County Commission

Date: \_\_\_\_\_

**AGENDA REQUEST FORM**  
[www.jeffersoncountywv.org](http://www.jeffersoncountywv.org)



Name: Clare Ath, Commissioner

Department or Organization: **Jefferson County Commission**

Estimation of amount of time needed for appointment: 5 minutes

Date Requested – 1<sup>st</sup> Choice: **March 2, 2023**

*If a specific date is needed, please provide reason for specific date:*

Date Requested – 2<sup>nd</sup> Choice:

Subject (*Wording to be placed on agenda*): **Letter of Support for the Charles Town Utility Board Collection System Project**

**Please provide the County Commission with a description of your request or presentation, including any background information:**

 Provided on attached e-mail

Is this a funding request? Y/N NO

If so, how much? \$

Provide exact financial impact/request:

Recommended motion (*Please type out the wording of the motion that you would like the Commission to approve*): I move to approve a letter of support to Senator Joe Manchin requesting grant funding consideration for the Charles Town Utility Board and authorize the President of the Commission to affix his signature to the document.

Attach supporting documents for request, or request may be denied.

If not attached, explain:

Is equipment needed? Projector Y/N Internet/Wi Fi Y/N Telephone for conference call Y/N

Contact information:

Email address:

Phone Number:

**FOR COMMISSION STAFF USE ONLY – FINANCIAL IMPACT/RECOMMENDATION**

not applicable



## Jessica Carroll

---

**From:** Clare Anne Ath <commissioner.ath@gmail.com>  
**Sent:** Tuesday, February 28, 2023 11:02 AM  
**To:** Jessica James  
**Subject:** Fwd: Letter of support  
**Attachments:** image001.png; ATT00001.htm; mime-attachment.eml; ATT00002.htm

**CAUTION: This email originated from outside your organization. Exercise caution when opening attachments or on clicking links from unknown senders.**

Jess,

Can you please add an item to the agenda for a "letter of support for CTUB for their collection system project."

Clare

Sent from my iPhone

Begin forwarded message:

**From:** kstolipher <kstolipher@ctubwv.com>  
**Date:** February 28, 2023 at 10:26:12 AM EST  
**To:** Clare Anne Ath <commissioner.ath@gmail.com>  
**Subject:** Letter of support

Clare,

I received notification last Friday that the earmark for FY 2024 through Senator Manchin's office is open and accepting applications through March 12, 2023 for applicable shovel ready projects in WV. We are nearing the shovel ready stage for our Collection system project that serves CT, Ranson and Jefferson County. This project was started before the PSD consolidated with CTUB and has a significant portion of infrastructure outside of the municipalities. As we have quite a few projects coming before us, I think it is critical to apply for this in the event that we can obtain grant funding for a portion of our project. That will be a win-win for everyone.

Unfortunately, I didn't have the details pulled together for this before your County Commission agenda was posted yesterday. I have Matt Ward positioned to submit this for us by March 12<sup>th</sup>, however one of the requirements is to have three (3) letters of recommendation for the submittal. Is there any possibility of obtaining a letter of support from the County Commission in advance of the March 12<sup>th</sup> deadline? My plan is to obtain the other two letters from CT and Ranson.

Let me know if you have any questions.

Thanks,  
Kristen



The Jefferson County Commission proposes to name persons to serve on the following Authorities, Boards, Commissions, or Committees on Thursday, March 16, 2023 or as soon thereafter as the Commission may decide:

**Jefferson County Emergency Services Agency Board - one unexpired term ending June 30, 2024.**

**Per the Ordinance to Dissolve and Reconstitute the Jefferson County Emergency Services Agency: Section 3 - Joint Emergency Services Board**

*(f) No citizen member of the Board may provide fire service or emergency ambulance service in Jefferson County. Nor may any member of the Board have any immediate family member who provides fire service or emergency ambulance service in Jefferson County.*

*(g) No member of the Board, nor their immediate family member, shall have any interest in any firm, partnership, corporation or association engaged in the business of providing ambulance or fire service, nor in the manufacture, sale or lease of ambulance or fire equipment or facilities. For purposes of this ordinance, immediate family member shall mean a spouse or other person with whom a member is living as husband and wife and any child or children, grandchild or grandchildren and parent or parents.*

*(h) Employees of the Agency are not eligible to serve as members of the Board.*

Persons who may be interested in the above listed agency should submit a letter of interest and a resume or statement of qualifications to the Jefferson County Commission, P.O. Box 250, Charles Town, WV 25414, no later than 12:00 p.m. the Monday prior to the proposed date of appointment.

Additional information regarding these appointments may be obtained by calling the Commission Office at (304) 728-3284.

The Jefferson County Commission proposes to name persons to serve on the following Authorities, Boards, Commissions, or Committees on Thursday, March 16, 2023 or as soon thereafter as the Commission may decide:

**Jefferson County Planning Commission - three (3) three-year terms ending March 31, 2026**

**Jefferson County Property Safety Ordinance Enforcement Agency - one unexpired term ending February 8, 2024**

Persons who may be interested in the above listed agency should submit a letter of interest and a resume or statement of qualifications to the Jefferson County Commission, P.O. Box 250, Charles Town, WV 25414, by 12:00 pm on Friday, January 15, 2021.

Additional information regarding these appointments may be obtained by calling the Commission Office at (304) 728-3284.

# Jefferson County Commission

## Prayer Policy

**Whereas**, the United States of America and the State of West Virginia have a long history of opening formal government meetings with an invocation that may include prayer; and,

**Whereas**, the United States Supreme Court has recognized this tradition, commenting that Legislative prayer, while religious in nature, has long been understood as compatible with the Establishment Clause. *See Marsh v. Chambers*, 463 U.S. 783, 792, 103 S.Ct. 3330, 77 L.Ed.2d 1019. *Town of Greece, N.Y v. Galloway*, 572 U.S. 565,565, 134 S. Ct. 1811, 1813, 188 L. Ed. 2d 835 (2014); and,

**Whereas**, these and other cases have recognized the historical precedent for the practice of opening local legislative meetings with prayer. For example, the *Town of Greece, N. Y v. Galloway* case states in part:

It is thus possible to discern in the prayers offered to Congress a commonality of theme and tone. While these prayers vary in their degree of religiosity, they often seek peace for the Nation, wisdom for its lawmakers, and justice for its people, values that count as universal and that are embodied not only in religious traditions, but in our founding documents and laws.

.....

From the earliest days of the Nation, these invocations have been addressed to assemblies comprising many different creeds. These ceremonial prayers strive for the idea that people of many faiths may be united in a community of tolerance and devotion. Even those who disagree as to religious doctrine may find common ground in the desire to show respect for the divine in all aspects of their lives and being. Our tradition assumes that adult citizens, firm in their own beliefs, can tolerate and perhaps appreciate a ceremonial prayer delivered by a person of a different faith. *See Letter from John Adams to Abigail Adams* (Sept. 16, 1774), *Adams, Familiar Letters of John Adams and His Wife Abigail Adams, During the Revolution* 37-38 (1876).

*Town of Greece, N.Y v. Galloway*, 572 U.S. 565, 584, 134 S. Ct. 1811, 1823-24, 188 L. Ed. 2d 835 (2014); and,

**Whereas**, these and other cases have recognized that the First Congress voted to appoint and pay official chaplains shortly after approving language for the First Amendment, and both Houses have maintained the office virtually uninterrupted since then; and,

**Whereas**, these and other cases have recognized that a majority of the States have also had a consistent practice of legislative prayer; and,

**Whereas**, these and other cases have also cautioned that the prayer opportunity should be exercised freely, but with respect to all faiths. The United States Supreme Court recognized generally that:

... the relevant constraint derives from its place at the opening of legislative sessions, where it is meant to lend gravity to the occasion and reflect values long part of the Nation's heritage. Prayer that is solemn and respectful in tone, that invites lawmakers to reflect upon shared ideals and common ends before they embark on the fractious business of governing, serves that legitimate function..... The tradition reflected in *Marsh* permits chaplains to ask their own God for blessings of peace, justice, and freedom that find appreciation among people of all faiths. That a prayer is given in the name of Jesus, Allah, or Jehovah, or that it makes passing reference to religious doctrines, does not remove it from that tradition. These religious themes provide particular means to universal ends. Prayer that reflects beliefs specific to only some creeds can still serve to solemnize the occasion, so long as the practice over time is not "exploited to proselytize or advance any one, or to disparage any other, faith or belief. *Marsh v. Chambers*, 463 U.S. 783, 794-95, 103 S. Ct. 3330, 3338, 77 L. Ed. 2d 1019 (1983).

*Town of Greece, N.Y. v. Galloway*, 572 U.S. 565, 582-83, 134 S. Ct. 1811, 1823, 188 L. Ed. 2d 835 (2014) (portions omitted)

Based on the above, and the heritage, laws, and Constitution of the United States of America, the County Commission of Jefferson County hereby adopts and ratifies the following policy concerning prayer at the official regular meetings of the County Commission:

1. An opening prayer shall be held at the start of all official regular Commission meetings, immediately before the Pledge of Allegiance.
2. The opening prayer shall be given by a clergy member who resides within, or has a congregation within the Jefferson County borders ("local clergy"). The Commission will make reasonable efforts (through such methods as print publication, social media posts, written letters, phone calls, and/or e-mails) to regularly inform local clergy of all faiths, denominations, or sects of this policy, and invite them to offer the opening prayer.
3. The Commission will create a revolving list of local clergy willing to offer the opening prayer. From that list, the Commission will schedule an appearance of one local clergy member per Commission meeting to deliver the opening prayer. Local clergy who wish to participate may contact the Commission office to have their name added to the list.
4. The Commission will not participate in prior review, approval, or guidance regarding the content of any prayer.
5. No one in attendance at the Commission meeting will be required to participate, through either their words or actions, in the opening prayer.

6. The opening prayer shall not be utilized to proselytize, disparage any other faith or belief, or to attack or disparage any person or group.
7. In the event that a local clergy member cannot appear at any given Commission meeting, a moment of silence will be observed.

**Be it Therefore Resolved** that the Jefferson County Commission hereby adopts this Prayer policy, which shall be effective immediately.

Adopted by majority vote at a duly called meeting of the County Commission of Jefferson County, West Virginia, where a quorum was present, on the 19 day of February , 2023.

County Commission of Jefferson County,  
West Virginia

By: \_\_\_\_\_

Its: \_\_\_\_\_

Resident

## Public Comment for Jefferson County Commission meeting February 16, 2023

I, David Tabb, a lifelong resident/taxpayer make the following comments:

### **PUBLIC COMMENT –**

It appears that not all of the Jefferson County Volunteer fire companies are 100% on board with the County Commission taking action on the emergency services without a referendum voted on, by the public, to dissolve the Volunteer Fire companies as the community was accustomed to. With that said, good luck with all of that!

With the rest of the three minutes that I have left: I will take a moment of silence to honor all the volunteers that have given their time and services to make this community a safer place.

*“The public reserves the right to call out the public officials to follow the required laws to ensure the constitutional rights of the public. The Governor has ordered the Government to be “open for business” and not deprived the public of notice and comments that would violate ethic provisions.*

It is hard to be safe, with the current County Commission.

*Have a nice day!*

## Sorayda Pitts

---

**From:** Denise Nick <desirecompassion@yahoo.com>  
**Sent:** Friday, February 17, 2023 10:39 AM  
**To:** Jessica James; Cindy Rezmer; Sorayda Pitts; JCCInfo; Tricia Jackson Commissioner; Clare Ath; Jane Tabb Commissioner; jckrouse@gmail.com; Steve Stolipher  
**Subject:** Fw: 2/16/2023 Commission Meeting Public Comments

**CAUTION: This email originated from outside your organization. Exercise caution when opening attachments or on clicking links from unknown senders.**

Good Morning,

I'd like for my public comment, listed below, to be submitted for the commission meeting minutes dated 2/16/2023.

Our Father which art in Heaven, hallowed be thy name. Thy Kingdom come. They Will be done, on earth as it is in Heaven. Give us this day our daily bread and forgive us trespasses as we forgive those who trespass against us. And lead us not into temptation, but deliver us from evil; for Thine is the Kingdom and the power, and the glory Forever and Ever, Amen.

I'm here to request the resignations of Commissioner Stolipher, Commissioner Tabb, and Commissioner Ath. Your disregard for public safety and reckless endangerment of our community will have catastrophic consequences for the citizens and voters of this county. You have an obligation, to this community, to provide services that we've already paid for. Anything less is dereliction of duty.

Here's some facts for you:

- In the 2022 general election, out of 7,391 votes from the Bakerton, Middleway, and Harpers Ferry (Mountain) districts, Commissioner Ath garnered more than 1/3 of the votes, 3,559 to be exact, to get elected based mainly upon your vote in August 2022 to keep the ESA an agency and not to make it a department.
- In the 2020 general election, out of 11,264 votes from the Bakerton, Middleway, and Harpers Ferry (Mountain) districts, Commissioner Stolipher you garnered more than 1/2 of the votes, 6968 to be exact, to get elected.
- In the 2018 general election, out of 8,470 votes from the Bakerton, Middleway, and Harpers Ferry (Mountain) districts, Commissioner Tabb you garnered more than 1/2 of the votes, 4,981 to be exact, to get elected.

By voting to make the ESA a county department, you've voted to remove the agency with citizen representation, and you've disenfranchised over 1/2 of your voters from these areas by eliminating their voice and their ambulance service. That said, what will you do next election cycle when you want to plant your election signs in these districts?

Commissioner Ath, in less than 6 months, not 7, you switched your vote because quote: "you were trying to decide what to do" and "I've heard a lot of concerns from county residents and it's difficult to weed through them. But with seven months in, it is difficult to change" as stated in the Martinsburg Journal. Is this career path just a little too much for you to handle, Clare?

In my opinion, if you don't know what to do, Clare, you shouldn't be making important decisions affecting the citizens of this county all because there's too much information to weed through. Basically, your comment says, I've received many complaints, but I don't care. I'm going to vote the way my puppet master tells me to vote. This type of mentality shows lack of interest in your job, in our community, and our citizens deserve better.

But you voted for your own personal self-interest, for you and your family, didn't you Clare, Steve, and Jane? You're going to get an ambulance quickly and rapidly to your home when you call. You won't have to wait an extended timeframe for your emergency. So why don't you have to wait for an ambulance? Explain your vote or resign.

Did this commission vote on this ambulance/staffing plan as a governing body or did 1, 2 or 3 commissioners decide to go rogue and implement this plan without their constituent's knowledge or consent? If not, it's illegal to put such a plan into action.

If this is such a great plan, then, logically, I propose to place full time ambulance service on the outskirts of the county so that any ambulance can take a call to drive into town for an emergency, since after all, the hospital is in town and the ambulance has to drive that way anyway.

Lastly, Steve stated in the last meeting that he couldn't trust this ESA board with 7.7 million dollars. With all due respect Steve, I trust you about as much as I trust a \$10 land deal in Ranson. You served on the Jefferson County Development Authority and are the liaison to the board as a commissioner presently. You're a commercial real estate agent, and in my opinion, your presence as the liaison on the JCDA appears to be a conflict of interest. You serve for your own personal gain on that board, not for the citizens of this county's best interest. You've appeared on the JCDA website stating you're "new growth/pro-growth". The citizens are going bear the tax burden, the influx of traffic and people, while you gain personally from selling us out. In fact, our property assessments just increased because Shannondale experienced "new growth" with overwhelming home sales and construction. And yet we don't have ambulance service present on that mountain. How do you pitch that to new home buyers?

## Sorayda Pitts

---

**From:** rabblrouser <marc.petitpierre@gmail.com>  
**Sent:** Thursday, February 16, 2023 6:39 PM  
**To:** Sorayda Pitts  
**Subject:** public comment at 2/16 commission meeting

**CAUTION: This email originated from outside your organization. Exercise caution when opening attachments or on clicking links from unknown senders.**

nowhere in the bible does any deity require any prayer...  
in fact, in scripture, jesus says to keep prayer private.  
so you are contradicting and disobeying the god you say you believe.  
even his commandments  
about putting yourself before (and above) your god.  
contradicting it.  
disobeying it.  
worse, making others disobey it.

so these public comments are a waste of time.  
as are some of the presentations on the agenda.  
and as is the county commission.  
by breaking all the rules -- as you are --  
you-all are the reason our county -- and country -- are going to hell in a hand-basket

# JEFFERSON COUNTY, WV - PRODUCTION



## YEAR-TO-DATE BUDGET REPORT

FOR 2023 08

JOURNAL DETAIL 2023 8 TO 2023 8

ACCOUNTS FOR: 001	GENERAL FUND							
ORIGINAL	APPROP	REVISED BUDGET	YTD EXPENDED	MTD EXPENDED	ENCUMBRANCES	AVAILABLE BUDGET	% USED	
<b>001401 COUNTY COMMISSION</b>								
001401 410100		OFFICIALS SALARY						
	227,675.00	227,675.00	136,495.39	17,195.40	0.00	91,179.61	60.0%	
2023/08/000006	02/03/2023 PRJ	8,597.70	REF 2316PR		WARRANT=2316PR	RUN=1 BI-WEEKL		
2023/08/000050	02/17/2023 PRJ	8,597.70	REF 2317PR		WARRANT=2317PR	RUN=1 BI-WEEKL		
001401 410300		EMPLOYEES SALARY AND WAGES						
	444,419.00	467,864.00	254,301.41	32,775.76	0.00	213,562.59	54.4%	
2023/08/000006	02/03/2023 PRJ	19,467.71	REF 2316PR		WARRANT=2316PR	RUN=1 BI-WEEKL		
2023/08/000050	02/17/2023 PRJ	13,308.05	REF 2317PR		WARRANT=2317PR	RUN=1 BI-WEEKL		
001401 410400		FICA TAX						
	40,964.00	42,417.00	23,844.31	3,047.03	0.00	18,572.69	56.2%	
2023/08/000006	02/03/2023 PRJ	1,716.60	REF 2316PR		WARRANT=2316PR	RUN=1 BI-WEEKL		
2023/08/000050	02/17/2023 PRJ	1,330.43	REF 2317PR		WARRANT=2317PR	RUN=1 BI-WEEKL		
001401 410401		MEDICARE EXPENSE						
	9,582.00	9,922.00	5,576.48	712.61	0.00	4,345.52	56.2%	
2023/08/000006	02/03/2023 PRJ	401.50	REF 2316PR		WARRANT=2316PR	RUN=1 BI-WEEKL		
2023/08/000050	02/17/2023 PRJ	311.11	REF 2317PR		WARRANT=2317PR	RUN=1 BI-WEEKL		
001401 410500		HEALTH INSURANCE						
	104,023.00	104,023.00	43,284.04	5,687.06	0.00	60,738.96	41.6%	
2023/08/000006	02/03/2023 PRJ	2,907.03	REF 2316PR		WARRANT=2316PR	RUN=1 BI-WEEKL		
2023/08/000050	02/17/2023 PRJ	2,780.03	REF 2317PR		WARRANT=2317PR	RUN=1 BI-WEEKL		
001401 410599		HEALTH INSURANCE-CONTRA						
	-104,023.00	-104,023.00	-37,596.98	0.00	0.00	-66,426.02	36.1%	
001401 410600		RETIREMENT						
	56,854.00	58,966.00	32,271.16	3,968.85	0.00	26,694.84	54.7%	
2023/08/000006	02/03/2023 PRJ	2,154.95	REF 2316PR		WARRANT=2316PR	RUN=1 BI-WEEKL		
2023/08/000050	02/17/2023 PRJ	1,813.90	REF 2317PR		WARRANT=2317PR	RUN=1 BI-WEEKL		

# JEFFERSON COUNTY, WV - PRODUCTION



## YEAR-TO-DATE BUDGET REPORT

FOR 2023 08

JOURNAL DETAIL 2023 8 TO 2023 8

ACCOUNTS FOR: 001	GENERAL FUND		YTD EXPENDED	MTD EXPENDED	ENCUMBRANCES	AVAILABLE BUDGET	% USED	
ORIGINAL APPROP	REVISED BUDGET							
001401 410801	OVERTIME	1,000.00	1,000.00	915.87	68.99	0.00	84.13	91.6%
2023/08/000006	02/03/2023 PRJ		68.99	REF 2316PR		WARRANT=2316PR	RUN=1 BI-WEEKL	
001401 421100	TELEPHONE	1,350.00	1,350.00	304.61	0.00	0.00	1,045.39	22.6%
001401 421400	TRAVEL	4,000.00	4,000.00	9,723.93	105.00	0.00	-5,723.93	243.1%
2023/08/000032	02/06/2023 API		105.00	VND 019002 VCH	TRICIA JACKSON	PER DIEM CHARLESTON WVACO		87549
001401 421800	POSTAGE	500.00	500.00	33.74	0.00	0.00	466.26	6.7%
001401 422000	ADVERTISING / LEGAL PUBS	6,200.00	6,200.00	1,302.42	0.00	0.00	4,897.58	21.0%
001401 422100	TRAINING AND EDUCATION	2,500.00	2,500.00	3,156.08	235.00	0.00	-656.08	126.2%
2023/08/000062	02/14/2023 API		235.00	VND 032021 VCH	WVACO	2023 CONF REGST FEES		87604
001401 422200	DUES AND SUBSCRIPTIONS	13,015.00	13,015.00	4,200.95	0.00	0.00	8,814.05	32.3%
001401 422300	PROFESSIONAL SERVICES	70,750.00	105,750.00	25,687.30	900.00	37,125.00	42,937.70	59.4%
2023/08/000004	02/01/2023 API		900.00	VND 022192 VCH	MILLENIUM INS G	HRA ADMINISTRATION FEBRUARY 20		87488
001401 422301	HRA-HEALTH REIMBURSEMENT ACCT	200,000.00	200,000.00	69,768.23	7,289.05	0.00	130,231.77	34.9%
2023/08/000057	02/03/2023 API		423.30	VND 011143 VCH	APRIL BLAKER	EMPLOYEE HRA DEDUCTIBLE REIMBU		87555
2023/08/000057	02/03/2023 API		6,074.84	VND 017094 VCH	TAMMY MOBLEY	EMPLOYEE HRA DEDUCTIBLE REIMBU		87593
2023/08/000057	02/03/2023 API		303.51	VND 032198 VCH	ADAM WARD	EMPLOYEE HRA DEDUCTIBLE REIMBU		87551
2023/08/000117	02/22/2023 API		409.91	VND 013006 VCH	LISA DRISCOLL	EMPLOYEE HRA DEDUCTIBLE REIMBU		
2023/08/000117	02/22/2023 API		77.49	VND 021050 VCH	VICTOR C LUPIS	EMPLOYEE HRA DEDUCTIBLE REIMBU		

# JEFFERSON COUNTY, WV - PRODUCTION



## YEAR-TO-DATE BUDGET REPORT

FOR 2023 08

JOURNAL DETAIL 2023 8 TO 2023 8

ACCOUNTS FOR: 001	GENERAL FUND								
ORIGINAL	APPROP	REVISED	BUDGET	YTD EXPENDED	MTD EXPENDED	ENCUMBRANCES	AVAILABLE BUDGET	% USED	
001401 422320	3,800.00	3,800.00	EMPLOYEE ASSISTANCE PGM	2,808.00	0.00	0.00	992.00	73.9%	
001401 422400	35,000.00	35,000.00	AUDIT COSTS	0.00	0.00	0.00	35,000.00	.0%	
001401 422600	328,385.00	329,912.00	INSURANCE AND BONDS	332,562.50	0.00	0.00	-2,650.50	100.8%	
001401 422601	126,338.00	126,338.00	WORKERS COMP INSURANCE	96,942.75	0.00	0.00	29,395.25	76.7%	
001401 422602	20,000.00	20,000.00	UNEMPLOYMENT INSURANCE	697.33	0.00	0.00	19,302.67	3.5%	
001401 423000	3,000.00	3,000.00	CONTRACTED SERVICES	1,117.92	186.32	0.00	1,882.08	37.3%	
2023/08/000057	02/07/2023	API	186.32 VND 033001 VCH				XEROX CORPORATI DECEMBER 2022 COPIER MAINT	87605	
001401 423900	85,000.00	85,000.00	INSURANCE PREMIUM RETIREE	63,088.00	8,348.00	0.00	21,912.00	74.2%	
2023/08/000057	02/03/2023	API	8,348.00 VND 027078 VCH				RETIREE HLTH BE RETIREE HEALTH TRUST BENEFIT F	87587	
001401 434100	1,000.00	6,000.00	MATERIALS AND SUPPLIES	8,985.20	0.00	0.00	-2,985.20	149.8%	
001401 449999	0.00	0.00	PCARD UNALLOCATED TRANSACTIONS	-16.99	0.00	0.00	16.99	100.0%	
001401 456700	4,800.00	4,800.00	CONTR/TRSFR OTHR GOV UNIT	4,800.00	0.00	0.00	0.00	100.0%	
001401 456708	14,231.00	14,231.00	IN-KIND RENT-FARMLAND PROT BD	9,487.36	1,185.92	0.00	4,743.64	66.7%	
2023/08/000002	02/28/2023	GEN	1,185.92 REF INKIND				INKIND RENT JCFP		

# JEFFERSON COUNTY, WV - PRODUCTION



## YEAR-TO-DATE BUDGET REPORT

FOR 2023 08

JOURNAL DETAIL 2023 8 TO 2023 8

ACCOUNTS FOR: 001	GENERAL FUND								
ORIGINAL	APPROP	REVISED	BUDGET	YTD EXPENDED	MTD EXPENDED	ENCUMBRANCES	AVAILABLE BUDGET	% USED	
001401 456800		CONTRIBUTION/	TRANSFER	OTHER					
	500.00		500.00	0.00	0.00	0.00	500.00	.0%	
001401 456800 G2011		CONTRIBUTION/	TRANSFER	OTHER					
	150,010.00		150,010.00	112,507.50	0.00	0.00	37,502.50	75.0%	
TOTAL COUNTY COMMISSION									
	1,850,873.00		1,919,750.00	1,206,248.51	81,704.99	37,125.00	676,376.49	64.8%	
TOTAL GENERAL FUND									
	1,850,873.00		1,919,750.00	1,206,248.51	81,704.99	37,125.00	676,376.49	64.8%	
TOTAL EXPENSES									
	1,850,873.00		1,919,750.00	1,206,248.51	81,704.99	37,125.00	676,376.49		

# JEFFERSON COUNTY, WV - PRODUCTION



## YEAR-TO-DATE BUDGET REPORT

FOR 2023 08

JOURNAL DETAIL 2023 8 TO 2023 8

ORIGINAL APPROP	REVISED BUDGET	YTD EXPENDED	MTD EXPENDED	ENCUMBRANCES	AVAILABLE BUDGET	% USED
1,850,873.00	1,919,750.00	1,206,248.51	81,704.99	37,125.00	676,376.49	64.8%

GRAND TOTAL

\*\* END OF REPORT - Generated by Vivian Fields \*\*

**YEAR-TO-DATE BUDGET REPORT**

REPORT OPTIONS

Sequence	Field #	Total	Page Break	
Sequence 1	1	Y	Y	Year/Period: 2023/ 8
Sequence 2	9	Y	N	Print revenue as credit: Y
Sequence 3	0	N	N	Print totals only: N
Sequence 4	0	N	N	Suppress zero bal accts: Y

Report title:  
 YEAR-TO-DATE BUDGET REPORT

Print Full or Short description: F  
 Print MTD Version: Y  
 Print Revenues-Version headings: N  
 Format type: 1  
 Print revenue budgets as zero: N  
 Include Fund Balance: N  
 Include requisition amount: N  
 Multiyear view: D  
 Amounts/totals exceed 999 million dollars: N

Carry forward code: 1  
 Print journal detail: Y  
 From Yr/Per: 2023/ 8  
 To Yr/Per: 2023/ 8  
 Include budget entries: Y  
 Incl encumb/liq entries: Y  
 Sort by JE # or PO #: J  
 Detail format option: 1

Find Criteria

Field Name	Field value
Org	001401
Object	
Project	
Rollup code	
Account type	
Account status	

# JEFFERSON COUNTY, WV - PRODUCTION



## YEAR-TO-DATE BUDGET REPORT

FOR 2023 08

ACCOUNTS FOR: 001	GENERAL FUND							
ORIGINAL APPROP	REVISED BUDGET	YTD EXPENDED	MTD EXPENDED	ENCUMBRANCES	AVAILABLE BUDGET	% USED		
<b>001401 COUNTY COMMISSION</b>								
001401 410100	OFFICIALS SALARY							
227,675.00	227,675.00	136,495.39	17,195.40	0.00	91,179.61	60.0%		
001401 410300	EMPLOYEES SALARY AND WAGES							
444,419.00	467,864.00	254,301.41	32,775.76	0.00	213,562.59	54.4%		
001401 410400	FICA TAX							
40,964.00	42,417.00	23,844.31	3,047.03	0.00	18,572.69	56.2%		
001401 410401	MEDICARE EXPENSE							
9,582.00	9,922.00	5,576.48	712.61	0.00	4,345.52	56.2%		
001401 410500	HEALTH INSURANCE							
104,023.00	104,023.00	43,284.04	5,687.06	0.00	60,738.96	41.6%		
001401 410599	HEALTH INSURANCE-CONTRA							
-104,023.00	-104,023.00	-37,596.98	0.00	0.00	-66,426.02	36.1%		
001401 410600	RETIREMENT							
56,854.00	58,966.00	32,271.16	3,968.85	0.00	26,694.84	54.7%		
001401 410801	OVERTIME							
1,000.00	1,000.00	915.87	68.99	0.00	84.13	91.6%		
001401 421100	TELEPHONE							
1,350.00	1,350.00	304.61	0.00	0.00	1,045.39	22.6%		
001401 421400	TRAVEL							
4,000.00	4,000.00	9,723.93	105.00	0.00	-5,723.93	243.1%		
001401 421800	POSTAGE							
500.00	500.00	33.74	0.00	0.00	466.26	6.7%		
001401 422000	ADVERTISING / LEGAL PUBS							
6,200.00	6,200.00	1,302.42	0.00	0.00	4,897.58	21.0%		
001401 422100	TRAINING AND EDUCATION							
2,500.00	2,500.00	3,156.08	235.00	0.00	-656.08	126.2%		
001401 422200	DUES AND SUBSCRIPTIONS							
13,015.00	13,015.00	4,200.95	0.00	0.00	8,814.05	32.3%		
001401 422300	PROFESSIONAL SERVICES							
70,750.00	105,750.00	25,687.30	900.00	37,125.00	42,937.70	59.4%		
001401 422301	HRA-HEALTH REIMBURSEMENT ACCT							
200,000.00	200,000.00	69,768.23	7,289.05	0.00	130,231.77	34.9%		
001401 422320	EMPLOYEE ASSISTANCE PGM							
3,800.00	3,800.00	2,808.00	0.00	0.00	992.00	73.9%		
001401 422400	AUDIT COSTS							
35,000.00	35,000.00	0.00	0.00	0.00	35,000.00	.0%		
001401 422600	INSURANCE AND BONDS							
328,385.00	329,912.00	332,562.50	0.00	0.00	-2,650.50	100.8%		
001401 422601	WORKERS COMP INSURANCE							
126,338.00	126,338.00	96,942.75	0.00	0.00	29,395.25	76.7%		

# JEFFERSON COUNTY, WV - PRODUCTION



## YEAR-TO-DATE BUDGET REPORT

FOR 2023 08

ACCOUNTS FOR: 001	GENERAL FUND							
ORIGINAL APPROP	REVISED BUDGET	YTD EXPENDED	MTD EXPENDED	ENCUMBRANCES	AVAILABLE BUDGET	% USED		
001401 422602	UNEMPLOYMENT INSURANCE							
	20,000.00	20,000.00	697.33	0.00	19,302.67	3.5%		
001401 423000	CONTRACTED SERVICES							
	3,000.00	3,000.00	1,117.92	186.32	1,882.08	37.3%		
001401 423900	INSURANCE PREMIUM RETIREE							
	85,000.00	85,000.00	63,088.00	8,348.00	21,912.00	74.2%		
001401 434100	MATERIALS AND SUPPLIES							
	1,000.00	6,000.00	8,985.20	0.00	-2,985.20	149.8%		
001401 449999	PCARD UNALLOCATED TRANSACTIONS							
	0.00	0.00	-16.99	0.00	16.99	100.0%		
001401 456700	CONTR/TRSFR OTHR GOV UNIT							
	4,800.00	4,800.00	4,800.00	0.00	0.00	100.0%		
001401 456708	IN-KIND RENT-FARMLAND PROT BD							
	14,231.00	14,231.00	9,487.36	1,185.92	4,743.64	66.7%		
001401 456800	CONTRIBUTION/ TRANSFER OTHER							
	500.00	500.00	0.00	0.00	500.00	.0%		
001401 456800 G2011	CONTRIBUTION/ TRANSFER OTHER							
	150,010.00	150,010.00	112,507.50	0.00	37,502.50	75.0%		
TOTAL COUNTY COMMISSION								
	1,850,873.00	1,919,750.00	1,206,248.51	81,704.99	676,376.49	64.8%		
TOTAL GENERAL FUND								
	1,850,873.00	1,919,750.00	1,206,248.51	81,704.99	676,376.49	64.8%		
TOTAL EXPENSES								
	1,850,873.00	1,919,750.00	1,206,248.51	81,704.99	676,376.49			

# JEFFERSON COUNTY, WV - PRODUCTION



## YEAR-TO-DATE BUDGET REPORT

FOR 2023 08

ORIGINAL APPROP	REVISED BUDGET	YTD EXPENDED	MTD EXPENDED	ENCUMBRANCES	AVAILABLE BUDGET	% USED
1,850,873.00	1,919,750.00	1,206,248.51	81,704.99	37,125.00	676,376.49	64.8%

GRAND TOTAL

\*\* END OF REPORT - Generated by Vivian Fields \*\*

**YEAR-TO-DATE BUDGET REPORT**

REPORT OPTIONS

Sequence 1	Field #	Total	Page Break	Year/Period: 2023/ 8
Sequence 2	1	Y	Y	Print revenue as credit: Y
Sequence 3	9	Y	N	Print totals only: N
Sequence 4	0	N	N	Suppress zero bal accts: Y
	0	N	N	Print full GL account: N

Report title:  
 YEAR-TO-DATE BUDGET REPORT

Print Full or Short description: F  
 Print MTD Version: Y  
 Print Revenues-Version headings: N  
 Format type: 1  
 Print revenue budgets as zero: N  
 Include Fund Balance: N  
 Include requisition amount: N  
 Multiyear view: D  
 Amounts/totals exceed 999 million dollars: N

Carry forward code: 1  
 Print journal detail: N  
 From Yr/Per: 2023/ 8  
 To Yr/Per: 2023/ 8  
 Include budget entries: Y  
 Incl encumb/liq entries: Y  
 Sort by JE # or PO #: J  
 Detail format option: 1

Find Criteria

Field Name	Field value
Org	001401
Object	
Project	
Rollup code	
Account type	
Account status	