



## **REGULAR MEETING OF THE MAYOR AND BOARD OF ALDERMEN OF THE CITY OF GLUCKSTADT, MISSISSIPPI**

**Tuesday, January 13, 2026 at 6:00 PM**

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### **Agenda**

This notice and agenda of the Regular Meeting of the Mayor and Board of Aldermen is hereby given by the undersigned. Said meeting shall be held on Tuesday, January 13, 2026, at 6:00 PM in the Board Room at City Hall, located at 343 Distribution Drive, Gluckstadt, MS 39110.

The business to be brought before the meeting shall be limited to the following:

**1. Call Meeting to Order and Roll Call**

**2. Opening Prayer and Pledge of Allegiance**

**3. Presented Items**

- A) Introduction and Swearing-in of Caine Dearman, Planning and Zoning Director
- B) Presentation of Officer of the Quarter, Sergeant Kyrie Lucas (Chief Hale)
- C) Presentation of Gluckstadt Police Department's Officer of the Year Award Lieutenant David Potvin (Chief Hale)
- D) Presentation of Gluckstadt Police Department's Communications Dispatcher of the Year, Public Safety Dispatcher Jameria Vaughns (Chief Hale)
- E) Notification of 1/28/26 Blood Drive Benefitting Kellie Thomas, Sponsored by the Mayoral Health Council (Dr. Shelia Spann & Chris Buckner)

**4. Approval of Consent Agenda Items**

- A) Approval of Docket of Claims
- B) Approval of Meeting Minutes
- C) Request for Approval of Travel and Training Reimbursement for Asst. Chief Slaven, Lt. Potvin, and Lt. Tucker to attend the FBI-LEEDA Command Leadership Institute Class in Jackson, MS

- [D\)](#) Request for Approval for Training and Travel Reimbursement for the Emotional Support in Law Enforcement class (Simpson) located at the Biloxi Civic Center, 578 Howard Avenue, Biloxi
- [E\)](#) Request Approval for Training and Travel Reimbursement for Field Training Officer Class (Huff) located at the Southern Regional Public Safety Institute.
- [F\)](#) Request for Approval to Attend MML Mid-Winter Conference & Registration (City Clerk, 1/13-1/15 - Jackson, MS)
- [G\)](#) Request for Approval for the 2025-2026 Idemia Fingerprinting Machine Contract
- [H\)](#) Request for Approval to Add Two (2) Donated Chevrolet Impalas to the City's Fixed Assets List
- [I\)](#) Requesting Approval to Declare Two (2) Chevrolet Impalas Unmarked and to Purchase Tags for both Vehicles
- [J\)](#) Requesting Approval to Listed Item Modifications on the City's Fixed Assets List
- [K\)](#) Request for Approval, Waste Management Service Agreement
- [L\)](#) Request for Approval to Issue Purchase Orders in Accordance with Term Bid Pricing and FY26 Adopted Budget, for Road Improvements (Interlocal Agreement with Madison County)

**5. Monthly Budget Report**

- [A\)](#) Budget Reports
- [B\)](#) Bank Reconciliations

**6. New Business**

- [A\)](#) Request for Funding, Gluckstadt Fire Department (Chief Davis)
- [B\)](#) Request for Approval of Ad Valorem Exemption, Sanhua (Freeport Warehouse)
- [C\)](#) Request for Approval of Interlocal Agreement, Madison County Board of Supervisors

**7. Old Business**

- [A\)](#) Discussion of Amendments to Fireworks Ordinance
- [B\)](#) Discussion of Amendments to Sign Ordinance

**8. City Clerk, City Administration Matters & Grants Update (Lindsay Kellum)**

- [A\)](#) General Administration Update (City Clerk)
- [B\)](#) Monthly Privilege License Report (Assistant City Clerk)
- [C\)](#) Grants Update (City Clerk and Assistant City Clerk)

*January 13, 2026, Regular Meeting of the Mayor and Board of Aldermen*



- [D\)](#) Request for Approval to Apply for FY27 Mississippi Office of Highway Safety Grants (Traffic Grant, PD)
- [E\)](#) Request for Authorization to Apply for the National Highway Traffic Safety Administration, Road to Zero Community Traffic Safety 2026 Grants
- [F\)](#) Request to Apply for the Mississippi Office of Homeland Security State and Local Cyber Security Grant FY26
- [G\)](#) Request for Authorization to Accept Mayor Health Council Grant and Authorization to Sign Documents
- [H\)](#) Notification of Mississippi Humanities Council & America250 Grant Award & Request for Acceptance and Authorization to Sign Documentation (Gluckstadt Documentary)
- [I\)](#) Discussion of Mississippi State Employees Paid Parental Leave Act & Gluckstadt Policy

**9. Building Official, Planning and Zoning Matters (Mike McCollum)**

- [A\)](#) Planning and Zoning Update
- [B\)](#) Request for Approval of Conditional Use Permit for Roman Mora
- [C\)](#) Request for Approval of Sign Variance for Mitchell Signs

**10. Public Works Department (Chris Buckner)**

- [A\)](#) Request for Approval, Congestion Mitigation Project Application
- [B\)](#) Request for Authorization to Advertise for Term Bids

**11. Police Chief, Police Department Matters (Chief Barry Hale)**

- [A\)](#) General Update, Police Department (Chief of Police)
- [B\)](#) Request for Approval to Hire a Part-time Dispatcher and/or a Part-time Police Officer as Needed to Temporarily Fill Open Positions

**12. Public Comment**

**13. Closed Session to Determine Need for Executive Session**

**14. Adjourn**

Alderwoman Bates \_\_\_\_\_

Alderwoman Campbell \_\_\_\_\_

Alderman Powell \_\_\_\_\_

Alderman Taylor \_\_\_\_\_

Alderman Williams\_\_\_\_\_

ATTEST:

DATE:

\_\_\_\_\_

LINDSAY D. KELLUM  
CITY CLERK

WALTER C MORRISON, IV  
MAYOR

[Seal]

**SPECIAL BLOOD DRIVE**

**FOR:**

**KELLIE THOMAS SP**

**Sullivan's Marketplace Gluckstadt**

155 Calhoun Station Parkway

Gluckstadt, MS 39110



**WEDNESDAY, JAN. 28**

**12:00 PM - 4:00 PM**

**\$15 Visa to Donors**



Scan QR code to  
sign up!  
Blood drive Code:

**2969**

To fill out your donor history questionnaire, please visit [msblood.com](http://msblood.com) and click on the Donor History Questionnaire button.

*This must be done same day as your donation, and must be filled out in private.*

PLEASE HAVE VALID ID. IT IS RECOMMENDED THAT DONORS EAT WITHIN 4 HOURS PRIOR TO DONATING AND DRINK PLENTY OF LIQUIDS BEFORE AND AFTER MAKING A DONATION. DONORS MUST BE 17-YEARS-OLD (16, WITH SIGNED PARENTAL CONSENT) OR OLDER.



Gluckstadt, MS

Section 4, IA)

## Docket of Claims Register

APPKT00919 - January 2026 Docket of Claims

By Docket/Claim Number

Vendor #	Vendor Name	Docket/Claim #	Payable Description	Payable Type	Payable Date	Item Description	Account Number	Payment Amount
	Payable Number							Distribution Amount
00220	Ace Bolt & Screw Co. Inc.	20260186						210.63
	727469	Reflective Safety Vests	Invoice	10/15/2025	YW REFLECTIVE SAFETY VEST W/POCKI	001-301-53500		17.70
					YW REFLECTIVE SAFETY VEST W/POCKI	001-301-53500		17.50
	735309	PW Tools	Invoice	12/08/2025	35 FT Fatmax Tape Measure	001-301-91600		38.25
					Demolition Bar Universal Wrecking Tool	001-301-91600		48.52
	736061	PW Supplies and Tool	Invoice	12/12/2025	3/8 Heavy Duty Staples	001-301-50500		9.98
					SharpShooter Plus Heavy Duty Staple C	001-301-91600		78.68
00546	Advanced Covert Technology	20260187						1,290.00
	2025439-A	GPS TRACKERS/CAMERA	Invoice	11/05/2025	ACT GDO	001-200-90200		1,290.00
00411	Akros Academy of Jiu-Jitsu	20260188						70.00
	122025	JIU JITSU TRAINING	Invoice	01/08/2026	JIU JITSU TRAINING	001-200-61000		70.00
00514	Amrize Mid-America, Inc.	20260189						793.87
	722094544	610 Limestone Delivered & Stored for	Invoice	11/25/2025	610 Limestone Delivered & Stored for	001-301-55904		793.87
00203	APAC-Mississippi, Inc.	20260190						63.90
	4000226224	Asphalt	Invoice	11/05/2025	Asphalt	001-301-55904		63.90
00436	AutoZone Parts, Inc.	20260191						155.28
	05607341837	Long Life Mini (Vehicle Repair)	Invoice	12/08/2025	Long Life Mini (Vehicle Repair)	001-301-57000		9.97
	05607342336	Power Strip IN	Invoice	12/09/2025	Power Strip IN	001-301-91600		48.49
	05607350559	Wiper Blades	Invoice	12/23/2025	BOSCH ENVISION WIPE SKU	001-200-57000		62.88
	05607359293	200W Power Invert (Charger)	Invoice	01/07/2026	200W Power Invert (Charger)	001-200-90300		33.94
00086	Barry Hale	20260192						146.78
	122025	Chief's Conference Reimbursement	Invoice	12/29/2025	Chief's Conference Reimbursement	001-200-61000		146.78
00006	Bear Creek Water Association	20260193						265.82
	122025CH	Water & Sewer (CH) - Dec. 2025	Invoice	12/23/2025	Water & Sewer (CH) - Dec. 2025	001-195-63003		36.60
	122025LW	Water & Sewer (LW) - Dec. 2025	Invoice	12/22/2025	Water & Sewer (LW) - Dec. 2025	001-195-63003		40.45
	122025PD	Water & Sewer (PD) - Dec. 2025	Invoice	12/23/2025	Water & Sewer (PD) - Dec. 2025	001-195-63003		188.77

## Docket of Claims Register

APPKT00919 - January 2025

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Vendor #	Vendor Name	Docket/Claim #	Payable Type	Payable Date	Item Description	Account Number	Payment Amount
Vendor #	Payable Number	Payable Description					Distribution Amount
00108	Big 10 Tire Co.	20260194					2,748.65
	5120158	PD Vehicle Alignment	Invoice	12/04/2025	Alignment	001-200-57000	129.99
					Job Supplies	001-200-57000	15.60
	5120232	SUV 3 ALTERNATOR	Invoice	12/11/2025	CARQUEST PROFESSIONAL ALTERNATC	001-200-57000	514.02
					DIEHARD BATTERY GOLD - 94RH7 3 YE	001-200-57000	200.37
					JOB SUPPLIES	001-200-57000	73.08
					LABOR INSTALL BATTERY	001-200-57000	19.47
					LABOR REMOVE & REPLACE STARTER M	001-200-57000	95.00
	5120257	UNIT 2207 BRAKES	Invoice	12/17/2025	DURALAST PURSUIT BRAKE PADS - FRC	001-200-57000	109.73
					DURALAST PURSUIT BRAKE PADS - REA	001-200-57000	90.00
					DURALAST PURSUIT DISC BRAKE ROTO	001-200-57000	399.64
					DURALAST PURSUIT DISC BRAKE ROTO	001-200-57000	478.42
					ENVIRONMENTAL	001-200-57000	4.98
					LABOR BRAKE LABOR	001-200-57000	355.74
	5120661	PD Tire Repair/Replacement	Invoice	12/23/2025	-15578240000 (Tire)	001-200-57000	152.17
					Job Supplies	001-200-57000	3.10
					Mount & Balance	001-200-57000	20.00
					Tire Disposal	001-200-57000	6.00
					Tire Protection Plan	001-200-57000	19.50
					Tire Tax	001-200-57000	1.00
					TPMS Reset/Rubber Valve Stem	001-200-57000	5.87
	5120782	PD Oil Change	Invoice	01/06/2026	CHANGE OIL AND FILTER	001-200-52500	23.15
					ENVIRONMENTAL FEE	001-200-52500	4.98
					JOB SUPPLIES	001-200-52500	9.94
					OIL FILTER	001-200-52500	12.99
					QT MOBIL FULL SYNTHETIC 5W30	001-200-52500	3.91
00230	Canton Sanitary Landfill	20260195					278.28
	122025	Trash Dump Fees - Dec. 2025	Invoice	12/31/2025	Trash Dump Fees - Dec. 2025	001-301-68500	278.28
00566	Carr Plumbing Supply, Inc. (PL On	20260196					30.00
	012026	PL Overpayment Refund	Invoice	01/06/2026	PL Overpayment Refund	001-195-69901	30.00
00306	CDW LLC	20260197					1,039.59
	AG9KB4E	ECITE PAPER	Invoice	11/18/2025	BROTHER 8.5X11 STANDARD PERFORA	001-200-50500	575.92
	AH23I1E	SOLID STATE MEDIA DIRVES	Invoice	12/10/2025	VERBATIM 32GB FLASH DRIVE 10PK BL	001-200-50000	417.30
					VERBATIM 64GB FLASH DRIVE 10PK BL	001-200-50000	46.37
00393	Cintas Corporation	20260198					530.74
	4252657805	Weekly Uniform Rental Invoice	Invoice	12/10/2025	Weekly Uniform Rental Invoice	001-301-64000	94.93
	4253436106	Weekly Uniform Rental Invoice	Invoice	12/17/2025	Weekly Uniform Rental Invoice	001-301-64000	94.93
	4254207633	Weekly Uniform Rental Invoice	Invoice	12/23/2025	Weekly Uniform Rental Invoice	001-301-64000	133.38
	4254726995	Weekly Uniform Rental Invoice	Invoice	12/30/2025	Weekly Uniform Rental Invoice	001-301-64000	103.75
	4255541437	Weekly Uniform Rental Invoice	Invoice	01/07/2026	Weekly Uniform Rental Invoice	001-301-64000	103.75

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Vendor #	Vendor Name	Docket/Claim #	Payable Type	Payable Date	Item Description	Account Number	Payment Amount
Vendor #	Payable Number	Payable Description					Distribution Amount
00201	Classic Creations, Inc.	20260199					703.88
	064765	Winter Jackets for Public Work Crews	Invoice	12/19/2025	Carhartt Jacket w/ Hood, x1 XXXL	001-301-53500	125.33
					Carhartt Jackets w/ Hoods, x3 XL, x2 X	001-301-53500	578.55
00119	Crystal Clean	20260200					3,478.50
	57224	Street Sweeping Services - Dec. 2025	8 Invoice	12/27/2025	Street Sweeping Services - Dec. 2025	001-301-68600	3,291.00
					Street Sweeping Services - Parade	001-301-68600	187.50
00497	Dependable Pest Service, Inc.	20260201					500.00
	268006	Pest Control - City Hall	Invoice	11/26/2025	Pest Control - City Hall	001-195-68100	150.00
	268007	Pest Control - Lone Wolf	Invoice	11/26/2025	Pest Control - Lone Wolf	001-195-68100	125.00
	268008	Pest Control - PD	Invoice	11/26/2025	Pest Control - PD	001-195-68100	225.00
00090	Deviney Rental & Supply	20260202					969.77
	WO17912	PW Repair	Invoice	11/19/2025	Brake Clean	001-301-57500	3.96
					Labor	001-301-57500	398.75
					Oil	001-301-52500	64.79
					Shop Supplies	001-301-57000	21.87
	WO17969	PW Equipment Repair	Invoice	12/08/2025	Battery	001-301-57500	176.84
					Environmental Fee	001-301-57500	3.94
					labor	001-301-57500	269.67
					Shop Supplies	001-301-57500	29.95
00561	Dickerson & Bowen, Inc.	20260203					77,640.00
	2251791-2	Calhoun Road Work - Dec. 2025	Invoice	12/31/2025	Calhoun Road Work - Dec. 2025	300-301-91200	77,640.00
00532	Earl Dudley Associates, Inc.	20260204					12,572.19
	INV25335	Survey Equipment	Invoice	12/19/2025	12 Months Topcon Field Subscription	001-301-90500	835.00
					Android Tablet 8in Display	001-301-90500	1,617.00
					Kit and Accessories	001-301-90500	9,870.00
					RAM Pole, Plate, Complete Bracket	001-301-90500	240.00
					Shipping	001-301-90500	10.19
00020	Entergy	20260205					4,497.47
	10020679987	Bradshaw Ridge Part III Streetlights	Invoice	12/22/2025	Bradshaw Ridge Part III Streetlights	001-301-63102	29.98
	10020679988	Bradshaw Ridge II Streetlights	Invoice	12/22/2025	Bradshaw Ridge II Streetlights	001-301-63102	269.83
	10020679989	Bradshaw Ridge I Streetlights	Invoice	12/16/2025	Bradshaw Ridge I Streetlights	001-301-63102	269.83
	10020704136	Collective Bill	Invoice	12/19/2025	Streetlights	001-301-63102	59.76
					Traffic Signals	001-301-63103	516.45
	105008495421	LW Building	Invoice	12/17/2025	LW Building	001-195-63001	325.66
	180007296298	Ridgefield Streetlights	Invoice	12/22/2025	Ridgefield Streetlights	001-301-63102	119.22
	235007550116	PD Building	Invoice	12/23/2025	PD Building	001-195-63001	1,630.86
	270006722112	Bear Creek Streetlights	Invoice	12/09/2025	Bear Creek Streetlights	001-301-63102	479.71
	375005434111	First Colony Streetlights	Invoice	12/22/2025	First Colony Streetlights	001-301-63102	417.63
	390004345536	Arrington Streetlights	Invoice	12/22/2025	Arrington Streetlights	001-301-63102	220.79
	55009010814	Planters Row Streetlights	Invoice	12/19/2025	Planters Row Streetlights	001-301-63102	157.75



## Docket of Claims Register

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Vendor #	Vendor Name	Docket/Claim #	Payable Type	Payable Date	Item Description	Account Number	Payment Amount
Vendor #	Payable Number	Payable Description					Distribution Amount
00397	Eric Huff	20260206					147.55
	122025	Huff Swat School Reimbursement	Invoice	01/06/2026	Huff Swat School Reimbursement	001-200-61000	147.55
00123	Flock Safety	20260207					15,000.00
	INV-82507	Flock Renewal (5 Cameras)	Invoice	12/22/2025	Flock Renewal (5 Cameras)	001-200-64000	15,000.00
00022	FP Mailing Solutions	20260208					126.90
	RI106892362	CH Postage Meter Quarterly Invoice	Invoice	12/04/2025	CH Postage Meter Quarterly Invoice	001-195-64000	126.90
00023	Fuelman	20260209					6,132.26
	NP69792587	Gas & Oil - PD/PW/Building	Invoice	01/05/2026	Gas & Oil - Building	001-280-52500	54.88
					Gas & Oil - PD	001-200-52500	4,780.65
					Gas & Oil - PW	001-301-52500	1,296.73
00441	Fusionsite Mississippi LLC	20260210					525.00
	114243E	Portable Toilets for Christmas Parade	Invoice	12/02/2025	ADA Compliant Handicap Toilet	001-195-64600	100.00
					Delivery	001-195-64600	37.50
					Double Hand Sanitizing Station	001-195-64600	75.00
					Pickup	001-195-64600	37.50
					Special Events Toilet	001-195-64600	247.50
					Trash Box With Liner	001-195-64600	27.50
00102	Hartley Equipment Company, Inc	20260211					202.95
	336490	TRM Head Brush Knife and Repair Supp	Invoice	01/06/2026	Bolt Cover	001-301-57500	37.35
					Nut	001-301-57500	17.97
					Thrust Washer	001-301-57500	18.66
					TRM Head Brush Knife	001-301-50500	128.97
00264	Hederman Brothers	20260212					225.00
	109358	Gluckstadtd PD & Dispatch Logos	Invoice	12/31/2025	Gluckstadtd PD & Dispatch Logos	001-200-62000	225.00
00340	Highland Building Services, Inc.	20260213					2,150.00
	3641-A	Monthly Janitorial Services (CH) - Jan. 1	Invoice	01/01/2026	Monthly Janitorial Services (CH) - Jan. 1	001-195-69900	485.00
	3684-A	Monthly Janitorial Services (PD) - Jan. 1	Invoice	01/01/2026	Monthly Janitorial Services (PD) - Jan. 1	001-195-69900	1,390.00
	3689-A	Monthly Janitorial Services (LW) - Jan. 1	Invoice	01/01/2026	Monthly Janitorial Services (LW) - Jan. 1	001-195-69900	275.00
00239	Hometown Promo Products	20260214					495.00
	11193	Challenge Coins	Invoice	11/15/2025	Challenge Coins	001-200-64500	495.00
00186	Lewis Electric, Inc.	20260215					400.00
	M2025.158	1 Man/Service Truck - Replace Faulty N	Invoice	12/18/2025	1 Man/Service Truck - Replace Faulty N	001-301-57600	400.00
00354	Madison Mac Haik Chevrolet LTD	20260216					243.82
	47836	Vehicle Tail Light Repair	Invoice	12/04/2025	Vehicle Tail Light Repair	001-301-57000	243.82
00038	MAGCOR (formerly MPIC, INC)	20260217					55.00
	136849	Business Cards - Christian Hall	Invoice	12/12/2025	Business Cards - Christian Hall	001-280-62000	55.00
00530	McMaster & Associates, Inc.	20260218					910.00
	122025	Reimbursement for Headwaters Invoic	Invoice	12/05/2025	Reimbursement for Headwaters Invoic	001-301-60204	910.00

## Docket of Claims Register

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Vendor #	Vendor Name	Docket/Claim #	Payable Type	Payable Date	Item Description	Account Number	Payment Amount
Vendor #	Payable Number	Payable Description					Distribution Amount
00355	Michael Allen Willridge, Sr. 3173	20260219 PW Oil Change	Invoice	12/22/2025	HAZMAT	001-301-52500	162.82
					OIL & FILTER CHANGE	001-301-52500	2.00
					OIL FILTER	001-301-52500	50.00
					SHOP SUPPLIES	001-301-52500	3.81
					STP FULL SYNTHETIC MOTOR OIL	001-301-52500	2.10
					STP FULL SYNTHETIC MOTOR OIL	001-301-52500	29.95
						001-301-52500	21.01
	3208	PW Truck Repair	Invoice	01/08/2026	HazMat	001-301-57000	2.00
					Shop Supplies	001-301-57000	2.00
					Tire Disposal Fee	001-301-57000	4.00
					Tire M&B	001-301-57000	45.95
00044	Middle Mississippi Building Offici	20260220					350.00
	012026Hall	Christian Hall Membership Fee	Invoice	01/07/2026	Christian Hall Membership Fee	001-280-62200	175.00
	012026Smith	B. Smith Membership Fee	Invoice	01/07/2026	B. Smith Membership Fee	001-280-62200	175.00
00045	Mills, Scanlon, Dye & Pittman, At	20260221					12,089.00
	122025Annex	Annex Legal Billing - Dec. 2025	Invoice	12/28/2025	Annex Legal Billing - Dec. 2025	001-195-60304	670.00
	122025Court	Court Legal Billing - December 2025	Invoice	12/28/2025	Court Legal Billing - December 2025	001-110-60301	1,260.75
	122025General&Retainer	General Legal Fees & Retainer - Dec. 2025	Invoice	12/28/2025	General Legal Fees - Dec. 2025	001-195-60301	5,623.75
					Retainer - Dec. 2025	001-195-60301	3,000.00
	122025P&Z	P&Z Legal Billing - December 2025	Invoice	12/28/2025	P&Z Legal Billing - December 2025	001-190-60301	1,534.50
00047	Miss. Extension Center for Gover	20260222					325.00
	122025Pickett	Pickett Spring CMC Class Reg. Fee	Invoice	12/09/2025	Pickett Spring CMC Class Reg. Fee	001-140-61000	325.00
00051	Mississippi Association of Chiefs (	20260223					100.00
	39940	Chief Membership Dues	Invoice	01/02/2026	Chief Membership Dues	001-200-62200	100.00
00352	Mississippi Department of Public	20260224					60.00
	90169200	Analytical Fees	Invoice	12/08/2025	Analytical Fees	001-200-60201	60.00
00043	Mississippi Department of Reven	20260225					32.00
	012026-A	2011 Impala Tag	Invoice	01/08/2026	2011 Impala Tag	001-200-50500	16.00
	012026-B	2012 Impala Tag	Invoice	01/08/2026	2012 Impala Tag	001-200-50500	16.00
00446	Mississippi Main Street Associati	20260226					500.00
	5517	MS Main Street Membership Dues	Invoice	01/06/2026	MS Main Street Membership Dues	001-195-62200	500.00
00048	Mississippi Municipal League	20260227					750.00
	42272	Kellum/Bates/Powell Mid Wint. Reg. F	Invoice	12/29/2025	2026 Mid Winter Conf. Fee - Bates	001-100-61000	250.00
					2026 Mid Winter Conf. Fee - Kellum	001-140-61000	250.00
					2026 Mid Winter Conf. Fee - Powell	001-100-61000	250.00
00292	Mississippi Rainbow Printing INC	20260228					416.00
	49961	Mayor's Youth Council T-Shirts	Invoice	11/13/2025	Mayor's Youth Council T-Shirts	001-120-64500	416.00
00257	Murray Mud Jacking Service, Inc.	20260229					3,790.00
	2026-001	Storm Drain Repair at 157 Bradfield Ro	Invoice	01/06/2026	Storm Drain Repair at 157 Bradfield Ro	001-301-56501	3,790.00



## Docket of Claims Register

APPKT00919 - January 202

Section 4, IA)

s

Vendor #	Vendor Name	Docket/Claim #	Payable Type	Payable Date	Item Description	Account Number	Payment Amount
Vendor #	Payable Number	Payable Description					Distribution Amount
00152	OP Plus	20260230					771.70
	1111245-0	Folder, Interior, LTR, 1/3, AST	Invoice	12/09/2025	Folder, Interior, LTR, 1/3, AST	001-200-50000	131.80
	1112036-0	Pocket, File 3.5"EXPND, Ltr	Invoice	12/17/2025	Pocket, File 3.5"EXPND, Ltr	001-200-50000	67.06
	1112468-0	CC 1099/W2 Supplies	Invoice	12/23/2025	4PT FORM, 1099-NEC	001-140-50000	58.85
					5PT FRM, 1099-MISC	001-140-50000	27.61
					ENVELOPES, 1098MISC	001-140-50000	17.97
					ENVELOPES, 1099NEC	001-140-50000	70.00
					ENVELOPES, ADAMS W-2 TAX	001-140-50000	84.96
	1112468-1	FORM, TAX, W-2, 4PT, CARBONLESS	Invoice	12/24/2025	FORM, TAX, W-2, 4PT, CARBONLESS	001-140-50000	103.32
	1112696-0	CH Office Supplies	Invoice	12/30/2025	Liner, 24x32, 6MIC, HD	001-140-50000	68.98
					Soap, Hnd, Liqd, Antibac, SPWTR	001-140-50000	24.21
	1112696-1	Bag, Trash, 38x58, 60 GAL	Invoice	12/31/2025	Bag, Trash, 38x58, 60 GAL	001-140-50000	116.94
00053	Pennington & Trim Alarm Service	20260231					69.00
	865932	Wireless Monitoring & Access Control	Invoice	01/01/2026	Wireless Monitoring & Access Control	001-195-63200	69.00
00054	Phelps Dunbar LLP	20260232					281.25
	1463078	General Labor & Employment Advice -	Invoice	12/17/2025	General Labor & Employment Advice -	001-195-60302	281.25
00055	Printables and More (G&W Mark	20260233					260.00
	32192	Coroplast Sign - 12/18 Green & White	Invoice	01/06/2026	Coroplast Sign - 12/18 Green & White	001-280-62000	260.00
00125	Puckett Rents	20260234					505.00
	1154058-0001	Trash Picker	Invoice	11/14/2025	Trash Picker	001-301-91600	460.00
	1154828-0001	Blanket, Straw	Invoice	01/08/2026	Blanket, Straw	001-301-50500	45.00
00311	Revell Hardware Co., Inc.	20260235					501.24
	12546	Contractor Trash Bags	Invoice	12/04/2025	Contractor Trash Bags	001-301-50500	107.94
	12585	PW Supplies	Invoice	12/09/2025	ACE BETTER BRUSH FLAT 4"	001-301-50500	12.99
					ACE STAIN BRUSH ANGLE 2"	001-301-50500	8.99
					ACE STAIN BRUSH FLAT 1"	001-301-50500	6.59
					MTLC SPRY PNT GLD 110Z	001-301-50500	13.99
					PNT&PMR MATTE BS3 1QT	001-301-50500	21.99
					PNT&PMR MATTE BS4 1QT	001-301-50500	21.99
					SPRY LO MTTE TMLRD 110Z	001-301-50500	10.99
					UNIVERSAL SLVR HAMMERED	001-301-50500	13.99
	12662	Flat Panel FLTR 24x24x1	Invoice	12/16/2025	Flat Panel FLTR 24x24x1	001-301-50500	15.96
	12828	Fence Post Mix	Invoice	01/05/2026	Fence Post Mix	001-301-50500	56.97
	12880	PW Tool & Supplies	Invoice	01/08/2026	Contractor Trash Bags	001-301-50500	107.94
					Marking Paint	001-301-50500	53.94
					Marking Wand Pro	001-301-91600	39.99
					Single Cut Key	001-301-50500	6.98

## Docket of Claims Register

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Vendor #	Vendor Name	Docket/Claim #	Payable Type	Payable Date	Item Description	Account Number	Payment Amount
Vendor #	Payable Number	Payable Description					Distribution Amount
00057	Robert J Young Company	20260236					1,056.52
	INV7844642	Court Copier & Monthly Overages - De	Invoice	12/22/2025	Court Copier & Monthly Overages - De	001-110-64000	270.00
	INV7849390	Admin Copier & Overages - Dec. 2025	Invoice	12/28/2025	Admin Copier & Overages - Dec. 2025	001-195-64000	425.94
	INV7849391	LW Copier Monthly Overages	Invoice	12/28/2025	LW Copier Monthly Overages	001-190-64000	21.86
						001-280-64000	21.86
						001-301-64000	21.86
	INV7853459	PD Copier & Monthly Overages - Dec. 2	Invoice	12/30/2025	PD Copier & Monthly Overages - Dec. 2	001-200-64000	295.00
00565	ShredAmerica Mississippi, LLC	20260237					300.00
	MS1036	Monthly Shredding Service - CH	Invoice	12/05/2025	Monthly Shredding Service - CH	001-195-69900	75.00
	MS1037	Monthly Shredding Service - PD	Invoice	12/05/2025	Monthly Shredding Service - PD	001-195-69900	75.00
	MS1126	Monthly Shredding Service - PD	Invoice	01/07/2026	Monthly Shredding Service - PD	001-195-69900	75.00
	MS1127	Monthly Shredding Service - CH	Invoice	01/07/2026	Monthly Shredding Service - CH	001-195-69900	75.00
00560	SiteOne Landscape Supply Holdin	20260238					1,179.85
	161081725-001	Landscaping for Police Department	Invoice	12/31/2025	Dyed Black Mulch Bulk Per Cubic Yard	001-301-50500	40.00
					Flagstone Oklahoma Brown Laydown F	001-301-50500	569.87
					Gardenia Jasminoides Frostproof Cape	001-301-50500	84.64
					Ligustrum Sinense Sunshine Chinese Pr	001-301-50500	258.96
					Rhododendron X Conled Autumn Coral	001-301-50500	102.90
					Rosa X Red Drift Rose	001-301-50500	123.48
00059	South Madison County Fire Prote	20260239					60,000.00
	012026	SMCFPD Appropriation FY2026	Invoice	01/05/2026	SMCFPD Appropriation FY2026	001-260-69900	60,000.00
00154	Southern Benefits Administrators	20260240					100.00
	25122302300000	Cafeteria Plan - Jan. 2026	Invoice	12/23/2025	Cafeteria Plan - Jan. 2026	001-195-60003	100.00
00060	Southern Connection Police Supp	20260241					2,564.40
	37185	SLOMA VEST	Invoice	12/08/2025	POINT BLANK GUARDIAN GEN III	001-200-53500	266.76
					POINT BLANK HI-LITE CARRIER WITH A	001-200-53501	865.00
	37300	SIMPSON VEST	Invoice	12/16/2025	HI-LITE CARRIER	001-200-53501	865.00
					POINT BLANK GUARDIAN GEN III	001-200-53500	253.65
	37403	PD Officer Equipment & Uniforms	Invoice	12/30/2025	Flexrs 5 Pocket Tactical Pants Navy	001-200-53500	74.00
					Flexrs L/S Supershirt Navy	001-200-53500	80.00
					Peerless 705C XL Leg Irons	001-200-90200	159.99
00076	Southern Regional Public Safety I	20260242					590.00
	122025Huff	Huff Fid Tr. Offcr (April 2026) - Tuition	Invoice	12/30/2025	Huff Fid Tr. Offcr (April 2026) - Lodging	001-200-61000	240.00
					Huff Fid Tr. Offcr (April 2026) - Tuition	001-200-61000	350.00
00061	Stantec Consulting Services Inc (S	20260243					1,673.27
	2492291	Calhoun Station Pkwy. - Nov. 2025	Invoice	12/04/2025	Calhoun Station Pkwy. - Nov. 2025	300-301-60203	1,673.27
00061	Stantec Consulting Services Inc (S	20260244					7,279.20
	2492289	Gluckstadt Road Improvments - Nov. 2	Invoice	12/04/2025	Gluckstadt Road Improvments - Nov. 2	001-301-60202	7,279.20
00296	Stay Anchored Apparel LLC	20260245					322.50
	6405	Promotional Koozies	Invoice	12/11/2025	Promotional Koozies for Christmas Par	001-195-64500	322.50

## Docket of Claims Register

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	Vendor Name	Docket/Claim #					Payment Amount
Vendor #	Payable Number	Payable Description	Payable Type	Payable Date	Item Description	Account Number	Distribution Amount
00481	Sunbelt Sealing, Inc.	20260246					14,860.00
	25-112-F	Crack Sealing on Various Streets in City	Invoice	12/22/2025	Crack Sealing Roads	001-301-91200	12,360.00
					Maintenance of Traffic Service	001-301-91200	1,500.00
					Mobilization Service	001-301-91200	1,000.00
00409	Superior Tire Recappers, Inc.	20260247					270.00
	224560	Oil Change - Ford 1-Ton	Invoice	12/16/2025	Oil Change - Ford 1-Ton	001-301-52500	195.00
	224619	Chevy 1-Ton Tire Repair	Invoice	12/23/2025	Chevy 1-Ton Tire Repair	001-301-57000	25.00
	224626	Trailer Tire Repair	Invoice	12/23/2025	Trailer Tire Repair	001-301-57500	25.00
	224628	Tire Mounted - Trailer	Invoice	12/24/2025	Tire Mounted - Trailer	001-301-57500	25.00
00361	The 20 LLC	20260248					7,708.40
	INVT20LLC-0071318	Monthly IT Services	Invoice	01/06/2026	Monthly IT Services	001-195-68800	7,708.40
00181	Thomson Reuters - West Paymen	20260249					802.63
	853053294	Clear Subscription	Invoice	01/01/2026	Clear Subscription	001-200-68800	802.63
00064	Tyler Technologies, Inc.	20260250					41,893.67
	045-542587	Chargeback Fees	Invoice	10/31/2025	Chargeback Fees	001-110-68100	30.00
	CI100-00243698	Thermal Printer Annual Fee	Invoice	12/31/2025	Thermal Printer Annual Fee	001-195-68800	223.30
	CI-100-00243710	Annual SaaS Fees/Tyler U/CC	Invoice	12/31/2025	Annual SaaS Fees/Tyler U/CC	001-195-68800	41,640.37
00100	USPS	20260251					332.00
	2026	PO Box Renewal - 2210	Invoice	01/08/2026	PO Box Renewal - 2210	001-195-64000	332.00
00321	Waste Management of Mississippi	20260252					391.56
	3290367-0078-2	PW Trash Pickup - Jan. 2026	Invoice	12/25/2025	PW Trash Pickup - Jan. 2026	001-301-64000	217.11
	3290513-0078-1	PD Trash Pickup - Jan. 2026	Invoice	12/25/2025	PD Trash Pickup - Jan. 2026	001-200-64000	174.45
Total Claims: 67						Total Payment Amount:	296,885.84



Gluckstadt, MS

# Payable Register

## Payable Detail by Vendor

Section 4, 1A)

Packet: APPKT00911 - January 13 Claims Docket, Other (Recurring)

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
Payable Description	Bank Code				On Hold					
Vendor: 00299 - 110 Percent, LLC										Vendor Total: 3,180.00
INV0003475	Invoice	1/1/2026	1/1/2026	1/1/2026	1/1/2026	3,180.00	0.00	0.00	0.00	3,180.00
January Rent, LW	1 - PRIMARY BANK				No					
Notes: January Rent, LW										
Items										
Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total		
January Rent, LW	Service	0.00	0.00	3,180.00	0.00	0.00	0.00	3,180.00		
Distributions										
Account Number	Account Name	Project Account Key			Amount	Percent				
001-195-68300	BUILDING RENT				3,180.00	100.00%				
Vendor: 00166 - Andrew Duggar										Vendor Total: 120.00
INV0003439	Invoice	1/2/2026	1/2/2026	1/2/2026	1/2/2026	120.00	0.00	0.00	0.00	120.00
Dec. P&Z Meeting	1 - PRIMARY BANK				No					
Notes: Dec. P&Z Meeting										
Items										
Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total		
Dec. P&Z Meeting	Service	0.00	0.00	120.00	0.00	0.00	0.00	120.00		
Distributions										
Account Number	Account Name	Project Account Key			Amount	Percent				
001-190-60103	P&Z COMMISSION COMPENSATION				120.00	100.00%				
Vendor: 00279 - AT&T Mobility										Vendor Total: 603.45
INV0003432	Invoice	12/19/2025	12/19/2025	12/19/2025	12/19/2025	603.45	0.00	0.00	0.00	603.45
ER Landline & PD Hotspots	1 - PRIMARY BANK				No	Payment Date: 12/19/2025		Bank Draft:	DFT0001930	
Notes: ER Landline & PD Hotspots										
Items										
Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total		
ER Landline & PD Hotspots	Service	0.00	0.00	563.22	0.00	0.00	0.00	563.22		
Distributions										
Account Number	Account Name	Project Account Key			Amount	Percent				
001-200-60600	TELEPHONE - CELL / TABLET				563.22	100.00%				
Items										
Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total		
ER Landline	Service	0.00	0.00	40.23	0.00	0.00	0.00	40.23		
Distributions										
Account Number	Account Name	Project Account Key			Amount	Percent				
001-195-60500	TELEPHONE				40.23	100.00%				
Vendor: 00160 - Charles Phillips King										Vendor Total: 120.00
INV0003442	Invoice	1/2/2026	1/2/2026	1/2/2026	1/2/2026	120.00	0.00	0.00	0.00	120.00
Dec. P&Z Meeting	1 - PRIMARY BANK				No					
Notes: Dec. P&Z Meeting										
Items										
Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total		
Dec. P&Z Meeting	Service	0.00	0.00	120.00	0.00	0.00	0.00	120.00		
Distributions										
Account Number	Account Name	Project Account Key			Amount	Percent				
001-190-60103	P&Z COMMISSION COMPENSATION				120.00	100.00%				
Vendor: 00472 - Delta Utilities Aggregator, LLC										Vendor Total: 317.98

## Payable Register

Packet: APPKT00911 - January 13 Claims Docket, Other (Recurring)

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Total
Payable Description	Bank Code				On Hold					
INV0003473	Invoice	1/5/2026	1/5/2026	1/5/2026	1/5/2026	317.98	0.00	0.00	0.00	317.98
PD Gas	1 - PRIMARY BANK				No	Payment Date: 1/5/2026		Bank Draft:		DFT0001932

Notes: PD Gas

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
PD Gas	Service	0.00	0.00	170.53	0.00	0.00	0.00	170.53

## Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
001-195-63002	GAS		170.53	100.00%

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
CH Gas	Service	0.00	0.00	147.45	0.00	0.00	0.00	147.45

## Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
001-195-63002	GAS		147.45	100.00%

## Vendor: 00554 - Equipoint Partners, LLC

Vendor Total: 2,736.31

INV0003478	Invoice	1/5/2026	1/5/2026	1/5/2026	1/5/2026	2,736.31	0.00	0.00	0.00	2,736.31
Secondary Health Invoice, January	1 - PRIMARY BANK				No	Payment Date: 1/5/2026		Bank Draft:		DFT0001935

Notes: Secondary Health Invoice, January

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Secondary Health Invoice, January	Service	0.00	0.00	2,736.31	0.00	0.00	0.00	2,736.31

## Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
001-000-00200	Accounts Payable Liability		2,736.31	100.00%

## Vendor: 00291 - Home Depot U.S.A., Inc.

Vendor Total: 307.44

INV0003472	Invoice	1/1/2026	1/1/2026	1/1/2026	1/1/2026	307.44	0.00	0.00	0.00	307.44
PW Purchase Card	1 - PRIMARY BANK				No					

Notes: PW Purchase Card

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
PW Purchase Card	Service	0.00	0.00	307.44	0.00	0.00	0.00	307.44

## Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
001-195-64500	PROMOTIONS		307.44	100.00%

## Vendor: 00189 - Kayce Leigh Saik

Vendor Total: 240.00

INV0003433	Invoice	1/2/2026	1/2/2026	1/2/2026	1/2/2026	120.00	0.00	0.00	0.00	120.00
Dec. ARB Mtg	1 - PRIMARY BANK				No					

Notes: Dec. ARB Mtg

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Dec. ARB Mtg	Service	0.00	0.00	120.00	0.00	0.00	0.00	120.00

## Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
001-190-60103	P&Z COMMISSION COMPENSATION		120.00	100.00%

INV0003438	Invoice	1/2/2026	1/2/2026	1/2/2026	1/2/2026	120.00	0.00	0.00	0.00	120.00
Dec. P&Z Meeting	1 - PRIMARY BANK				No					

Notes: Dec. P&amp;Z Meeting

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Dec. P&Z Meeting	Service	0.00	0.00	120.00	0.00	0.00	0.00	120.00

## Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
001-190-60103	P&Z COMMISSION COMPENSATION		120.00	100.00%

## Payable Register

Packet: APPKT00911 - January 13 Claims Docket, Other (Recurring)

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Di	
Payable Description	Bank Code				On Hold					Section 4, (A)

Vendor: 00032 - Kelly Dabbs Commercial, LLC

Vendor Total: 8,792.00

INV0003474	Invoice	1/1/2026	1/1/2026	1/1/2026	1/1/2026	8,792.00	0.00	0.00	0.00	8,792.00
January Rent, CH	1 - PRIMARY BANK				No					

Notes: January Rent, CH

## Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
January Rent, CH	Service	0.00	0.00	8,792.00	0.00	0.00	0.00	8,792.00

## Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
001-195-68300	BUILDING RENT		8,792.00	100.00%

Vendor: 00452 - Lauren Elizabeth Bishop

Vendor Total: 120.00

INV0003471	Invoice	1/2/2026	1/2/2026	1/2/2026	1/2/2026	120.00	0.00	0.00	0.00	120.00
Dec. P&Z	1 - PRIMARY BANK				No					

Notes: Dec. P&amp;Z

## Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Dec. P&Z	Service	0.00	0.00	120.00	0.00	0.00	0.00	120.00

## Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
001-190-60103	P&Z COMMISSION COMPENSATION		120.00	100.00%

Vendor: 00142 - Marsha Weems Stacey

Vendor Total: 1,200.00

INV0003435	Invoice	1/2/2026	1/2/2026	1/2/2026	1/2/2026	1,200.00	0.00	0.00	0.00	1,200.00
January Court Services	1 - PRIMARY BANK				No					

Notes: January Court Services

## Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
January Court Services	Service	0.00	0.00	1,200.00	0.00	0.00	0.00	1,200.00

## Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
001-110-60101	JUDGE (ONE)		1,200.00	100.00%

Vendor: 00149 - Melanie Greer

Vendor Total: 240.00

INV0003434	Invoice	1/2/2026	1/2/2026	1/2/2026	1/2/2026	120.00	0.00	0.00	0.00	120.00
Dec. ARB Mtg	1 - PRIMARY BANK				No					

Notes: Dec. ARB Mtg

## Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Dec. ARB Mtg	Service	0.00	0.00	120.00	0.00	0.00	0.00	120.00

## Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
001-190-60103	P&Z COMMISSION COMPENSATION		120.00	100.00%

INV0003440	Invoice	1/2/2026	1/2/2026	1/2/2026	1/2/2026	120.00	0.00	0.00	0.00	120.00
Dec. P&Z Meeting	1 - PRIMARY BANK				No					

Notes: Dec. P&amp;Z Meeting

## Items

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Dec. P&Z Meeting	Service	0.00	0.00	120.00	0.00	0.00	0.00	120.00

## Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
001-190-60103	P&Z COMMISSION COMPENSATION		120.00	100.00%

Vendor: 00134 - Michael Devin Whitt

Vendor Total: 1,200.00

INV0003437	Invoice	1/2/2026	1/2/2026	1/2/2026	1/2/2026	1,200.00	0.00	0.00	0.00	1,200.00
January Court Services	1 - PRIMARY BANK				No					

Notes: January Court Services

## Payable Register

Packet: APPKT00911 - January 13 Claims Docket, Other (Recurring)

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Di
Section 4, 1A)									

Payable Description  
Items

Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Di
Bank Code								

Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Di

Discount Date	Amount	Tax	Shipping	Di

Amount	Tax	Shipping	Di

Tax	Shipping	Di

Discount	Total

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
January Court Services	Service	0.00	0.00	1,200.00	0.00	0.00	0.00	1,200.00

## Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
001-110-60201	ATTORNEY/FIRM 1		1,200.00	100.00%

Vendor: 00517 - Michael Patrick Beasley

Vendor Total: 120.00

INV0003470	Invoice	1/2/2026	1/2/2026	1/2/2026	1/2/2026	120.00	0.00	0.00	0.00	120.00
Dec. P&Z		1 - PRIMARY BANK			No					

Notes: Dec. P&amp;Z

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Dec. P&Z	Service	0.00	0.00	120.00	0.00	0.00	0.00	120.00

## Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
001-190-60103	P&Z COMMISSION COMPENSATION		120.00	100.00%

Vendor: 00521 - Mississippi Department of Employment Security Benefit Payment Control Department

Vendor Total: 547.50

INV0003421	Invoice	12/19/2025	12/19/2025	12/19/2025	12/19/2025	273.75	0.00	0.00	0.00	273.75
Wage Garnishment, Repayment of Benefit...		2 - PAYROLL BANK CODE			No					

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Wage Garnishment, Repayment of Ben	NA	0.00	0.00	273.75	0.00	0.00	0.00	273.75

## Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
001-000-00213	Wage Garnishments (Bankruptcy or		273.75	100.00%

INV0003459	Invoice	1/2/2026	1/2/2026	1/2/2026	1/2/2026	273.75	0.00	0.00	0.00	273.75
Wage Garnishment, Repayment of Benefit...		2 - PAYROLL BANK CODE			No					

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
Wage Garnishment, Repayment of Ben	NA	0.00	0.00	273.75	0.00	0.00	0.00	273.75

## Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
001-000-00213	Wage Garnishments (Bankruptcy or		273.75	100.00%

Vendor: 00017 - Telepak Networks, Inc.

Vendor Total: 2,791.32

INV0003443	Invoice	1/5/2026	1/5/2026	1/5/2026	1/5/2026	2,345.69	0.00	0.00	0.00	2,345.69
January Telephones		1 - PRIMARY BANK			No	Payment Date: 1/5/2026		Bank Draft: DFT0001934		

Notes: January Telephones

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
January Telephones	Service	0.00	0.00	2,345.69	0.00	0.00	0.00	2,345.69

## Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
001-195-60500	TELEPHONE		2,345.69	100.00%

INV0003444	Invoice	1/5/2026	1/5/2026	1/5/2026	1/5/2026	445.63	0.00	0.00	0.00	445.63
January, Wireless & Mobile Hotspots		1 - PRIMARY BANK			No	Payment Date: 1/5/2026		Bank Draft: DFT0001933		

Notes: January, Wireless &amp; Mobile Hotspots

Item Description	Commodity	Units	Price	Amount	Tax	Shipping	Discount	Total
City Clerk Hotspot	Service	0.00	0.00	34.48	0.00	0.00	0.00	34.48

## Distributions

Account Number	Account Name	Project Account Key	Amount	Percent
001-140-60600	TELEPHONE - CELL / TABLET		34.48	100.00%

**Payable Register**

Packet: APPKT00911 - January 13 Claims Docket, Other (Recurring)

Payable #	Payable Type	Post Date	Payable Date	Due Date	Discount Date	Amount	Tax	Shipping	Discount	Di
Payable Description	Bank Code				On Hold					
Section 4, 1A)										
Items										
Item Description	Commodity		Units	Price	Amount	Tax	Shipping	Discount	Total	
Legislative, Ipads	Service		0.00	0.00	137.92	0.00	0.00	0.00	137.92	
Distributions										
Account Number	Account Name	Project Account Key			Amount	Percent				
001-100-60600	TELEPHONE - CELL / TABLET				137.92	100.00%				
Items										
Item Description	Commodity		Units	Price	Amount	Tax	Shipping	Discount	Total	
PD Hotspot, Cell Phone	Service		0.00	0.00	83.37	0.00	0.00	0.00	83.37	
Distributions										
Account Number	Account Name	Project Account Key			Amount	Percent				
001-200-60600	TELEPHONE - CELL / TABLET				83.37	100.00%				
Items										
Item Description	Commodity		Units	Price	Amount	Tax	Shipping	Discount	Total	
PW Cell & Ipads	Service		0.00	0.00	136.78	0.00	0.00	0.00	136.78	
Distributions										
Account Number	Account Name	Project Account Key			Amount	Percent				
001-301-60600	TELEPHONE - CELL / TABLET				136.78	100.00%				
Items										
Item Description	Commodity		Units	Price	Amount	Tax	Shipping	Discount	Total	
Building Cell Phone	Service		0.00	0.00	53.08	0.00	0.00	0.00	53.08	
Distributions										
Account Number	Account Name	Project Account Key			Amount	Percent				
001-280-60600	TELEPHONE - CELL / TABLET				53.08	100.00%				



Section 4, 1A)

Payable Summary

Type	Count	Gross	Tax	Shipping	Discount	Total	Manual Payment	Balance
Invoice	20	22,636.00	0.00	0.00	0.00	22,636.00	6,449.06	16,186.94
Grand Total:		22,636.00	0.00	0.00	0.00	22,636.00	6,449.06	16,186.94

**Account Summary**

<b>Account</b>	<b>Name</b>	<b>Amount</b>
<u>001-000-00200</u>	Accounts Payable Liability	2,736.31
<u>001-000-00213</u>	Wage Garnishments (Bankruptcy or Child Support)	547.50
<u>001-100-60600</u>	TELEPHONE - CELL / TABLET	137.92
<u>001-110-60101</u>	JUDGE (ONE)	1,200.00
<u>001-110-60201</u>	ATTORNEY/FIRM 1	1,200.00
<u>001-140-60600</u>	TELEPHONE - CELL / TABLET	34.48
<u>001-190-60103</u>	P&Z COMMISSION COMPENSATION	960.00
<u>001-195-60500</u>	TELEPHONE	2,385.92
<u>001-195-63002</u>	GAS	317.98
<u>001-195-64500</u>	PROMOTIONS	307.44
<u>001-195-68300</u>	BUILDING RENT	11,972.00
<u>001-200-60600</u>	TELEPHONE - CELL / TABLET	646.59
<u>001-280-60600</u>	TELEPHONE - CELL / TABLET	53.08
<u>001-301-60600</u>	TELEPHONE - CELL / TABLET	136.78
<b>Total:</b>		<b>22,636.00</b>



Gluckstadt, MS

# Docket of Claims Register

APPKT00916 - January 13 Claims Docket, Other (Recurring), 1  
By Docket/Claim Number

Vendor #	Vendor Name	Payable Number	Docket/Claim #	Payable Description	Payable Type	Payable Date	Item Description	Account Number	Payment Amount
00299	110 Percent, LLC	INV0003475	11326	January Rent, LW	Invoice	01/01/2026	January Rent, LW	001-195-68300	3,180.00
00166	Andrew Duggar	INV0003439	11327	Dec. P&Z Meeting	Invoice	01/02/2026	Dec. P&Z Meeting	001-190-60103	120.00
00160	Charles Phillips King	INV0003442	11328	Dec. P&Z Meeting	Invoice	01/02/2026	Dec. P&Z Meeting	001-190-60103	120.00
00291	Home Depot U.S.A., Inc.	INV0003472	11329	PW Purchase Card	Invoice	01/01/2026	PW Purchase Card	001-195-64500	307.44
00189	Kayce Leigh Saik	INV0003433	11330	Dec. ARB Mtg	Invoice	01/02/2026	Dec. ARB Mtg	001-190-60103	240.00
00032	Kelly Dabbs Commercial, LLC	INV0003438	11331	Dec. P&Z Meeting	Invoice	01/02/2026	Dec. P&Z Meeting	001-190-60103	120.00
00452	Lauren Elizabeth Bishop	INV0003474	11332	January Rent, CH	Invoice	01/01/2026	January Rent, CH	001-195-68300	8,792.00
00142	Marsha Weems Stacey	INV0003471	11333	Dec. P&Z	Invoice	01/02/2026	Dec. P&Z	001-190-60103	120.00
00149	Melanie Greer	INV0003435	11334	January Court Services	Invoice	01/02/2026	January Court Services	001-110-60101	1,200.00
00134	Michael Devin Whitt	INV0003434	11335	Dec. ARB Mtg	Invoice	01/02/2026	Dec. ARB Mtg	001-190-60103	240.00
00517	Michael Patrick Beasley	INV0003470	11336	Dec. P&Z	Invoice	01/02/2026	Dec. P&Z	001-190-60103	120.00
00521	Mississippi Department of Emplc	INV0003421	11337	Wage Garnishment, Repayment of Ber	Invoice	12/19/2025	Wage Garnishment, Repayment of Ber	001-000-00213	547.50
		INV0003459		Wage Garnishment, Repayment of Ber	Invoice	01/02/2026	Wage Garnishment, Repayment of Ber	001-000-00213	273.75
Total Claims: 12									16,186.94



Gluckstadt, MS

# Payment Section 4, IA)

APPKT00916 - January 13 Claims Docket, Other (Recurring), 1  
1 - City of Gluckstadt

Bank: 1 - PRIMARY BANK

Vendor Number	Vendor Name	Total Vendor Amount			
00299	110 Percent, LLC	3,180.00			
Payment Type	Payment Number	Payment Date	Payment Amount		
Check		12/30/2025	3,180.00		
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
<u>INV0003475</u>	January Rent, LW	01/01/2026	01/01/2026	0.00	3,180.00

Vendor Number	Vendor Name	Total Vendor Amount			
00166	Andrew Duggar	120.00			
Payment Type	Payment Number	Payment Date	Payment Amount		
EFT		12/30/2025	120.00		
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
<u>INV0003439</u>	Dec. P&Z Meeting	01/02/2026	01/02/2026	0.00	120.00

Vendor Number	Vendor Name	Total Vendor Amount			
00160	Charles Phillips King	120.00			
Payment Type	Payment Number	Payment Date	Payment Amount		
EFT		12/30/2025	120.00		
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
<u>INV0003442</u>	Dec. P&Z Meeting	01/02/2026	01/02/2026	0.00	120.00

Vendor Number	Vendor Name	Total Vendor Amount			
00291	Home Depot U.S.A., Inc.	307.44			
Payment Type	Payment Number	Payment Date	Payment Amount		
Check		12/30/2025	307.44		
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
<u>INV0003472</u>	PW Purchase Card	01/01/2026	01/01/2026	0.00	307.44

Vendor Number	Vendor Name	Total Vendor Amount			
00189	Kayce Leigh Saik	240.00			
Payment Type	Payment Number	Payment Date	Payment Amount		
EFT		12/30/2025	240.00		
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
<u>INV0003433</u>	Dec. ARB Mtg	01/02/2026	01/02/2026	0.00	120.00
<u>INV0003438</u>	Dec. P&Z Meeting	01/02/2026	01/02/2026	0.00	120.00

Vendor Number	Vendor Name	Total Vendor Amount			
00032	Kelly Dabbs Commercial, LLC	8,792.00			
Payment Type	Payment Number	Payment Date	Payment Amount		
Check		12/30/2025	8,792.00		
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
<u>INV0003474</u>	January Rent, CH	01/01/2026	01/01/2026	0.00	8,792.00

Vendor Number	Vendor Name	Total Vendor Amount			
00452	Lauren Elizabeth Bishop	120.00			
Payment Type	Payment Number	Payment Date	Payment Amount		
EFT		12/30/2025	120.00		
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount
<u>INV0003471</u>	Dec. P&Z	01/02/2026	01/02/2026	0.00	120.00

**Payment Register**

APPKT00916 - January 13 Claims Docket, O

Section 4, 1A)

Vendor Number	Vendor Name					Total Vendor Amount
00142	Marsha Weems Stacey					1,200.00
Payment Type	Payment Number	Payment Date	Payment Amount			
EFT		12/30/2025	1,200.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
INV0003435	January Court Services	01/02/2026	01/02/2026	0.00	1,200.00	

Vendor Number	Vendor Name					Total Vendor Amount
00149	Melanie Greer					240.00
Payment Type	Payment Number	Payment Date	Payment Amount			
EFT		12/30/2025	240.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
INV0003434	Dec. ARB Mtg	01/02/2026	01/02/2026	0.00	120.00	
INV0003440	Dec. P&Z Meeting	01/02/2026	01/02/2026	0.00	120.00	

Vendor Number	Vendor Name					Total Vendor Amount
00134	Michael Devin Whitt					1,200.00
Payment Type	Payment Number	Payment Date	Payment Amount			
EFT		12/30/2025	1,200.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
INV0003437	January Court Services	01/02/2026	01/02/2026	0.00	1,200.00	

Vendor Number	Vendor Name					Total Vendor Amount
00517	Michael Patrick Beasley					120.00
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		12/30/2025	120.00			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
INV0003470	Dec. P&Z	01/02/2026	01/02/2026	0.00	120.00	

Bank: 2 - PAYROLL BANK CODE

Vendor Number	Vendor Name					Total Vendor Amount
00521	Mississippi Department of Employment Security Benef					547.50
Payment Type	Payment Number	Payment Date	Payment Amount			
Check		12/30/2025	547.50			
Payable Number	Description	Payable Date	Due Date	Discount Amount	Payable Amount	
INV0003421	Wage Garnishment, Repayment of Benefits (MDES)	12/19/2025	12/19/2025	0.00	273.75	
INV0003459	Wage Garnishment, Repayment of Benefits (MDES)	01/02/2026	01/02/2026	0.00	273.75	

Payment Register

Payment Summary

Bank Code	Type	Payable Count	Payment Count	Discount	Payment
1	Check	4	4	0.00	12,399.44
1	EFT	9	7	0.00	3,240.00
Packet Totals:		13	11	0.00	15,639.44

Bank Code	Type	Payable Count	Payment Count	Discount	Payment
2	Check	2	1	0.00	547.50
Packet Totals:		2	1	0.00	547.50

Cash Fund Summary

Fund	Name	Amount
001	GENERAL FUND	-16,186.94
Packet Totals:		-16,186.94

**City of Gluckstadt**

P.O. Box 2210  
343 Distribution Drive  
Gluckstadt, MS 39110  
769-567-2306

**BankPlus**

1243 Glickstadt Road  
Gluckstadt, MS 39110

E

Section 4, 1A)

EFT DATE

01/02/2026

PAY THIS AMOUNT

\$120.00

PAY \*\*\* VOID \*\*\* NON-NEGOTIABLE \*\*\* VOID \*\*\* FOR INFORMATION ONLY \*\*\* VOID \*\*\*

TO THE ORDER OF Andrew Duggar  
184 Smith Carr Road  
Canton, MS 39046

**CITY OF GLUCKSTADT**

VENDOR: 00166 Andrew Duggar

**1367**

01/02/2026

DATE	INVOICE #	DESCRIPTION	AMOUNT
1/2/2026	INV0003439	Dec. P&Z Meeting	120.00

**CHECK TOTAL**

26

00



**City of Gluckstadt**

P.O. Box 2210  
343 Distribution Drive  
Gluckstadt, MS 39110  
769-567-2306

**BankPlus**

1243 Glickstadt Road  
Gluckstadt, MS 39110

E 3  
Section 4, 1A)

EFT DATE
01/02/2026

PAY THIS AMOUNT
\$120.00

PAY \*\*\* VOID \*\*\* NON-NEGOTIABLE \*\*\* VOID \*\*\* FOR INFORMATION ONLY \*\*\* VOID \*\*\*

TO THE Charles Phillips King  
ORDER 203 PLANTERS COVE  
OF MADISON, MS 39110

**CITY OF GLUCKSTADT**

VENDOR: 00160 Charles Phillips King

**1368**

01/02/2026

DATE	INVOICE #	DESCRIPTION	AMOUNT
1/2/2026	INV0003442	Dec. P&Z Meeting	120.00

**CHECK TOTAL****27** 00

**City of Gluckstadt**

P.O. Box 2210  
343 Distribution Drive  
Gluckstadt, MS 39110  
769-567-2306

**BankPlus**

1243 Glickstadt Road  
Gluckstadt, MS 39110

Section 4, 1A)

EFT DATE

01/02/2026

PAY THIS AMOUNT

\$240.00

**PAY \*\*\* VOID \*\*\* NON-NEGOTIABLE \*\*\* VOID \*\*\* FOR INFORMATION ONLY \*\*\* VOID \*\*\***

**TO THE** Kayce Leigh Saik  
**ORDER** 359 Lakeshire Pkwy.  
**OF** Canton, MS 39046

**CITY OF GLUCKSTADT**

1369

VENDOR: 00189 Kayce Leigh Saik

01/02/2026

DATE	INVOICE #	DESCRIPTION	AMOUNT
1/2/2026	INV0003433	Dec. ARB Mtg	120.00
1/2/2026	INV0003438	Dec. P&Z Meeting	120.00

CHECK TOTAL

28 00

**City of Gluckstadt**

P.O. Box 2210  
343 Distribution Drive  
Gluckstadt, MS 39110  
769-567-2306

**BankPlus**

1243 Glickstadt Road  
Gluckstadt, MS 39110

Section 4, 1A)

EFT DATE
01/02/2026

PAY THIS AMOUNT
\$120.00

**PAY \*\*\* VOID \*\*\* NON-NEGOTIABLE \*\*\* VOID \*\*\* FOR INFORMATION ONLY \*\*\* VOID \*\*\***

**TO THE ORDER OF** Lauren Elizabeth Bishop  
164 Church Road  
Madison, MS 39110

**CITY OF GLUCKSTADT**

VENDOR: 00452 Lauren Elizabeth Bishop

**1370**

01/02/2026

DATE	INVOICE #	DESCRIPTION	AMOUNT
1/2/2026	INV0003471	Dec. P&Z	120.00

**CHECK TOTAL**

29

00



**City of Gluckstadt**

P.O. Box 2210  
343 Distribution Drive  
Gluckstadt, MS 39110  
769-567-2306

**BankPlus**  
1243 Glickstadt Road  
Gluckstadt, MS 39110

Section 4, 1A)

EFT DATE  
01/02/2026

PAY THIS AMOUNT  
\$1,200.00

**PAY \*\*\* VOID \*\*\* NON-NEGOTIABLE \*\*\* VOID \*\*\* FOR INFORMATION ONLY \*\*\* VOID \*\*\***

**TO THE ORDER OF** Marsha Weems Stacey, Attorney-at-Law  
P.O. Box 511  
Canton, MS 39046

**CITY OF GLUCKSTADT**

VENDOR: 00142 Marsha Weems Stacey, Attorney-at-Law

**1371**

01/02/2026

DATE	INVOICE #	DESCRIPTION	AMOUNT
1/2/2026	INV0003435	January Court Services	1,200.00

**CHECK TOTAL**

30

00

**City of Gluckstadt**

P.O. Box 2210  
343 Distribution Drive  
Gluckstadt, MS 39110  
769-567-2306

**BankPlus**

1243 Glickstadt Road  
Gluckstadt, MS 39110

Section 4, 1A)

EFT DATE

01/02/2026

PAY THIS AMOUNT

\$240.00

**PAY \*\*\* VOID \*\*\* NON-NEGOTIABLE \*\*\* VOID \*\*\* FOR INFORMATION ONLY \*\*\* VOID \*\*\***

**TO THE** Melanie Greer  
**ORDER** 105 Lexington Drive, Ste. E  
**OF** Madison, MS 39110

**CITY OF GLUCKSTADT**

VENDOR: 00149 Melanie Greer

**1372**

01/02/2026

DATE	INVOICE #	DESCRIPTION	AMOUNT
1/2/2026	INV0003434	Dec. ARB Mtg	120.00
1/2/2026	INV0003440	Dec. P&Z Meeting	120.00

**CHECK TOTAL**

31 00

**City of Gluckstadt**

P.O. Box 2210  
343 Distribution Drive  
Gluckstadt, MS 39110  
769-567-2306

**BankPlus**

1243 Glickstadt Road  
Gluckstadt, MS 39110

E

Section 4, 1A)

EFT DATE

01/02/2026

PAY THIS AMOUNT

\$1,200.00

PAY \*\*\* VOID \*\*\* NON-NEGOTIABLE \*\*\* VOID \*\*\* FOR INFORMATION ONLY \*\*\* VOID \*\*\*

TO THE M. Devin Whitt, PLLC  
ORDER 774 Avery Boulevard North  
OF Ridgeland, MS 39157

**CITY OF GLUCKSTADT**

VENDOR: 00134 M. Devin Whitt, PLLC

**1373**

01/02/2026

DATE	INVOICE #	DESCRIPTION	AMOUNT
1/2/2026	INV0003437	January Court Services	1,200.00

**CHECK TOTAL**

32

00



Gluckstadt, MS

Check Section 4, IA)

Packet: APPKT00916 - January 13 Claims Docket, Other  
(Recurring), 1

By Check Number

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
<b>Bank Code: 1-PRIMARY BANK</b>						
00166	Andrew Duggar	01/02/2026	EFT	0.00	120.00	1367
00160	Charles Phillips King	01/02/2026	EFT	0.00	120.00	1368
00189	Kayce Leigh Saik	01/02/2026	EFT	0.00	240.00	1369
00452	Lauren Elizabeth Bishop	01/02/2026	EFT	0.00	120.00	1370
00142	Marsha Weems Stacey	01/02/2026	EFT	0.00	1,200.00	1371
00149	Melanie Greer	01/02/2026	EFT	0.00	240.00	1372
00134	Michael Devin Whitt	01/02/2026	EFT	0.00	1,200.00	1373
00299	110 Percent, LLC	12/30/2025	Regular	0.00	3,180.00	2909
00291	Home Depot U.S.A., Inc.	12/30/2025	Regular	0.00	307.44	2910
00032	Kelly Dabbs Commercial, LLC	12/30/2025	Regular	0.00	8,792.00	2911
00517	Michael Patrick Beasley	12/30/2025	Regular	0.00	120.00	2912

**Bank Code 1 Summary**

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	4	4	0.00	12,399.44
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	9	7	0.00	3,240.00
	<b>13</b>	<b>11</b>	<b>0.00</b>	<b>15,639.44</b>

Check Register

Packet: APPKT00916-January 13 Claims Docket,

Section 4, 1A)

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Bank Code: 2-PAYROLL BANK CODE						
00521	Mississippi Department of Employm	12/30/2025	Regular	0.00	547.50	

Bank Code 2 Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	2	1	0.00	547.50
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	0	0	0.00	0.00
	<b>2</b>	<b>1</b>	<b>0.00</b>	<b>547.50</b>



**All Bank Codes Check Summary**

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	6	5	0.00	12,946.94
Manual Checks	0	0	0.00	0.00
Voided Checks	0	0	0.00	0.00
Bank Drafts	0	0	0.00	0.00
EFT's	9	7	0.00	3,240.00
	<b>15</b>	<b>12</b>	<b>0.00</b>	<b>16,186.94</b>

**Fund Summary**

Fund	Name	Period	Amount
001	GENERAL FUND	12/2025	12,946.94
001	GENERAL FUND	1/2026	3,240.00
			<b>16,186.94</b>



Gluckstadt, MS

Section 4, IA)

# Docket of Claims Register

APPKT00917 - 1.8.26 Recurring Claims Docket 2 (Late Invoices)

By Docket/Claim Number

Vendor #	Vendor Name	Docket/Claim #	Payable Type	Payable Date	Item Description	Account Number	Payment Amount
	Payable Number	Payable Description					Distribution Amount
00287	Mississippi Attorney General's Of	113262					100.00
	INV0003488	Trafficking and Exp. Fund	Invoice	01/05/2026	Trafficking and Exp. Fund	001-000-33000	100.00
00521	Mississippi Department of Emplo	113263					273.75
	INV0003392	Wage Garnishment, Repayment of Ber	Invoice	12/05/2025	Wage Garnishment, Repayment of Ber	001-000-00213	273.75
00139	Mississippi Department of Public	113264					460.25
	INV0003477	Dec. Assessments, Court	Invoice	01/05/2026	Dec. Assessments, Court	001-000-33000	460.25
00138	State General Fund (DFA)	113265					26,718.70
	INV0003476	Dec. Assessments, Court	Invoice	01/05/2026	Dec. Assessments, Court	001-000-33000	26,718.70
Total Claims: 4						Total Payment Amount:	27,552.70



## REGULAR MEETING OF THE MAYOR AND BOARD OF ALDERMEN OF THE CITY OF GLUCKSTADT, MISSISSIPPI

Tuesday, December 09, 2025, at 6:00 PM

### Minutes

This notice and agenda of the Regular Meeting of the Mayor and Board of Aldermen is hereby given by the undersigned. Said meeting shall be held on Tuesday, December 09, 2025, at 6:00 PM in the Board Room at City Hall, located at 343 Distribution Drive, Gluckstadt, MS 39110.

#### 1. Call Meeting to Order and Roll Call

The Mayor called the December 9, 2025, Regular Meeting of the Mayor and Board of Aldermen to order. The Mayor presented the Notice of Regular Meeting of the Mayor and Board of Aldermen of the City of Gluckstadt, Mississippi, acknowledged by all Aldermen (Exhibit "A").

Board Members Present: Mayor Walter C. Morrison, Alderman John Taylor, Alderwoman Miya Warfield Bates, Alderman Chip Williams, Alderman Jayce Powell, and Alderwoman Jessie Campbell.

Staff Members Present: City Clerk Lindsay Kellum, Assistant City Clerk Scott Maugh, Deputy City Clerk Chasity Pickett, Public Works Director Chris Buckner, Interim Planning and Zoning Director Mike McCollum, Assistant Chief of Police Jeremy Slaven, Police Lieutenant David Potvin, Executive Assistant Janet Brooks, and City Attorney Zachary Giddy.

#### 2. Opening Prayer and Pledge of Allegiance

*Pastor Brooks opened the meeting with prayer.*

*Alderman Powell led the Pledge of Allegiance.*

No action taken.

#### 3. Presented Items

##### A) Recognition of Dispatch Supervisor Kristen Baker, Gluckstadt Police Department Blessing Box

*In the absence of Chief Hale, Assistant Chief Slaven and the Board recognized Dispatch Supervisor Kristen Baker for her leadership and initiative in establishing the Gluckstadt Police Department Blessing Box. It was noted that Supervisor Baker spearheaded the community*

*outreach effort, coordinated donations, encouraged public participation, and ensured the Blessing Box remained stocked and accessible.*

A resolution recognizing Dispatch Supervisor Kristen Baker for her dedication and service to the city and the community was presented Exhibit "B"). A motion to adopt the resolution was made by Alderwoman Bates and seconded by Alderman Powell.

Voting Yea: Alderman Powell, Alderman Williams, Alderwoman Bates, Alderman Taylor, Alderwoman Campbell

The Mayor declared the motion carried.

#### **B) Gluckstadt Christmas Parade and Jingle Market, Saturday December 13th**

*The Board was informed that the Gluckstadt Christmas Parade and Jingle Market will be held on Saturday, December 13th. The Christmas Parade is scheduled to begin at 9:00 a.m., followed by the Jingle Market.*

No action taken.

#### **C) Gluckstadt Mayor's Youth Council, Winter Coat Drive (Ongoing until January 5, 2026)**

*The Board received information regarding the Mayor's Youth Council Winter Coat Drive, which is ongoing through January 5, 2026. Citizens were encouraged to donate gently used winter coats to support those in need.*

No action taken.

#### **4) Approval of Consent Agenda Items**

##### **A) Approval of Claims Docket**

##### **B) Approval of November 10, 2025, Special Called Meeting Minutes**

##### **C) Notification of Purchase Order Change, Vada Inc. Material Overrun**

##### **D) Request for Approval to Add and Remove Items from the City's Fixed Assets List**

*The Mayor requested a motion to approve the consent agenda with two amendments (Exhibit "C"):*

- 1. Approval of registration for the Mississippi Municipal League (MML) Mid-Winter Conference to be held January 13–15, 2026, for Aldermen wishing to attend.*
- 2. Approval of travel and training expenses for two Police Department employees to attend a 40-hour dispatcher certification class scheduled for December 15–19, 2025.*

Alderman Taylor made a motion to approve the consent agenda with the stated amendments, and it was seconded by Alderman Williams.

Voting Yea: Alderman Powell, Alderman Williams, Alderwoman Bates, Alderman Taylor, Alderwoman Campbell

The Mayor declared the motion carried.

## **5. Monthly Budget Report**

### **A) Monthly Budget Reports**

*The Mayor presented the monthly budget report(s.) (Exhibit “D”)*

No action taken.

### **B) Monthly Bank Reconciliations**

*The Mayor presented the monthly bank reconciliations. (Exhibit “E”)*

No action taken.

## **6. New Business**

### **A) Request to Discuss Interpretation of Current Sign Ordinance and Enforcement (Elizabeth Johnson, Blume Floral Company)**

*Mrs. Elizabeth Johnson, owner of Blume Floral Company, addressed the Board regarding the interpretation and enforcement of the City’s current sign ordinance, specifically as it relates to temporary or sidewalk-style signs used by small businesses. Mrs. Johnson expressed concerns about inconsistent enforcement and requested clarification of whether such signs fall within the ordinance’s definition of prohibited or portable signs.*

*The Mayor and Board discussed the ordinance language, enforcement practices, and the need for consistency and clarity. It was noted that the Board will review the sign ordinance to determine whether amendments or exemptions should be considered and to provide clearer guidance prior to the next meeting. No immediate enforcement changes were authorized.*

No action taken.

### **B) Consideration of Opting-Out, Safe Solicitation Act (HB 1197, Effective July 1, 2025)**

*The Board considered a proposed resolution to opt out of the Safe Solicitation Act (HB 1197), recently enacted by the Mississippi Legislature. It was noted that opting out preserves the city’s ability to adopt its own local ordinance in the future, while failure to opt out would subject the city to the state statute’s permitting and enforcement requirements without recourse. Staff further advised that this meeting represented the final opportunity for the city to opt out prior to the Act taking effect.*

After consideration, the Mayor requested a motion to adopt the resolution opting out of the Safe Solicitation Act, reserving the right to adopt a later ordinance (Exhibit “F”). Alderman Taylor made a motion to adopt the resolution opting out of the Safe Solicitation Act, and it was seconded by Alderwoman Campbell.

Voting Yea: Alderman Powell, Alderman Williams, Alderwoman Bates, Alderman Taylor, Alderwoman Campbell

The Mayor declared the motion carried.

## **7. Old Business**

### **A) Discussion, Reconsideration of Denial of Freeport & Industrial Exemptions (Tabled in November)**

*The Board revisited the prior denial of Freeport and industrial tax exemptions. Mr. Joey Deason, representing MCEDA, addressed the Board regarding the importance of such exemptions for existing and prospective industrial employers, noting their role in economic development and competitiveness with surrounding jurisdictions.*

*The City Clerk explained that four companies were previously denied exemptions and that, due to statutory timelines, the current tax roll cannot be amended. It was noted that affected companies may reapply during the next application period, beginning in April, and that new applications may be submitted earlier for consideration in the upcoming tax year.*

*Additional discussion addressed the scope of the Freeport exemption, clarification that the companies pay all other applicable ad valorem taxes, and the potential impact of exemption policy on future industrial recruitment. No applications were before the Board at this time.*

No action was taken.

### **B) Discussion of Amendments to Fireworks Ordinance**

*The Board discussed potential amendments to the existing ordinance prohibiting the sale of fireworks within the city. It was noted that any change would require repeal of the current prohibition and adoption of a revised ordinance establishing when and under what conditions fireworks may be sold, consistent with state law and applicable fire code requirements.*

*The Board discussed possible conditions and restrictions, including allowable zoning districts, whether sales should require a conditional use permit, the use of temporary structures (tents) versus brick-and-mortar locations, parking and traffic impacts, proximity to residential areas and sensitive uses, signage/lighting, and compliance with state statutes and the International Fire Code. A representative of the fireworks industry and other attendees provided input regarding operational practices and safety requirements.*

*The City Clerk and legal counsel were directed to circulate the prior fireworks ordinance (in effect before the prohibition) and to compile Board feedback for a revised draft ordinance for consideration at the January meeting.*

No action was taken.

## **8. City Clerk, City Administration Matters & Grants Update (Lindsay Kellum)**

### **A) General Update, City Administration (City Clerk)**

*The City Clerk updated the board on city administration matters (Exhibit "G").*

No action taken.

### **B) Monthly Privilege License Report (Assistant City Clerk)**

*The Assistant City Clerk updated the board with the monthly privilege license report (Exhibit “H”).*

No action taken.

### **C) City Grants Update (City Clerk and Assistant City Clerk)**

*The City Clerk updated the board on general grand administration matters and the status of active grants (Exhibit “I”).*

*Item 8E was presented before item 8D.*

### **D) Homeland Cyber Security Grant Program, Request for Approval of Quotes (Equipment and Professional Services)**

*The Board considered a request to approve quotes associated with the Homeland Cyber Security Grant Program. The City Clerk reported that required quotes for equipment and professional services had been obtained in accordance with grant requirements. The selected equipment quote from BCI, Inc. totaled \$7,392.71. In addition, professional services related to implementation were proposed through The 20, Inc. consisting of three (3) line items totaling \$42,990. As professional services, these did not require multiple quotes. It was noted that the grant fully funds the project with no local match required and that total project costs are below the grant amount awarded.*

The Mayor requested a motion to approve the quotes associated with the Homeland Cyber Security Grant Program (Exhibit “J”). Alderwoman Campbell made a motion to approve the quotes associated with the Homeland Cyber Security Grant Program, and it was seconded by Alderman Williams.

Voting Yea: Alderman Powell, Alderman Williams, Alderwoman Bates, Alderman Taylor, Alderwoman Campbell

The Mayor declared the motion carried.

### **E) Request to Apply for America 250 Public Art Grant, Mississippi Arts Commission**

*The Board considered a request to apply for an America 250 Public Art Grant through the Mississippi Arts Commission in the amount of \$12,000. The grant would support a public art display in recognition of the America 250 celebration.*

The Mayor requested a motion to authorize submission for the America 250 Public Art Grant (Exhibit “K”). Alderwoman Bates made a motion to authorize submission for the America 250 Public Art Grant, and it was seconded by Alderman Powell.

Voting Yea: Alderman Powell, Alderman Williams, Alderwoman Bates, Alderman Taylor, Alderwoman Campbell

The Mayor declared the motion carried.

## **9. Building Official, Planning and Zoning Matters (Mike McCollum)**

### **A) Planning and Zoning Update (Planning and Zoning Administrator)**

*The Planning and Zoning / Building Dept. Director addressed the board to provide a status update on rentals and other business in his department.*

No action taken.

### **B) Monthly Building Permit Log (Planning and Zoning Administrator & Building Official)**

*The Planning and Zoning / Building Dept. Director addressed the board to provide a status update on the city's building permit log.*

No action taken.

## **10. Public Works Department (Chris Buckner)**

### **A) Request for Approval, Final Plat for Gluckstadt Business Park**

*The Board considered the final plat for the Gluckstadt Business Park (also referred to as Gluckstadt Office Park), located on Old Jackson Road. The Public Works Director explained that the property had been divided into three lots and that no new public streets would be added, as access would be provided by a private drive.*

The Mayor requested a motion to approve the final plat for the Gluckstadt Business Park (Exhibit "L"). Alderman Powell made a motion to approve the final plat for the Gluckstadt Business Park, and it was seconded by Alderwoman Bates.

Voting Yea: Alderman Powell, Alderman Williams, Alderwoman Bates, Alderman Taylor, Alderwoman Campbell

The Mayor declared the motion carried.

### **B) Authorization to Publish & Advertise for Maintenance Worker Position, Public Works**

*The Board considered a request from Public Works to advertise for a maintenance worker position to add a fourth employee to assist with right-of-way maintenance. The Public Works Director noted that the position was previously discussed during budget deliberations and delayed until closer to the spring season, with the goal of hiring by February.*

The Mayor requested a motion to authorize publication and advertisement for the position of Maintenance Worker with the Public Works Department (Exhibit "M"). Alderwoman Campbell made a motion to authorize publication and advertisement for the position of Maintenance Worker with the Public Works Department, and it was seconded by Alderman Taylor.

Voting Yea: Alderman Powell, Alderman Williams, Alderwoman Bates, Alderman Taylor, Alderwoman Campbell

The Mayor declared the motion carried.

## **11. Police Chief, Police Department Matters (Chief Barry Hale)**



### **A) General Update, Police Department (Chief of Police)**

*The Assistant Chief of Police updated the board on law enforcement matters.*

No action taken.

### **12. Public Comment**

No members of the public signed up to address the board.

No action taken.

### **13. Closed Session to Determine Need for Executive Session**

The Board considered entering closed session to determine whether to enter into executive session. The Mayor requested a motion. A motion was made by Alderman Powell to enter closed session to determine the need for executive session, and it was seconded by Alderman Taylor.

After calling for and taking a vote, the Mayor declared the motion carried unanimously.

The Board then considered entering executive session. Alderman Taylor made a motion to enter executive session to discuss a legal matter and personnel matters for city administration, Planning and Zoning, and the Police Department. The motion was seconded by Alderwoman Bates. A public announcement was made by the city clerk that the Board had voted to enter into executive session to discuss a legal issue and personnel matters for city administration, Planning and Zoning, and the Police Department.

### **A) Discussion Rezoning for Madison County**

*The Mayor and Board discussed Madison County's decision to rezone a portion of north Calhoun Station Parkway from agricultural to heavy industrial and a notification of public hearing.*

No action taken.

### **B) Discussion Executive Assistant/Project Officer**

*The Mayor and Board discussed prospective candidates for the Executive Assistant/Project Officer position. After discussion, the Board agreed to postpone filling the position until after the start of the new year.*

No action was taken.

### **C) Compensatory Time for Christian Hall, Building Inspection and Code Enforcement Officer**

*The Mayor and Board discussed position requirements related to eligibility for compensatory time. It was determined that the position of Building Inspection and Code Enforcement Officer is eligible to earn compensatory time.*

Following discussion, the Mayor requested a motion authorizing Christian Hall to earn compensatory time for work performed outside of normal working hours (Exhibit "N"). Alderman

Taylor made a motion that Christian Hall earn compensatory time for work performed outside of normal working hours, and it was seconded by Alderman Powell.

Voting Yea: Alderman Powell, Alderman Williams, Alderwoman Bates, Alderman Taylor, Alderwoman Campbell

The Mayor declared the motion carried.

#### **D) Request to Terminate Dispatcher Dawn Meyer, Police Department**

*The Mayor and Board discussed the job performance of Dispatcher Dawn Meyer. The Board was advised of Ms. Meyer's continued unsatisfactory progress in meeting the training requirements of her position. It was noted that Ms. Meyer had previously received a formal written reprimand from her direct supervisor, as well as the human resources department, and further, was provided with a 30-day job performance improvement plan, which had been reviewed and discussed in a prior executive session. Despite these corrective measures, no significant improvement in job performance was observed within the period allotted, and serious concerns remained regarding officer safety, public safety, and the ability for Ms. Meyer to follow standard operating procedures to the level expected in fulfillment of her employment duties.*

Following discussion, the Mayor requested a motion authorizing the termination of Dispatcher Dawn Meyer's employment with the city effective December 10, 2025, and requesting Ms. Kellum certify all of her remaining leave to the Public Employees Retirement System. Alderman Taylor made a motion to authorize the termination, which was seconded by Alderman Williams.

Voting Yea: Alderman Powell, Alderman Williams, Alderwoman Bates, Alderman Taylor, Alderwoman Campbell

The Mayor declared the motion carried.

#### **E) Resignation of Officer David Johnson**

The Mayor requested a motion to accept the resignation of Officer David Johnson from the Police Department, effective December 1, 2025. Alderman Taylor made a motion to accept the resignation of Officer David Johnson, and it was seconded by Alderwoman Campbell.

Voting Yea: Alderman Powell, Alderman Williams, Alderwoman Bates, Alderman Taylor, Alderwoman Campbell

The Mayor declared the motion carried.

#### **F) Request to Hire Caine Dearman for Planning and Zoning Director**

The Mayor requested a motion to hire Mr. Caine Dearman for the position of Director for the Planning and Zoning Department, at an annual salary of \$80,000 with a \$5,000 pay increase upon completion of necessary certifications within six (6) months, plus employment benefits such as Blue Cross Blue Shield Health Insurance and participation in the Public Employees Retirement System. Mr. Dearman will be subject to random drug screenings within the first twelve months of hire, as a condition of his acceptance of employment. A motion was made by Alderman Taylor to hire Mr. Dearman for the position of Director for the Planning and Zoning Department, at an annual

salary of \$80,000 with a \$5,000 pay increase upon completion of necessary certifications with six (6) months, plus employment benefits such as Blue Cross Blue Shield Health Insurance and participation in the Public Employees Retirement System, and it was seconded by Alderwoman Bates.

The Mayor then requested a motion to leave executive session. Alderwoman Campbell made a motion to leave executive session, and it was seconded by Alderman Williams. *After calling for and taking a vote, the Mayor declared the motion carried unanimously.* The Mayor and Board then exited executive session and re-entered open session.

*A public announcement was made by the City Clerk that the Board discussed rezoning in Madison County, a personnel matter for city administration, terminated an individual in the Dispatch Department, accepted a resignation of an officer from the Police Department, and hired an individual for the Planning and Zoning Department. No further action was taken.*

#### 14. Adjourn

Alderman Taylor made a motion to adjourn, and it was seconded by Alderman Powell.

Voting Yea: Alderman Powell, Alderman Williams, Alderwoman Bates, Alderman Taylor, Alderwoman Campbell

The mayor declared the motion carried.

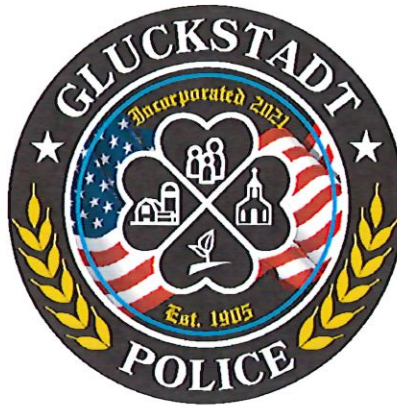
ATTEST:

DATE:

\_\_\_\_\_  
LINDSAY D. KELLUM  
CITY CLERK

\_\_\_\_\_  
WALTER C MORRISON, IV  
MAYOR

[Seal]



## CITY OF GLUCKSTADT

MISSISSIPPI

OFFICE OF THE POLICE DEPARTMENT

140 Gluckstadt Way, Gluckstadt, Mississippi 39110

### MEMORANDUM

**To:** Mayor & Board of Alderman

**From:** Barry Hale, Police Chief

**Date:** January 06, 2025

**Subject: Requesting approval of Travel and Training Reimbursement for Asst. Chief Slaven, Lt. Potvin, and Lt. Tucker to attend the FBI-LEEDA Command Leadership Institute Class in Jackson, MS**

I'm requesting approval for Asst. Chief Slaven, Lt. Potvin, and Lt. Tucker to attend the FBI-LEEDA Command Leadership Institute Class being hosted by the State Fire Marshal's Office at the Sun & Sand Conference Center located at 401 North Lamar Street, Jackson, MS 39202. The cost of the training will be \$795.00 per person, and the class is April 20-24, 2025.

Thank you for your consideration in this matter,

Respectfully,

A blue ink signature of Barry Hale, the Police Chief, written over a horizontal line.

Chief Barry Hale  
Gluckstadt Police Department





## CITY OF GLUCKSTADT

MISSISSIPPI

OFFICE OF THE POLICE DEPARTMENT

140 Gluckstadt Way, Gluckstadt, Mississippi 39110

CHIEF BARRY HALE

ASSISTANT CHIEF JEREMY SLAVEN

I am requesting approval for Lt. Potvin, Lt. Tucker, and myself to attend the FBI Law Enforcement Executive Seminar being hosted by the State Fire Marshal's Office in Jackson, MS. The program is from April 20<sup>th</sup> to 24<sup>th</sup> and the cost is \$795 per attendee. This course is their Command Leadership Institute that focuses on strategies and techniques for law enforcement leaders in command level positions.

A blue ink signature of Jeremy Slaven.

Jeremy Slaven  
Assistant Chief of Police





CONFERENCE (HTTPS://FBILEEDA2026.ORG/)

CONFERENCE (HTTPS://FBILEEDA2026.ORG/)

CONFERENCE (HTTPS://FBILEEDA2026.ORG/)

# CLI - Jackson, MS 4/2026



Register



Map this Event



Tell a Friend (/members/send.asp?event=1876008)





4/20/2026 to 4/24/2026

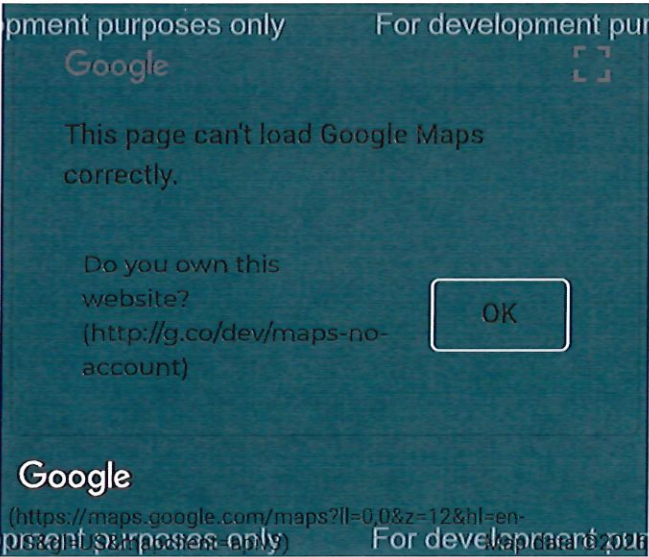
**When:** Monday, April 20, 2026  
8:30 AM

**Where:** *Map this event »*  
The Sun & Sand Conference Center  
401 N. Lamar St.  
Jackson, Mississippi 39202  
United States

**Contact:** State Chief Deputy Fire Marshal Connie Dolan  
connie.dolan@mid.ms.gov (mailto:connie.dolan@mid.ms.gov)  
601-359-1061

REGISTER

Online registration is available until: 4/20/2026



« Go to Upcoming Event List (/events/event\_list.asp)

The Command Leadership Institute (CLI) is part two of the three-step leadership series that makes up the FBI-LEEDA Trilogy. The CLI is a dynamic and challenging program uniquely designed to prepare law enforcement leaders for command level positions.

The Command Leadership Institute provides real-life, contemporary, best-practice strategies and techniques for those who are already commanders or are aspiring to a command level assignment. CLI faculty members are passionate instructors who have executive level law enforcement and leadership experience.

CLI students will be engaged in such topics as: credibility, command discipline, liability, problem employees, and leading change within an organization. The Command Leadership Institute is student-centered with a high degree of student involvement.

**The cost of the Command Leadership Institute is \$795.**

**FBI-LEEDA will send you a tuition invoice six-weeks prior to the start date of the class. To make special payment arrangements prior to being invoiced please email Finance at [finance@fbileeda.org](mailto:finance@fbileeda.org) (<mailto:finance@fbileeda.org>).**

- The registration fee includes the cost of the training and course materials; the fee does not include meals or travel expenses.
- Sworn and professional law enforcement staff are welcome to all FBI-LEEDA classes. You do not have to be a member to attend a class.
- Each student must register for classes under their own Username and Account.
- There are no prerequisites for this course; Trilogy courses can be taken in any order.
- A workbook will be provided; laptop is optional.
- Dress is business casual.
- This course is 28 contact hours.

For further information regarding this or any other FBI-LEEDA class, please contact FBI-LEEDA at 1-877-772-7712

**Cancellation Policy:** FBI-LEEDA, Inc. makes every attempt to complete all of our scheduled courses, however, we may have to postpone or cancel any course because of insufficient paid enrollment, host agency request, or for any unforeseen circumstance, such as weather or illness. If FBI-LEEDA postpones or cancels a course, the student will have the option of enrolling in another course or be refunded the course registration fees in full. Re-enrollment must be done within 30 days from date of cancellation or a refund will be issued. FBI-LEEDA is not responsible for any travel costs or fees incurred by the student for any cancelled or postponed course. A student may request to be withdrawn from any course by emailing the finance department at [finance@fbileeda.org](mailto:finance@fbileeda.org) (<mailto:finance@fbileeda.org>) at least two business days prior to the start of the course. Refunds will not be issued for no-shows. **All registration fees must be paid in full prior to the start of the course.**



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FBI-LEEDA, Inc

Phone: 1-877-772-7712

or 484-321-7821

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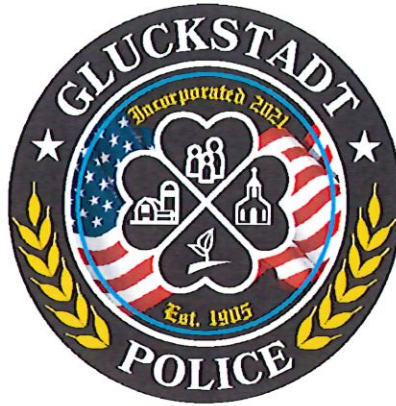
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## CITY OF GLUCKSTADT

MISSISSIPPI

OFFICE OF THE POLICE DEPARTMENT

140 Gluckstadt Way, Gluckstadt, Mississippi 39110

### MEMORANDUM

To: Mayor & Board of Alderman

From: Barry Hale, Police Chief

Date: January 07, 2025

**Subject: Request Approval for Training and Travel Reimbursement for the Emotional Support in Law Enforcement class (Simpson) located at the Biloxi Civic Center, 578 Howard Avenue, Biloxi, MS 39530.**

I'm requesting approval for Training and Travel Reimbursement for the Emotional Support in Law Enforcement class (Simpson) located at the Biloxi Civic Center, 578 Howard Avenue, Biloxi, MS 39530. The class will be February 23-25, 2026. The cost of the class is free, and the lodging room rate will be \$109.00 per night. Lodging will be the Hotel Legends located at 674 Beach Blvd. Biloxi, MS 39530.

Thank you for your consideration in this matter,

Respectfully,

A blue ink handwritten signature, appearing to read "Barry Hale", is written over a large, loopy blue ink scribble.

Chief Barry Hale  
Gluckstadt Police Department



# CITY OF GLUCKSTADT

MISSISSIPPI



343 DISTRIBUTION DRIVE

GLUCKSTADT, MS 39110

769-567-2888

## MEMORANDUM

**TO: Lt. Stephen Tucker**

**FROM: Officer Laron Simpson**

**DATE: 01/07/2026**

**Re: Training**

---

I am interested in attending the attached training as I believe it will benefit myself and the Gluckstadt police Department.

Respectfully

Laron Simoson

Gluckstadt Police Department



**Registration Deadline:**  
**February 16, 2026**

**Seating Capacity:**  
200

## Training Information

**Location:**

Biloxi Civic Center

**Address:**

578 Howard Ave., Biloxi, MS 39530

**Site Phone:**

(228) 388-7170

## Training Agenda

**Day 1:**

EMOTIONAL SUPPORT IN LAW ENFORCEMENT

**Day 2:**

IMPACTS OF LINE-OF-DUTY DEATH

**Day 3:**

SUICIDE AWARENESS & PREVENTION

[Register Here](#)

## Hotel Information

**Name:**

Hotel Legends

[\[Booking link\]](#)

**Address:**

674 Beach Blvd., Biloxi, MS 39530

**Phone:**

(228) 400-4001

**Room Rate:**

\$109 plus tax

**Amenities & Parking:**

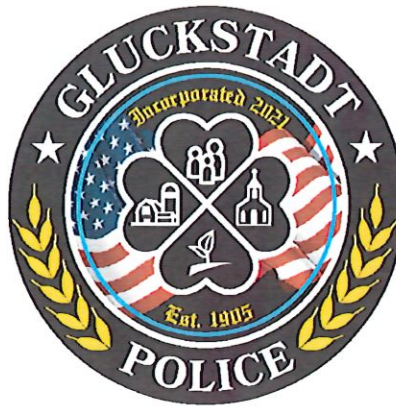
On-site Restaurant, Outdoor Pool, 24-hr Fitness Center, Concierge,

**Self Parking: Free**

**Airport Shuttle:**

N/A





## CITY OF GLUCKSTADT

MISSISSIPPI

OFFICE OF THE POLICE DEPARTMENT

140 Gluckstadt Way, Gluckstadt, Mississippi 39110

### MEMORANDUM

**To:** Mayor & Board of Alderman

**From:** Barry Hale, Police Chief

**Date:** December 30, 2025

**Subject:** Requesting Approval for Training and Travel Reimbursement for the Field Training Officer Class (Huff) located at the Southern Regional Public Safety Institute.

I'm requesting approval for training and travel reimbursement for the field training officer class (Huff) located at the Southern Regional Public Safety Institute in Hattiesburg, MS. The registration fee will be \$350.00, and lodging will be on-site with the price of \$240.00. The class will be April 14-16, 2026.

Thank you for your consideration in this matter,

Respectfully,

A blue ink handwritten signature, appearing to be "Barry Hale", is written over a large, loopy blue oval.

Chief Barry Hale  
Gluckstadt Police Department



## Memorandum

Date: 12/30/2025

To: Lieutenant Tucker

CC: Asst. Chief Slaven

From: Ofc Huff

Subject: Field Training Officer School

---



I Officer Huff am requesting to attend FTO school held at SRPSI April 14-16, 2026  
The registration costs \$350. Lodging is available on site for \$240 for the duration of the class.





## SOUTHERN REGIONAL PUBLIC SAFETY INSTITUTE

*PRESENTS*  
Field Training Officer  
Instructor: Sheriff Todd Stewart

### STUDENT REGISTRATION FORM

#### Agency Information:

Approving Authority Name: \_\_\_\_\_ Email: \_\_\_\_\_

Agency Address: \_\_\_\_\_

Agency Telephone #: \_\_\_\_\_ Agency Fax #: \_\_\_\_\_

Names of officers being registered:

Officer's Phone #


Course Dates:      April 14-16, 2026      or      October 13-15, 2026      (circle one date only)

Tuition: \$350/ per officer

Lodging & Meals: Conveniently located on site for the duration of the course for \$240/per officer

Officers WILL / WILL NOT need lodging (circle one)

Payment:      Check enclosed      or      PO# \_\_\_\_\_      (circle one)

Make checks or PO payable to:      Southern Regional Public Safety Institute  
118 College Drive, Box 5107  
Hattiesburg, MS 39406

Please email registration form to [police.academy@usm.edu](mailto:police.academy@usm.edu)

Registration form and payment/PO# must be received prior to start date of the class.

#### About the Class:

This 24-hour program offers law enforcement officers prepares the patrol officer to identify, implement, and evaluate new police recruit training and prepare new police recruits for individual patrol assignment

Police Vehicle Operations  
Local Procedures, Law Policies  
Problem Solving Skills  
Legal Authority  
Cultural Diversity & Special Needs Groups  
Self Awareness/Regulation

Use of Force  
Report Writing  
Community Specific Problems  
Individual Rights  
Ethics

Legal Authority  
Leadership  
Officer Safety  
Communication Skills  
Lifestyle Stressors

**Required Equipment:**

Laptop with Microsoft Word® and PowerPoint® or Google Docs® and Google Slides®, Pen

**Additional Lodging Information:**

Bed linens provided

Towels/washcloths **NOT** provided

**Information Requests:**

Phone: 601-266-6680      Email: [police.academy@usm.edu](mailto:police.academy@usm.edu)





**MISSISSIPPI MUNICIPAL LEAGUE  
BOARD OF DIRECTORS LUNCHEON & BUSINESS MEETING  
WEDNESDAY, JANUARY 14, 2026  
11:30 A.M.  
MAYOR PATTI PETTIT, PRESIDENT PRESIDING  
THE NATCHEZ BALLROOMS, WESTIN  
AGENDA**

- 
- ❑ **Invocation**
  
  - ❑ **Call to Order and Declare a Quorum**                      **Mayor Patti Pettit, MML President**
  
  - ❑ **Approval of Minutes- September 19, 2025**              **Mayor Patti Pettit, MML President**
  
  - ❑ **Quarterly Financial Report**                                      **Mayor Andy Dulaney  
MML Finance Chairman  
Wil Crawford, CPA, Forvis Mazars**
  
  - ❑ **Presentation of MML Audit**                                      **Barry McKenzie, CPA  
Mckenzie CPA, PLLC**
  
  - ❑ **MML Legal Update**    **Attorney Troy Johnston  
Butler Snow**
  
  - ❑ **Legislative Report / Proposed Agenda**                      **Mayor Copey Grantham  
Legislative Committee Chairman  
Trey Bobinger, MML Lobbyist**
  
  - ❑ **Executive Director's Report**                                      **Shari Veazey, MML Executive Director**

***Special thanks to the MS Municipal Service Company  
Luncheon Sponsor***

# UPCOMING EVENTS

## 18TH ANNUAL STATEWIDE YOUTH LEADERSHIP SUMMIT

February 27-28, 2026 / Jackson State University | Jackson, MS

## MML 95TH ANNUAL CONFERENCE

June 29-July 1, 2026 / Biloxi, MS

HOTEL ROOM BLOCKS OPEN TUESDAY, JANUARY 20 AT 10AM

**MML GRATEFULLY ACKNOWLEDGES OUR  
MID-WINTER LEGISLATIVE CONFERENCE SPONSORS**

**PLATINUM**

BUTLER SNOW



COMCAST  
BUSINESS



GOVERNMENT  
CONSULTANTS



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# LOCAL LEADERS, LASTING IMPACT



## MID-WINTER LEGISLATIVE CONFERENCE

January 13-15, 2026 / Westin Jackson / Jackson, MS

# AGENDA

Section 4, IF)

## Tuesday, JANUARY 13

11:00AM - 5:00PM

### Registration

Sponsored by Raymond James

*Westin Jackson Pre-Function Area*

### Display Tables

*Westin Jackson Pre-Function Area*

- C SPIRE
- DUNGAN ENGINEERING
- GOVERNMENT CONSULTANTS, INC.
- MISSISSIPPI EMERGENCY MANAGEMENT AGENCY
- MISSISSIPPI URBAN FOREST COUNCIL
- MSU EXTENSION SERVICE – CENTER FOR GOVERNMENT & COMMUNITY DEVELOPMENT
- PH BIDDING GROUP
- RAYMOND JAMES

### CMO Classes

1:00PM-5:00PM

#### Basic CMO Core Course *Municipal Organization*

*Jackson 3 & 4*

5 CMO BASIC CREDITS

**Dr. Dallas Breen**

Executive Director, Stennis Institute of Government and Community Development, MSU

1:00PM - 5:00PM

#### Advanced CMO Core Course *Economic Development*

*Jackson 1*

5 CMO ADVANCED CREDITS

**Dr. Rachael M. Carter**

Extension Specialist I, Extension Center for Government and Community Development, MSU

1:00PM - 4:00PM

### Professional Development

#### CMO Core Course

##### *Branding Your City –*

##### *Presentation Affects Everything*

*Jackson 2*

3 CMO PD CREDITS

**Barbara Travis**

CEcD Emerita, MarketLynx Corporate & Community Consulting

1:00PM - 5:00PM

#### *Building Community Development Through Volunteer Management*

*Natchez 1 & 2*

4 CMO ELECTIVE CREDITS

**Chance McDavid**

Project Director, Stennis Institute of Government and Community Development, MSU

## Wednesday, JANUARY 14

8:30AM

### MML Day at the Capitol

*State Capitol Building*

9:00AM

### Legislative Briefing

*Senate Room 216 – State Capitol Building*

11:30AM

### MML Board of Directors' Luncheon

*Natchez Ballrooms*

Sponsored by Mississippi Municipal Service Company

### General Delegates

*Lunch on Your Own*

3:30PM - 5:00PM

### Opening General Session

*Jackson Ballrooms*

#### Presiding

**Mayor Patti Pettit**

MML President, Woodland

#### Invocation

**Mayor Hope Magee Jones**

MML 1st Vice President, Collins

#### Pledge of Allegiance

**Mayor Butch Lee**

MML 2nd Vice President, Brandon

#### Sponsor Remarks

**Raymond James**

#### MML Legislative Committee Update

**Shari T. Veazey**

MML Executive Director

**Mayor Copey Grantham, Saltillo**

MML 2025 - 2026 Legislative Committee Chairman

#### MML Conference Planning Committee Update

**Mayor Emily Quinn, Fulton**

MML 2025 - 2026 Conference Planning Committee Chairwoman

#### MML Youth Committee Update

**Alderman Andrew Miller, Hernando**

MML 2025 - 2026 Youth Committee Chairman

#### MML Health Committee Update

**Mayor Roslynn Clark, Baldwyn**

MML 2025 - 2026 Health Committee Chairwoman

#### Tax Forfeited Properties

**Tyrone Hickman**

Director of Tax Forfeited Lands,  
Mississippi Secretary of State's Office

#### Economic Development for Cities, Small and Large

**Bill Cork**

Executive Director, Mississippi Development Authority

### Adjournment

5:00PM - 6:00PM

### Member Networking Reception

*Westin Jackson Pre-Function Area*

*Dinner on your own*

## Thursday JANUARY 15

8:30AM

### Closing Breakfast / General Session

*Jackson Ballrooms*

3 CMO ELECTIVE CREDITS

Sponsored by C Spire

INVITE YOUR LEGISLATORS

#### Sponsor Remarks

**C Spire**

*State Agency Update*

*Door Prize Drawings*

### Conference Adjourns

## Bus Schedule

Buses will run continuously throughout the event to and from the Westin Jackson, the King Edward Hotel, and the event parking located at the Mississippi Fairgrounds.

### TUESDAY, JANUARY 13TH

Buses start at 11am and run until 6pm

### WEDNESDAY, JANUARY 14TH

Buses start at 8am and run until 7pm

### THURSDAY, JANUARY 15TH

Buses start at 8am and run until one hour after conference adjournment



SCAN THIS CODE TO  
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**From:** [Mississippi Municipal League](#)  
**To:** [Lindsay Kellum](#)  
**Subject:** Your Express Check-in for MML- MidWinter Legislative Conference 2026  
**Date:** Monday, January 5, 2026 10:01:30 AM  
**Attachments:** [file-1.png](#)

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[View email in browser](#)



**Registrant**  
**ID: 62456925**



**Please print this email or save it on your phone and bring it with you to the show for faster check-in.**

Dear Lindsay Kellum,

Thank you for pre-registering for the 2026 Mid-Winter Legislative Conference being held January 13th-15th at the Westin Jackson in Jackson, MS. Your registration has been confirmed. For faster on-site check-in, bring this email with you and scan your QR code at the registration area to receive your badge.

Please note that there is very limited parking at the Westin. MML has purchased event parking at the Mississippi Fairgrounds and will be providing complimentary bus transportation to and from the venue throughout the event. Attendees will enter the fairgrounds from High Street, and the bus will be picking attendees up directly behind the large slide.

Bus Schedule:

Tuesday, January 13th

Buses start at 11am and run until 6pm

Wednesday, January 14th

Buses start at 7:30am and run until 7:00pm

Thursday, January 15th

Buses start at 8am and run until one hour after conference adjournment

**Please note that bus riders will have an opportunity to win a special door prize!**

Inside your conference name badge, you will find a door prize ticket that can be placed in the drawing box located on the buses, and a winner will be drawn on Thursday's Closing General Session for a special prize!

[Click Here](#) to view a final copy of the conference agenda.

[Click Here](#) to download mobile app.

If you have any questions or need assistance with registration, please contact the Registration Team at [questions@american-tradeshow.com](mailto:questions@american-tradeshow.com) or 985-240-5511.

Best regards,

Mississippi Municipal League

**MAINTENANCE AGREEMENT ADDENDUM  
QUOTATION**

QUOTE ID: 50873  
QUOTE DATE: 11/13/25  
CUSTOMER ID: BD-65397  
PRICE LIST: 2025

**COVERAGE**  
START DATE: 10/12/25  
END DATE: 10/11/26

**BILL TO:** GLUCKSTADT POLICE DEPARTMENT  
PO BOX 2210

MADISON, MS 39110  
UNITED STATES

COVERAGE TYPE		DESCRIPTION	SERIAL NUMBER	QTY	PRICE
<b>EQUIPMENT LOCATION:</b>		GLUCKSTADT POLICE DEPARTMENT - 343 DISTRIBUTION DR GLUCKSTADT, MS 39110			
<b>TPE-MT2020-M95</b>		MAINTENANCE, LIVESCAN, MTOP2020 SYSTEM, 9X5			
TPE-MT2020D-ED			75882-001	1	\$1,889.00
<b>PRT-DUP-M95</b>		ANNUAL 9/5 MAINTENANCE			
TPE-PRT-DUP			75882-002	1	\$377.00
<b>HWOX-FLTBED-M95</b>		ANNUAL 9/5 MAINTENANCE			
TP-HWOX-FLTBED			75882-004	1	\$268.00
<b>LS-IDRRD-MAINT-95</b>		MAINTENANCE, LIVESCAN, ID READER, 9X5			
TPE-HWOX-IDRRD			75882-003	1	\$139.00
<b>TOTAL:</b>					<b>\$2,673.00</b>

NAME: CHERYL WALES

TITLE: Maintenance Contract Admin

PHONE: (714) 215-7598

FAX:

EMAIL: Cheryl.Wales@ps-idemia.com

SUPPORT EMAIL: BiometricsSupport@ps-idemia.com

SUPPORT PHONE: (888) 435-7439

PO NUMBER:

SIGNATURE BY:

NAME(Print) / DATE

TITLE:

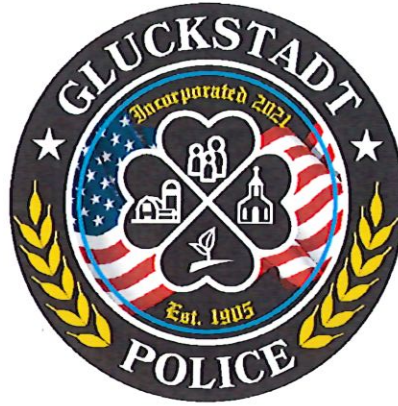
PHONE / FAX:

EMAIL:

The terms and conditions of IDEMIA Identity & Security USA LLC maintenance services agreement are hereby incorporated into this Addendum by reference. Please sign and date this Maintenance Agreement Addendum. If a purchase order is required, please attach or include the purchase order number on this addendum. Some of the terms set out herein may differ from those in the buyer's purchase order and some may be new. Acceptance is conditional on the buyer's as sent to the terms set out here in lieu of those in the buyer's purchase order. Seller's failure to object to provisions contained in any communication from the buyer shall not be deemed a waiver of the provisions of this acceptance. Any changes in the terms contained herein must be specifically agreed to in writing by an officer of the seller before becoming binding on either seller or buyer.

**AN INVOICE WILL BE ISSUED UPON RENEWAL DATE OR RECEIPT OF A SIGNED MAINTENANCE AGREEMENT ADDENDUM**

**IDEMIA I&S appreciates the opportunity to present this quote, which will remain valid for 90 calendar days from the quote date, after which availability and / or prices are subject to change.**



## CITY OF GLUCKSTADT

MISSISSIPPI

OFFICE OF THE POLICE DEPARTMENT

140 Gluckstadt Way, Gluckstadt, Mississippi 39110

### MEMORANDUM

**To:** Mayor & Board of Alderman

**From:** Barry Hale, Police Chief

**Date:** January 07, 2025

**Subject:** Requesting approval to add two (2) donated Chevrolet Impalas to the city's fixed assets list.

I'm requesting approval to add two (2) Chevrolet Impalas donated by the State Gaming Commission to the city's fixed assets list.

2011 Chevrolet Impala (Blue) Vin# 2G1WF5EK7B1286008

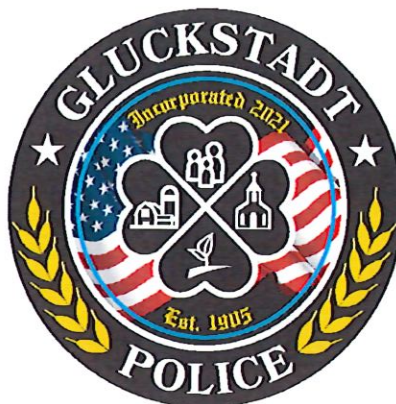
2012 Chevrolet Impala (Blue) Vin# 2G1WF5E30C1243252

Thank you for your consideration in this matter,

Respectfully,

Chief Barry Hale  
Gluckstadt Police Department





## CITY OF GLUCKSTADT

MISSISSIPPI

OFFICE OF THE POLICE DEPARTMENT

140 Gluckstadt Way, Gluckstadt, Mississippi 39110

### MEMORANDUM

**To:** Mayor & Board of Alderman

**From:** Barry Hale, Police Chief

**Date:** January 08, 2026

**Subject:** Requesting approval to declare two (2) Chevrolet Impalas unmarked and to purchase tags for the vehicles.

I'm requesting approval to declare two (2) Chevrolet Impalas donated by the State Gaming Commission unmarked. I'm also requesting approval to purchase tags for both vehicles in the amount of \$16.00 per vehicle tag.

2011 Blue Chevrolet Impala Vin# 2G1WF5EK7B1286008

2012 Blue Chevrolet Impala Vin# 2G1WF5E30C1243253

Thank you for your consideration in this matter,

Respectfully,

Chief Barry Hale  
Gluckstadt Police Department





## CITY OF GLUCKSTADT

MISSISSIPPI

OFFICE OF THE POLICE DEPARTMENT

140 Gluckstadt Way, Gluckstadt, Mississippi 39110

CHIEF BARRY HALE

ASSISTANT CHIEF JEREMY SLAVEN

I am requesting the following modifications to fixed assets:

Removal of MPH Radar Unit Serial Number PYT123901542 / Property Number 200-0034 due to hardware failure.

Addition of the following:

Motorola M500 In-Car Camera DVR Serial Number M505-026600 / Property Number 200-62  
Motorola M500 In-Car Camera DVR Serial Number M505-026623 / Property Number 200-63  
Motorola M500 In-Car Camera DVR Serial Number M505-026638 / Property Number 200-64  
Motorola M500 In-Car Camera DVR Serial Number M505-026656 / Property Number 200-65  
Motorola M500 In-Car Camera DVR Serial Number M505-026675 / Property Number 200-66  
Motorola M500 In-Car Camera DVR Serial Number M505-026684 / Property Number 200-67  
Motorola M500 In-Car Camera DVR Serial Number M505-026695 / Property Number 200-68  
Motorola M500 In-Car Camera DVR Serial Number M505-026707 / Property Number 200-69  
Motorola M500 In-Car Camera DVR Serial Number M505-026711 / Property Number 200-70  
Motorola M500 In-Car Camera DVR Serial Number M505-026715 / Property Number 200-71  
Motorola M500 In-Car Camera DVR Serial Number M505-026716 / Property Number 200-72  
Motorola M500 In-Car Camera DVR Serial Number M505-026743 / Property Number 200-73  
Motorola M500 In-Car Camera DVR Serial Number M505-026746 / Property Number 200-74  
Motorola APX6000 Radio Serial Number 481CBX2337 / Property Number 200-RA0051  
Motorola APX6000 Radio Serial Number 481CBX2343 / Property Number 200-RA0052  
Motorola APX6000 Radio Serial Number 481CBX2345 / Property Number 200-RA0053  
Motorola APX6000 Radio Serial Number 481CBX2342 / Property Number 200-RA0054  
Motorola APX6000 Radio Serial Number 481CBX2346 / Property Number 200-RA0055  
Motorola APX6000 Radio Serial Number 481CBX2338 / Property Number 200-RA0056  
Motorola APX6000 Radio Serial Number 481CBX2341 / Property Number 200-RA0057  
Motorola APX6000 Radio Serial Number 481CBX2340 / Property Number 200-RA0058  
Motorola APX6000 Radio Serial Number 481CBX2339 / Property Number 200-RA0059  
Motorola APX6000 Radio Serial Number 481CBX2344 / Property Number 200-RA0060

A handwritten signature in blue ink, appearing to read "J. Slaven".

Assistant Chief Jeremy Slaven



## CITY OF GLUCKSTADT

MISSISSIPPI

PUBLIC WORKS DEPARTMENT

### MEMORANDUM

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**TO:** Mayor & Board of Alderman

**FROM:** Chris Buckner, Public Works Director

**DATE:** 1/7/2026

**SUBJECT:** Request for Approval, Waste Management Service Agreement

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This memo is to request approval for a new service agreement with Waste Management for services at 107 Lone Wolf Drive. The services provided will remain the same as in the previous service agreement, and the price will remain \$199.00 per month. If approved, this new service agreement would be effective February 1<sup>st</sup>, 2026.

If you have any concerns or questions, please contact me.



**Waste Management of Mississippi, Inc.**  
 108 Hill Ave  
 Fort Walton Beach, FL, 32548  
 (800) 284-2451

WM Agreement #  
 Customer ID  
 Acct. Name  
 Salesperson  
 Effective Date  
 Last PI Date

**S0020259925**  
**29-84248-53004**  
**CITY OF GLUCKSTADT**  
**PUBLIC WORKS**  
**Megan Fields**  
**2/1/2026**  
**12/17/2025**

Section 4, IK)

## Service Agreement

### Non-Hazardous Waste Service Summary

#### Service Information

Name	<b>CITY OF GLUCKSTADT PUBLIC WORKS</b>	Contact	<b>Chris Buckner</b>
Address	<b>107 LONE WOLF DR</b>	Telephone #	<b>601-672-3562</b>
City State Zip	<b>MADISON, MS 39110-7029</b>	Fax #	
County/Parish	<b>MADISON</b>	Email	<b>chris.buckner@gluckstadt.net</b>

Customer Comments:

#### Billing Information

Name	<b>CITY OF GLUCKSTADT PUBLIC WORKS</b>	Contact	<b>AMBER TROTTER</b>
Address	<b>PO BOX 2210</b>	Telephone #	<b>7695671758</b>
City State Zip	<b>MADISON, MS 39130-2210</b>	Fax #	
County/Parish	<b>Madison</b>	Email	<b>accountspayable@gluckstad t.net</b>

PO#

#### Service Description & Recurring Rates

Quantity	Equipment	Material Stream	Frequency	Base Rate	
1	8 Yard FEL	MSW Commercial	1xPer Week	Energy Surcharge	\$ 199.00 \$ 0.00

Current rate for Extra Pickup: \$ 336.00

Current Energy Surcharge 0%

**MONTHLY TOTAL : \$ 199.00 \***

Customer's Waste Materials not to exceed an average weight of 65 lbs/yd.

<b>Administrative Charge</b>	<b>\$ 0.00 *</b>
<b>MONTHLY GRAND TOTAL</b>	<b>\$ 199.00 *</b>

#### Initial One Time Service Charges\*

#### As Needed Services\*

The above listed Charges are for recurring services only. Charges for all additional services will be at current rates at the time of service. These include but are not limited to: extra pickups, container removal, overages and contamination. Contact Waste Management for a full list of such additional services and current prices.

\*The Energy Surcharge applies to all other Charges whether or not listed on this summary. Any Energy Surcharge amounts shown in this Service Summary are estimated based on current percentages (as set forth herein), and actual amounts will be calculated at the time of invoicing based on current applicable percentages. Information about the Energy Surcharge and its calculation can be found at [www.wm.com/billhelp](http://www.wm.com/billhelp). State & Local taxes, and/or fees and a Recycle Material Offset, if applicable, will also be added to the Charges. An Administrative Charge per invoice will be assessed and can be removed by enrolling in paperless statements and automated payments. This Agreement does not provide for a fixed price during the Contract Term. Unless specifically provided otherwise herein, Customer should expect Company to increase Charges as allowed by Section 4(b) and Company to seek other price increases subject to Customer's consent under Section 4(c) of this Agreement. Consent to price increases may be given orally, in writing, or by notice and Customer's payment of, or failure to object to, the price increase.

**Contract Term is for 3 year(s) from the Effective Date ('Initial Term') and it shall automatically renew thereafter for additional terms of 12 months ('Renewal Term') unless terminated as set forth herein.**

The individual signing this agreement on behalf of customer acknowledges that he/she has read and accepts the terms and conditions of this agreement which accompany this service summary sheet and that he/she has the authority to sign on behalf of the customer.

Customer Signature **Chris Buckner** Printed Name Title Date

Company Waste Management of Mississippi, Inc. Printed Name Title Date  
 Waste Management Sales Rep.

Terms and Conditions on following page(s)



**1. (a) SERVICE GUARANTEE.** We guarantee our Services (as defined below). If Company fails to perform Services in accordance with the service summary as provided, which for Services purchased online include the information and terms disclosed during the order and checkout process (collectively, the “Service Summary”), and Company does not remedy such failure within five (5) business days of its receipt of a written demand from Customer, Customer may immediately terminate this Agreement without penalty.

**(b) SERVICES RENDERED; WASTE MATERIALS.** Customer grants to Company the exclusive right, and Company through itself and its Affiliates shall furnish equipment and services, to collect and dispose of and/or recycle (collectively, the “Services”) all of Customer’s Waste Materials at Customer’s Service Address(es) listed on the Service Summary, subject to the terms and provisions contained herein (collectively, with the Service Summary, the “Agreement”). If Customer changes its Service Address(es), this Agreement shall remain valid and enforceable with respect to Services rendered at Customer’s new service location(s) if such location(s) is within Company’s service area. Customer represents and warrants that the materials to be collected under this Agreement shall be only “Waste Materials” as defined herein. For purposes of this Agreement, “Waste Materials” means all non-hazardous solid waste, organic waste, and if applicable, Recyclable Materials (as defined in Section 12) generated by Customer or at Customer’s Service Address(es). Waste Materials includes “Special Waste”, such as industrial process wastes, asbestos-containing material, polychlorinated biphenyl (“PCB”) wastes, petroleum contaminated soils, treated/de-characterized wastes, and demolition debris, for which Customer shall complete a Special Waste Profile sheet to be approved by Company in writing. Waste Materials excludes, and Customer agrees not to deposit or permit the deposit for collection of (i) any waste tires, (ii) radioactive, volatile, corrosive, flammable, explosive, biomedical, infectious, bio-hazardous, regulated medical or hazardous waste, toxic substance or material, as defined by, characterized or listed under applicable federal, state, or local laws or regulations, (iii) any materials containing information protected by federal, state or local privacy and security laws or regulations (unless tendered to Company pursuant to an additional Exhibit L to this Agreement), (iv) any other items or material prohibited by federal, state or local laws or regulations, or that could adversely affect the operation or useful life of the facility(ies) receiving Customer’s Waste Materials, or (v) Special Waste not approved in writing by Company (collectively, “Excluded Materials”). Title to and liability for Excluded Materials shall remain with Customer at all times. Title to Customer’s Waste Materials is transferred to Company upon Company’s receipt or collection unless otherwise provided in this Agreement or applicable law.

**2. CONTRACT TERM.** The Initial Term and any subsequent Renewal Term of this Agreement (collectively, the “Contract Term”) is set forth on the Service Summary. Unless otherwise specified on the Service Summary, at the end of the Initial Term and any subsequent Renewal Term, the Contract Term shall automatically renew for an additional Renewal Term at the then current Service levels and applicable Charges, unless (a) for a Renewal Term of twelve (12) months or more, either party gives to the other party written notice of termination at least ninety (90) days, but not more than one hundred eighty (180) days, prior to the termination of the then-existing term, and (b) for a Renewal Term of less than twelve (12) months, either party gives to the other party written notice of termination at least thirty (30) days prior to the termination of the then-existing term. Notice of termination received at any other time will be considered ineffective and the Agreement will be considered automatically renewed upon completion of the then-existing term.

**3. TERMINATION RIGHTS.** Notwithstanding the foregoing, this Agreement can be terminated prior to the end of the Initial Term or a Renewal Term as follows: (a) by Customer (with no obligation to pay liquidated damages as provided in Section 7), (i) if Company fails to satisfy the Service Guarantee provided in Section 1(a) or (ii) pursuant to Section 4(c) if Company increases the Charges payable by Customer hereunder with a Consensual Price Increase; (b) by Customer with thirty (30) days prior written notice to Company, subject to Customer’s obligation to pay liquidated damages as provided in Section 7 no later than thirty (30) days after written notice of termination; (c) by Company, (i) if as a result of Customer’s breach of Section 5, Company suspends Services for more than fifteen (15) days, or (ii) if Customer fails to cure any other breach of its obligations under this Agreement within five (5) business days of its receipt of written demand from Company to cure such breach; and (d) by Company, with at least fifteen (15) days prior written notice to the Customer, any time after Customer retains, designates or appoints a broker or agent to act for Customer, or manage its Services, under this Agreement. In order to move containers in a safe, secure and orderly fashion, Company shall have up to seven (7) days to remove any equipment from Customer’s service location(s) after the effective date of the termination of this Agreement.

**4. (a) CHARGES; ADDITIONAL SERVICES; CHANGES.** The initial charges, fees and other amounts payable by Customer (“Charges”) for Services and/or equipment furnished by Company to Customer are set forth on the Service Summary. Company also reserves the right to charge Customer additional Charges for additional Services provided by Company to Customer, whether requested or incurred by Customer, including, but not limited to, container relocation or removal; gate, enclosure or roll out services; account resume or reactivation services; extra pickups or trip charges; container overages and overflows; and equipment repair and maintenance (see [www.wm.com/billhelp](http://www.wm.com/billhelp) for a list of “Additional Services”), which may be updated from time to time), all at such standard prices or rates that Company is charging its customers in the service area at such time. Changes in the frequency of collection, collection schedule, number, capacity and/or type of equipment, the terms and conditions of this Agreement, and any changes to the Charges payable under this Agreement (including any Consensual Price Increase or Negotiated Price Adjustment), may be agreed to orally, in writing or by other actions and practices of the parties, including, without limitation, electronic or online acceptance or payment of the invoice reflecting such changes, and written notice to Customer of any such changes and Customer’s failure to object to such changes, which shall be deemed to be Customer’s affirmative consent to such changes.

**(b) PERMITTED PRICE INCREASES AND CHARGE MODIFICATIONS.** Company reserves the right, and Customer acknowledges that it should expect Company to increase, add, or modify the Charges payable by Customer hereunder during the Contract Term: (i) for any changes or modifications to, or differences between, the actual equipment and Services provided by Company to Customer and those specified on the Service Summary; (ii) for any changes or difference in the composition, amount or weight of the Waste Materials collected by Company from Customer’s service location(s) from what is specified on the Service Summary (including for container overages or overflows); (iii) for any increase in or other modification made by Company to the calculation of the Energy Surcharge including additions or modifications to the fuel types used in the calculations, the Recyclable Materials Offset, and/or any other Charges included or referenced in the Service Summary (which Charges are calculated and/or determined on an enterprise-wide basis, including Company and all Affiliates and subcontractors); (iv) to cover any increases in disposal, processing, and/or transportation costs, including fuel or energy surcharges; (v) to cover increased costs due to uncontrollable circumstances, including, without limitation, changes (occurring from and after three (3) months prior to the Effective Date) in local, state, federal or foreign laws or regulations (or the enforcement, interpretation or application thereof), including the imposition of or increase in taxes, fees or surcharges, or acts of God such as floods, fires, hurricanes and natural disasters; and (vi) for increases in the Consumer Price Index (“CPI”) for Water, Sewer and Trash Collection Services published by U.S. Bureau of Labor Statistics, or with written notice to Customer, any other national, regional or local CPI, with such increases in CPI being measured from the Effective Date, or as applicable, Customer’s last CPI based price increase date (“PI Date”). Increases to Charges specified in this Section 4(b) may be applied singularly or cumulatively and may include an amount for Company’s operating or profit margin. Customer acknowledges and agrees that any increased Charges under this Section 4 (including any Consensual Price Increases or Negotiated Price Adjustments) are not represented to be solely an offset or pass through of Company’s costs.

**(c) CONSENSUAL PRICE INCREASES** Without limiting the foregoing, Company also reserves the right to seek, and Customer acknowledges that it should expect Company to seek, increases in the Charges payable by Customer hereunder for reasons not specifically permitted in Section 4(b) (a “Consensual Price Increase”). If Customer does not accept the Consensual Price Increase, Customer’s sole right and remedy shall be to terminate this Agreement by written notice to Company no later than thirty (30) days after Company notifies Customer of such Consensual Price Increase. Customer’s failure to terminate this Agreement (within the 30-day period) shall be construed as Customer’s acknowledgement that the continuation of the Services by Company hereunder is good, valuable and sufficient consideration for the Consensual Price Increase. Notwithstanding the foregoing, the parties may, but are not obligated to, agree to a different increase or an adjustment to Customer’s Charges (a “Negotiated Price Adjustment”) as a result of a Consensual Price Increase. Absent a Negotiated Price Adjustment, the Consensual Price Increase shall be binding and enforceable against Customer under this Agreement unless the Customer terminates this Agreement (within the 30-day period) as described above. Customer’s agreement to a Consensual Price Increase or Negotiated Price Adjustment may be evidenced pursuant to Section 4(a) and the parties agree that this Agreement with such modified Charges will continue in full force and effect.

**5. INVOICES; PAYMENT TERMS** Company shall send all invoices for Charges and any required notices to Customer under this Agreement to Customer’s billing address specified in the Service Summary, or if the Customer elects to participate in the Company’s electronic billing program, make them available by email to Customer’s designated e-mail address. Unless specifically agreed to in writing by Company and subject to such additional costs that Company may charge, in its discretion, Company shall not be required to bill Customer using Customer’s or any third-party billing portal or program. In no event shall the use by Company of Customer’s or any third-party billing portal or program, or any terms thereof, operate to amend or supplement the terms and conditions of this Agreement, which will remain binding in accordance with its terms. Customer shall pay all invoiced Charges within thirty (30) days of the invoice date, by check mailed to Company’s payment address on Customer’s invoice. Payment by any other method or channel, including in person, online or by phone, shall be as may be allowed by Company and subject to applicable convenience fees and other costs charged by Company or its payment system provider(s) from time to time. Any Customer invoice balance not paid within thirty (30) days of the date of invoice is subject to a late charge, and any Customer check returned for insufficient funds is subject to a non-sufficient funds charge, both to the maximum extent allowed by applicable law. Customer acknowledges that any late charge charged by Company is not to be considered as interest on debt or a finance charge, and is a reasonable charge for the anticipated loss and cost to Company for late payment. If this Agreement is signed by an agent, broker or other third party on Customer’s behalf, the Customer receiving the Services remains liable for payment of all Charges due hereunder including any liquidated damages owed under Section 7. If payment is not made when due, Company retains the right to suspend Services until the past due balance is paid in full. In addition to full payment of outstanding balances, Customer shall be required to pay a reactivation charge to resume suspended Services. If Services are suspended for more than fifteen (15) days, Company may immediately terminate this Agreement for default and recover any equipment and all amounts owed hereunder, including liquidated damages under Section 7.

**6. EQUIPMENT, ACCESS.** All equipment furnished by Company shall remain its property; however, Customer shall have care, custody and control of the equipment and shall be liable for all loss or damage to the equipment and for its contents while at Customer’s service location(s). Customer shall not overload, move or alter the equipment or allow a third party to do so, and shall use it only for its intended purpose. At the termination of this Agreement, Company’s equipment shall be in the condition in which it was provided, normal wear and tear excepted. Customer shall provide safe and unobstructed access to the equipment on the scheduled collection day. Company may suspend Services or terminate this Agreement in the event Customer violates any of the requirements of this provision. Customer shall pay, if charged by Company, any additional Charges, determined by Company in its sole discretion, for overloading, moving or altering the equipment or allowing a third party to do so, and for any service modifications caused by or resulting from Customer’s failure to provide access. Customer warrants that Customer’s property is sufficient to bear the weight of Company’s equipment and vehicles and agrees that Company shall not be responsible for any damage to

Customer's pavement or any other surface resulting from the equipment or Services. Customer agrees that during each instance of service of roll-off/open top container(s) or at Customer's service address, the Company vehicle(s) providing service may temporarily place an additional roll-off/open top container or compactor box at Customer's service address in a manner that does not interfere with the use of Customer's premises, with such container being removed by the Company upon Company vehicle's return of the empty roll-off/open top container or compactor box to the Customer's service address.

**7. LIQUIDATED DAMAGES.** In the event Customer terminates this Agreement prior to the expiration of the Initial or Renewal Term for any reason other than as set forth in Section 3(a), or in the event Company terminates this Agreement for Customer's default pursuant to Section 3(c), Customer shall pay the following liquidated damages in addition to Company's legal fees, if any: (a) if the remaining Contract Term (including any applicable Renewal Term) under this Agreement is six (6) or more months, Customer shall pay the average of its six (6) monthly Charges immediately prior to default or termination (or, if the Effective Date is within six (6) months of Company's last invoice date, the average of all monthly Charges) multiplied by six (6); or (b) if the remaining Contract Term is less than six months, Customer shall pay the average of its six (6) most recent monthly Charges multiplied by the number of months remaining in the Contract Term. Customer acknowledges that the actual damage to Company in the event of Customer's early termination or breach of contract is impractical or extremely difficult to fix or prove, the foregoing liquidated damages amount is reasonable and commensurate with the anticipated loss to Company resulting therefrom, and such liquidated damages payment is an agreed upon charge for Customer's early termination or breach of contract and is not imposed as a penalty. Customer shall also pay liquidated damages of \$100 for every Customer waste tire that is found at any disposal facility used by Company. In addition to and not in limitation of the foregoing, Company shall be entitled to recover all losses, damages and costs, including attorneys' fees and costs, resulting from Customer's breach of any other provision of this Agreement in addition to all other remedies available at law or in equity.

**8. INDEMNITY.** Company agrees to indemnify, defend and save Customer and its Affiliates harmless from and against any and all liability which Customer or its Affiliates may suffer, incur or pay as a result of any bodily injuries (including death), property damage or violation of law, to the extent caused by any negligent act or omission or willful misconduct of Company or its employees, which occurs (a) during the collection or transportation of Customer's Waste Materials, or (b) as a result of the disposal of Customer's Waste Materials in a facility owned by Company or an Affiliate, provided that Company's indemnification obligations will not apply to occurrences involving Excluded Materials. Customer agrees to indemnify, defend and save Company and its Affiliates harmless from and against any and all liability which Company and its Affiliates may suffer, incur or pay as a result of any bodily injuries (including death), property damage or violation of law to the extent caused by Customer's breach of this Agreement or by any negligent act or omission or willful misconduct of Customer or its employees, agents or contractors or Customer's use, operation or possession of any equipment furnished by Company. Neither party shall be liable to the other for consequential, incidental or punitive damages arising out of the performance or breach of this Agreement.

**9. RIGHT TO PROVIDE COMPETING OFFERS.** If Customer receives an offer from (or makes any offer to) a third party relating to such third party's provision to the Customer of the same or similar Services to those provided hereunder, Customer shall give Company prompt written notice of any such offer and a 15-day period to respond to such third party offer prior to Customer agreeing to such third party offer. Except to the extent either party has provided timely written notice of termination as set forth in Section 2, Customer's acceptance of a competing offer under this Section 9 before the expiration or termination of the current Initial Term or Renewal Term shall be a termination under Section 3(b) and subject to Customer's obligation to pay liquidated damages as provided in Section 7.

**10. DISPUTE RESOLUTION-ARBITRATION AGREEMENT AND CLASS ACTION WAIVER.BINDING ARBITRATION:** Except for those claims expressly excluded below (EXCLUDED CLAIMS), Customer and Company agree that any and all existing or future controversy or claim between them arising out of or related to this Agreement or any prior agreements between the parties, whether based in contract, law or equity or alleging any other legal theory, or arising prior to, in connection with, or after the termination of this Agreement or any other agreements, shall be resolved by mandatory binding arbitration (see [www.wm.com](http://www.wm.com) for details on arbitration procedures). **CLASS ACTION WAIVER:** Customer and Company agree that under no circumstances, whether in arbitration or otherwise, may Customer bring any claim against Company, or allow any claim that Customer may have against Company to be asserted, as part of a class action, on a consolidated or representative basis or otherwise aggregated with claims brought by, or on behalf of, any other entity or person, including other customers of Company. **EXCLUDED CLAIMS:** The following are not subject to mandatory binding arbitration: (a) either party's claims against the other in connection with bodily injury or real property damage and for environmental indemnification; and (b) Company's claims against Customer for collection or payment of Charges, damages (liquidated or otherwise) or any other amounts due or payable to Company by Customer under this Agreement or any prior agreements between the parties, but Customer and Company may mutually agree to arbitrate any Excluded Claims.

**11. MISCELLANEOUS.** (a) Except for the obligation to make payments hereunder for Services already performed, neither party shall be in default for its failure to perform or delay in performance caused by events or significant threats of events beyond its reasonable control, whether or not foreseeable, including, but not limited to, strikes, labor trouble, riots, imposition of laws or governmental orders, fires, acts of war or terrorism, acts of God, and the inability to obtain equipment, and the affected party shall be excused from performance during the occurrence of such events. (b) This Agreement shall be binding on and shall inure to the benefit of the parties hereto and their respective successors and assigns. (c) The terms, conditions and disclosures set forth on [www.wm.com](http://www.wm.com) relating to Billing/Billing Help, Charges, Arbitration Procedures, and for those Customers that sign up for electronic billing and payment, Autopay, are incorporated by reference and made a part hereof (as such terms, conditions and disclosures may be changed or modified from time to time, effective from such change or modification). In addition to, and not in limitation of, the foregoing, the terms and provisions of this Agreement may be amended and modified as agreed to by the parties as provided in Section 4(a). Subject to the foregoing, this Agreement represents the entire agreement between the parties and supersedes any and all other agreements for the same Services at the same Customer locations covered by this Agreement, whether written or oral, that may exist between the parties. (d) This Agreement shall be construed in accordance with the law of the state in which the Services are provided. (e) All written notification to Company required by this Agreement shall be effective upon receipt and delivered by Certified Mail, Return Receipt Requested, courier or by hand to Company's address on the first page of the Service Summary, provided that Company may provide written notice to Customer of a different address for written notice to Company. (f) If any provision of this Agreement is declared invalid or unenforceable, then such provision shall be severed from and shall not affect the remainder of this Agreement; however, the parties shall amend this Agreement to give effect, to the maximum extent allowed, to the intent and meaning of the severed provision. (g) In the event Company successfully enforces its rights against Customer hereunder, Customer shall be required to pay Company's attorneys' fees and court costs. (h) Notwithstanding the termination of this Agreement, Sections 6, 7, 8, 10, 11, 12(vi) and Customer's obligation to make payments for all Charges and other amounts due or payable hereunder through the termination date shall survive the termination of this Agreement. (i) It is expressly agreed that the parties shall be independent contractors and that the relationship between the parties shall not constitute a partnership, joint venture, agency, or employer-employee relationship. (j) The term "Affiliate" means with respect to any specified party, any corporation, limited liability company, partnership or other legal entity, directly or indirectly, controlled by, controlling or under common control with such specified party, with "control" meaning, directly or indirectly, the power to direct or cause the direction of the management and policies of such legal entity, whether through the ownership of voting securities, by contract or otherwise. (k) "business day" means Monday through Friday, excluding bank holidays.

**12. RECYCLING SERVICES.** The following shall apply to fiber and non-fiber recyclables ("Recyclable Materials") and recycling services. All Recyclable Materials must be clean, dry, unshredded, empty, loose and unbagged. (i) Single stream Recyclable Materials ("Single Stream") will consist of Customer's entire volume of uncoated office and writing paper, magazines, pamphlets, mail, newspaper; flattened, uncoated cardboard, paperboard boxes; aluminum food and beverage containers, tin or steel cans; glass, and rigid container plastics #1, #2 and #5, including narrow neck containers and tubs. Any material not specifically set forth above, including but not limited to foam, film plastics, plastic bags, napkins, tissue, paper towels, or paper that has been in contact with food, is unacceptable. Glass may not be accepted at all locations. Customer shall provide source-separated wastepaper, cardboard, plastics and metals in accordance with the most current ISRI Scrap Specifications Circular and any amendments thereto or replacements thereof. All other Recyclable Materials will be delivered in accordance with industry standards or such specifications communicated to Customer by Company from time-to-time. Company reserves the right, upon notice to Customer, to discontinue acceptance of any category of Recyclable Materials set forth above as a result of market conditions related to such materials and makes no representations as to the recyclability of the materials. (ii) Notwithstanding anything to the contrary contained herein, Recyclable Materials may not contain Special Waste, Excluded Materials or other materials that are deleterious or capable of causing material damage to any part of Company's property, its personnel or the public or materially impair the strength or the durability of Company's structures or equipment. (iii) Company may reject in whole or in part, or may process, in its sole discretion, Recyclable Materials not meeting the specifications. Customer shall pay Company for all increased costs, losses and expenses incurred with respect to such non-conforming Recyclable Materials which charges may include an amount for Company's operating or profit margin (collectively the "Cost"). Without limiting the foregoing, Customer shall pay a contamination charge for additional handling, processing, transporting and/or disposing of such non-conforming Recyclable Materials, Special Waste, Excluded Materials, and/or all of part of non-conforming loads and additional charges may be assessed for bulky items such as appliances, concrete, furniture, mattresses, tires, electronics, pallets, yard waste, propane tanks, etc. Collected Recyclable Materials for which no commercially reasonable market exists may be landfilled at Customer's Cost. (iv) Recycling Services are subject to a Recyclable Material Offset (RMO) charge to the extent that (a) Company's processing cost per ton, including costs of disposal for contamination, plus profit margin, exceeds (b) an amount equal to recyclables value per ton minus an amount for profit margin. The RMO charge, including profit margin, processing and disposal costs and recyclable value shall be determined by Company from time-to-time, in its sole discretion, based on applicable operating data and market information. If recyclables value exceeds processing costs, plus profit margin, a RMO credit may apply, at Company's sole discretion. (v) Where Company has agreed in writing to provide a market-based rebate to Customer, the following shall apply. Customer acknowledges that the market value for Recyclable Materials will fluctuate based upon various factors, and such materials may at times have no value or that the value may be negative. Company will establish the value of Recyclable Materials each month based upon such various factors, including but not limited to quantity, quality and location. For recycling services, Company shall pay or charge Customer on or about the last day of each month for Recyclable Materials accepted during the preceding month after deduction of any charges owed to Company by Customer. Any invoice shall be payable upon receipt. Where recycling processing services are provided, Charges may include separate

fuel and environmental surcharges for recycling services as set forth at [www.wm.com](http://www.wm.com). (vi) Notwithstanding anything to the contrary set forth above, the liquidated damages set forth in Section 7 of this Agreement shall not apply to any Customer breach of the Agreement pertaining to Services for Recyclable Materials which have been determined by the Company to have a positive value. If a breach occurs under such circumstances, the damages shall be determined by calculating actual damages rather than such liquidated damages. (vii) Service arrangements will be agreed upon between Customer and Company for the service location(s) set forth in this Agreement. For trailer load quantities, Customer shall load trailers to full visible capacity to achieve 40,000 pounds minimum shipping weight and trailers shall be loaded or caused to be loaded in accordance with the most current ISRI/AF&PA Shipping Guide. Freight and/or adjustments may apply to light loads. For baled wastepaper picked up by bale route service, the minimum quantity for pickup is six (6) bales and for purposes of payment, weights shall be estimated weights.

Section 4, IK)

In Process

**Certificate Of Completion**

Envelope Id: 578DCB28-DA35-4565-9D7C-59D718B99DD1

Status: Sent

Subject: Document for your Electronic Signature from Waste Management

Source Envelope:

Document Pages: 4

Signatures: 0

Envelope Originator:

Certificate Pages: 1

Initials: 0

Megan Fields

AutoNav: Enabled

P.O. Box 4745

Envelopeld Stamping: Enabled

Portland , OR 97208-4745

Time Zone: (UTC-08:00) Pacific Time (US &amp; Canada)

mfields3@wm.com

IP Address: 13.110.242.8

**Record Tracking**

Status: Original

Holder: Megan Fields

Location: DocuSign

1/7/2026 6:57:27 AM

mfields3@wm.com

**Signer Events****Signature****Timestamp**

Chris Buckner

Sent: 1/7/2026 6:57:29 AM

chris.buckner@gluckstadt.net

Viewed: 1/7/2026 7:18:50 AM

Security Level: Email, Account Authentication  
(None)**Electronic Record and Signature Disclosure:**

Not Offered via DocuSign

Megan Fields

mfields3@wm.com

Security Level: Email, Account Authentication  
(None)**Electronic Record and Signature Disclosure:**

Not Offered via DocuSign

**In Process****In Person Signer Events****Signature****Timestamp****Editor Delivery Events****Status****Timestamp****Agent Delivery Events****Status****Timestamp****Intermediary Delivery Events****Status****Timestamp****Certified Delivery Events****Status****Timestamp****Carbon Copy Events****Status****Timestamp****Witness Events****Signature****Timestamp****Notary Events****Signature****Timestamp****Envelope Summary Events****Status****Timestamps**

Envelope Sent

Hashed/Encrypted

1/7/2026 6:57:29 AM

**Payment Events****Status****Timestamps**





## CITY OF GLUCKSTADT

MISSISSIPPI

PUBLIC WORKS DEPARTMENT

### MEMORANDUM

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**TO:** Mayor & Board of Alderman

**FROM:** Chris Buckner, Public Works Director

**DATE:** 1/12/2026

**SUBJECT:** Request for Approval to Issue Purchase Orders in Accordance with Term Bid Pricing and FY26 Adopted Budget, for Road Improvements (Interlocal Agreement with Madison County)

---

Public Works requests approval to issue purchase orders in accordance with our term bid pricing and the FY26 adopted budget for road improvements under the Interlocal Agreement with Madison County. The first roads we will be paving will be Stout Road (\$294,391), Gluckstadt Rd (\$42,347.25), and Lone Wolf Dr (\$62,874). See quotes attached. All other roads in the agreement will be requested at the February Board of Alderman Meeting after a budget amendment is approved.

Please let me know if you have any questions.



P. O. BOX 54246, JACKSON, MS 39288-4246

PLANT: 1353 FLOWOOD DRIVE, JACKSON, MS 39232

PHONE: 601-939-4493 FAX: 601-939-4676

## PROPOSAL &amp; CONTRACT

TO: City of Gluckstadt

DATE: October 15, 2025

PROJECT: Old Gluckstadt Road

ABC driveway to bridge

[c.buckner@gluckstadt.net](mailto:c.buckner@gluckstadt.net)

THIS QUOTATION IS SUBJECT TO CONDITIONS NOTED ON SECOND PAGE

ITEM	DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	AMOUNT
1	1.5" asphalt overlay	347	Tons	104.75	\$36,348.25
2	Mill Keyways	1	L/S	5,999.00	\$5,999.00

**Total Estimate      \$42,347.25**

These Quantities are estimates only. Owner will be responsible for Actual Quantities placed in the field  
 Work cannot begin until our Quote & our Terms and Agreement is signed and sent back  
 This quote expires in 30 Days if not signed before then

**Price Includes:**

1. 1 Mobilization. Additional Mobilizations will be \$1500 per mobilization.
2. In-house testing of hot mix asphalt
3. Tack coat between lifts of asphalt

**Price Does Not Include:**

2. Engineering Services (grade stakes, string line stakes, alignment points, etc ...)
6. Striping

**Quote is good until December 15, 2025**

We hereby accept the above quote and agree to its terms and conditions on this the

\_\_\_\_\_ day of \_\_\_\_\_, 2025

**City of Gluckstadt****ADCAMP, INC.**

BY: \_\_\_\_\_

BY: \_\_\_\_\_

TITLE: \_\_\_\_\_

TITLE: \_\_\_\_\_



P. O. BOX 54246, JACKSON, MS 39288-4246

PLANT: 1353 FLOWOOD DRIVE, JACKSON, MS 39232

PHONE: 601-939-4493 FAX: 601-939-4676

## PROPOSAL &amp; CONTRACT

TO: City of Gluckstadt

DATE: October 15, 2025

PROJECT: Lonewolf Drive

[c.buckner@gluckstadt.net](mailto:c.buckner@gluckstadt.net)

THIS QUOTATION IS SUBJECT TO CONDITIONS NOTED ON SECOND PAGE

ITEM	DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	AMOUNT
1	3" asphalt overlay	500	Tons	104.75	\$52,375.00
2	Mill Keyways	1	L/S	5,999.00	\$5,999.00
3	Base Repair	20	Tons	225	\$4,500.00

**Total Estimate      \$62,874.00**

These Quantities are estimates only. Owner will be responsible for Actual Quantities placed in the field  
 Work cannot begin until our Quote & our Terms and Agreement is signed and sent back  
 This quote expires in 30 Days if not signed before then

**Price Includes:**

1. 1 Mobilization. Additional Mobilizations will be \$1500 per mobilization.
2. In-house testing of hot mix asphalt
3. Tack coat between lifts of asphalt

**Price Does Not Include:**

2. Engineering Services (grade stakes, string line stakes, alignment points, etc ...)
6. Striping

**Quote is good until December 15, 2025**

We hereby accept the above quote and agree to its terms and conditions on this the

\_\_\_\_\_ day of \_\_\_\_\_, 2025

**City of Gluckstadt****ADCAMP, INC.**

BY: \_\_\_\_\_

BY: \_\_\_\_\_

TITLE: \_\_\_\_\_

TITLE: \_\_\_\_\_



**P. O. BOX 54246, JACKSON, MS 39288-4246**  
**PLANT: 1353 FLOWOOD DRIVE, JACKSON, MS 39232**  
**PHONE: 601-939-4493 FAX: 601-939-4676**

**PROPOSAL & CONTRACT**

TO: City of Gluckstadt

DATE: October 22, 2025

PROJECT: Stout Rd. East of Calhoun pkwy.

[cbuckner@gluckstadt.net](mailto:cbuckner@gluckstadt.net)

THIS QUOTATION IS SUBJECT TO CONDITIONS NOTED ON SECOND PAGE

ITEM	DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	AMOUNT
1	2" asphalt overlay	515	Tons	104.75	\$53,946.25

**Total Estimate      \$53,946.25**

These Quantities are estimates only. Owner will be responsible for Actual Quantities placed in the field  
 Work cannot begin until our Quote & our Terms and Agreement is signed and sent back  
 This quote expires in 30 Days if not signed before then

**Price Includes:**

1. 1 Mobilization. Additional Mobilizations will be \$1500 per mobilization.
2. In-house testing of hot mix asphalt
3. Tack coat between lifts of asphalt

**Price Does Not Include:**

2. Engineering Services (grade stakes, string line stakes, alignment points, etc ...)
6. Striping

**Quote is good until December 15, 2025**

We hereby accept the above quote and agree to its terms and conditions on this the

\_\_\_\_\_ day of \_\_\_\_\_, 2025

**City of Gluckstadt**

**ADCAMP, INC.**

BY: \_\_\_\_\_

BY: \_\_\_\_\_

TITLE: \_\_\_\_\_

TITLE: \_\_\_\_\_



**P. O. BOX 54246, JACKSON, MS 39288-4246**  
**PLANT: 1353 FLOWOOD DRIVE, JACKSON, MS 39232**  
**PHONE: 601-939-4493 FAX: 601-939-4676**

**PROPOSAL & CONTRACT**

TO: City of Gluckstadt

DATE: October 22, 2025

PROJECT: Stout Rd. from Calhoun to Lakeshore pkwy

[cbuckner@gluckstadt.net](mailto:cbuckner@gluckstadt.net)

THIS QUOTATION IS SUBJECT TO CONDITIONS NOTED ON SECOND PAGE

ITEM	DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	AMOUNT
1	2" asphalt overlay	900	Tons	104.75	\$94,275.00

**Total Estimate      \$94,275.00**

These Quantities are estimates only. Owner will be responsible for Actual Quantities placed in the field  
 Work cannot begin until our Quote & our Terms and Agreement is signed and sent back  
 This quote expires in 30 Days if not signed before then

**Price Includes:**

1. 1 Mobilization. Additional Mobilizations will be \$1500 per mobilization.
2. In-house testing of hot mix asphalt
3. Tack coat between lifts of asphalt

**Price Does Not Include:**

2. Engineering Services (grade stakes, string line stakes, alignment points, etc ...)
6. Striping

**Quote is good until December 15, 2025**

We hereby accept the above quote and agree to its terms and conditions on this the

\_\_\_\_\_ day of \_\_\_\_\_, 2025

**City of Gluckstadt**

**ADCAMP, INC.**

BY: \_\_\_\_\_

BY: \_\_\_\_\_

TITLE: \_\_\_\_\_

TITLE: \_\_\_\_\_



**P. O. BOX 54246, JACKSON, MS 39288-4246**  
**PLANT: 1353 FLOWOOD DRIVE, JACKSON, MS 39232**  
**PHONE: 601-939-4493 FAX: 601-939-4676**

**PROPOSAL & CONTRACT**

TO: City of Gluckstadt

DATE: October 22, 2025

PROJECT: Stout Rd. from Lakeshire to west city limits

[cbuckner@gluckstadt.net](mailto:cbuckner@gluckstadt.net)

THIS QUOTATION IS SUBJECT TO CONDITIONS NOTED ON SECOND PAGE

ITEM	DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	AMOUNT
1	2" asphalt overlay	1041	Tons	104.75	\$109,044.75

**Total Estimate      \$109,044.75**

These Quantities are estimates only. Owner will be responsible for Actual Quantities placed in the field  
 Work cannot begin until our Quote & our Terms and Agreement is signed and sent back  
 This quote expires in 30 Days if not signed before then

**Price Includes:**

1. 1 Mobilization. Additional Mobilizations will be \$1500 per mobilization.
2. In-house testing of hot mix asphalt
3. Tack coat between lifts of asphalt

**Price Does Not Include:**

2. Engineering Services (grade stakes, string line stakes, alignment points, etc ...)
6. Striping

**Quote is good until December 15, 2025**

We hereby accept the above quote and agree to its terms and conditions on this the

\_\_\_\_\_ day of \_\_\_\_\_, 2025

**City of Gluckstadt**

**ADCAMP, INC.**

BY: \_\_\_\_\_

BY: \_\_\_\_\_

TITLE: \_\_\_\_\_

TITLE: \_\_\_\_\_



**P. O. BOX 54246, JACKSON, MS 39288-4246**  
**PLANT: 1353 FLOWOOD DRIVE, JACKSON, MS 39232**  
**PHONE: 601-939-4493 FAX: 601-939-4676**

**PROPOSAL & CONTRACT**

TO: City of Gluckstadt \_\_\_\_\_ DATE: October 22, 2025 \_\_\_\_\_  
 \_\_\_\_\_ PROJECT: Stout Road \_\_\_\_\_  
 \_\_\_\_\_  
[chris.buckner@gluckstadt.net](mailto:chris.buckner@gluckstadt.net) \_\_\_\_\_

THIS QUOTATION IS SUBJECT TO CONDITIONS NOTED ON SECOND PAGE

ITEM	DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	AMOUNT
1	Base Repair	165	Tons	225.00	\$37,125.00

**Total Estimate      \$37,125.00**

These Quantities are estimates only. Owner will be responsible for Actual Quantities placed in the field  
 Work cannot begin until our Quote & our Terms and Agreement is signed and sent back  
 This quote expires in 30 Days if not signed before then

**Price Includes:**

1. 1 Mobilization. Additional Mobilizations will be \$1500 per mobilization.
2. In-house testing of hot mix asphalt
3. Tack coat between lifts of asphalt

**Price Does Not Include:**

2. Engineering Services (grade stakes, string line stakes, alignment points, etc ...)
6. Striping

**Quote is good until December 15, 2025**

We hereby accept the above quote and agree to its terms and conditions on this the

\_\_\_\_\_ day of \_\_\_\_\_, 2025

**City of Gluckstadt**

**ADCAMP, INC.**

BY: \_\_\_\_\_

BY: \_\_\_\_\_

TITLE: \_\_\_\_\_

TITLE: \_\_\_\_\_



Gluckstadt, MS

# My Budget Report

## Group Summary

Section 5, 1A)

For Fiscal: FY26 Period Ending: 01/31/2026

Sub...	Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
<b>Fund: 001 - GENERAL FUND</b>							
<b>Revenue</b>							
<b>Department: 000 - NON DEPARTMENT</b>							
	7,393,856.10	7,393,856.10	-22,006.95	1,433,614.82	0.00	-5,960,241.28	80.61%
<b>Department: 000 - NON DEPARTMENT Total:</b>	<b>7,393,856.10</b>	<b>7,393,856.10</b>	<b>-22,006.95</b>	<b>1,433,614.82</b>	<b>0.00</b>	<b>-5,960,241.28</b>	<b>80.61%</b>
<b>Revenue Total:</b>	<b>7,393,856.10</b>	<b>7,393,856.10</b>	<b>-22,006.95</b>	<b>1,433,614.82</b>	<b>0.00</b>	<b>-5,960,241.28</b>	<b>80.61%</b>
<b>Expense</b>							
<b>Department: 100 - LEGISLATIVE - BOARD</b>							
004 - PERSONNEL SERVICES	35,545.00	35,545.00	1,253.70	8,775.90	0.00	26,769.10	75.31%
005 - SUPPLIES	500.00	500.00	0.00	0.00	0.00	500.00	100.00%
006 - CONTRACTUAL SERVICES	13,750.00	13,750.00	637.92	1,267.05	0.00	12,482.95	90.79%
<b>Department: 100 - LEGISLATIVE - BOARD Total:</b>	<b>49,795.00</b>	<b>49,795.00</b>	<b>1,891.62</b>	<b>10,042.95</b>	<b>0.00</b>	<b>39,752.05</b>	<b>79.83%</b>
<b>Department: 110 - JUDICIAL/MUNICIPAL COURT</b>							
004 - PERSONNEL SERVICES	204,748.16	204,748.16	7,868.34	54,628.83	0.00	150,119.33	73.32%
005 - SUPPLIES	8,000.00	8,000.00	0.00	230.35	1,225.43	6,544.22	81.80%
006 - CONTRACTUAL SERVICES	85,900.00	85,900.00	3,960.75	14,606.17	0.00	71,293.83	83.00%
009 - CAPITAL OUTLAY	3,500.00	3,500.00	0.00	0.00	0.00	3,500.00	100.00%
<b>Department: 110 - JUDICIAL/MUNICIPAL COURT Total:</b>	<b>302,148.16</b>	<b>302,148.16</b>	<b>11,829.09</b>	<b>69,465.35</b>	<b>1,225.43</b>	<b>231,457.38</b>	<b>76.60%</b>
<b>Department: 120 - EXECUTIVE - MAYOR</b>							
004 - PERSONNEL SERVICES	0.00	27,500.00	0.00	0.00	0.00	27,500.00	100.00%
005 - SUPPLIES	500.00	500.00	0.00	0.00	0.00	500.00	100.00%
006 - CONTRACTUAL SERVICES	9,400.00	9,400.00	416.00	638.50	0.00	8,761.50	93.21%
<b>Department: 120 - EXECUTIVE - MAYOR Total:</b>	<b>9,900.00</b>	<b>37,400.00</b>	<b>416.00</b>	<b>638.50</b>	<b>0.00</b>	<b>36,761.50</b>	<b>98.29%</b>
<b>Department: 130 - ELECTIONS</b>							
006 - CONTRACTUAL SERVICES	10,000.00	10,000.00	0.00	0.00	0.00	10,000.00	100.00%
<b>Department: 130 - ELECTIONS Total:</b>	<b>10,000.00</b>	<b>10,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>10,000.00</b>	<b>100.00%</b>
<b>Department: 140 - ADMINISTRATION - FINANCIAL</b>							
004 - PERSONNEL SERVICES	377,955.01	377,955.01	14,498.08	100,761.00	0.00	277,194.01	73.34%
005 - SUPPLIES	4,000.00	4,000.00	572.84	1,066.61	0.00	2,933.39	73.33%
006 - CONTRACTUAL SERVICES	58,020.00	58,020.00	647.28	2,013.94	0.00	56,006.06	96.53%
009 - CAPITAL OUTLAY	0.00	2,670.00	0.00	2,667.66	0.00	2.34	0.09%
<b>Department: 140 - ADMINISTRATION - FINANCIAL Total:</b>	<b>439,975.01</b>	<b>442,645.01</b>	<b>15,718.20</b>	<b>106,509.21</b>	<b>0.00</b>	<b>336,135.80</b>	<b>75.94%</b>



# My Budget Report

For Fiscal: FY26 Period Endin

Section 5, 1A)

Sub...	Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
<b>Department: 190 - PLANNING &amp; ZONING</b>							
004 - PERSONNEL SERVICES	100,766.16	100,766.16	1,757.49	12,223.57	0.00	88,542.59	87.87%
005 - SUPPLIES	1,900.00	1,900.00	0.00	139.96	0.00	1,760.04	92.63%
006 - CONTRACTUAL SERVICES	78,030.00	78,030.00	2,516.36	7,528.77	0.00	70,501.23	90.35%
009 - CAPITAL OUTLAY	1,250.00	1,250.00	0.00	0.00	0.00	1,250.00	100.00%
<b>Department: 190 - PLANNING &amp; ZONING Total:</b>	<b>181,946.16</b>	<b>181,946.16</b>	<b>4,273.85</b>	<b>19,892.30</b>	<b>0.00</b>	<b>162,053.86</b>	<b>89.07%</b>
<b>Department: 195 - ADMINISTRATION - GENERAL</b>							
004 - PERSONNEL SERVICES	74,027.62	74,027.62	0.00	0.00	0.00	74,027.62	100.00%
006 - CONTRACTUAL SERVICES	993,450.00	945,450.00	82,049.07	247,045.09	0.00	698,404.91	73.87%
009 - CAPITAL OUTLAY	1,500.00	1,500.00	0.00	0.00	125.00	1,375.00	91.67%
<b>Department: 195 - ADMINISTRATION - GENERAL Total:</b>	<b>1,068,977.62</b>	<b>1,020,977.62</b>	<b>82,049.07</b>	<b>247,045.09</b>	<b>125.00</b>	<b>773,807.53</b>	<b>75.79%</b>
<b>Department: 200 - POLICE</b>							
004 - PERSONNEL SERVICES	1,775,480.29	1,810,480.29	71,680.19	491,281.60	0.00	1,319,198.69	72.86%
005 - SUPPLIES	158,200.00	158,200.00	11,267.04	32,145.75	13,896.04	112,158.21	70.90%
006 - CONTRACTUAL SERVICES	313,830.00	313,830.00	18,189.78	38,404.57	2,210.00	273,215.43	87.06%
009 - CAPITAL OUTLAY	388,468.42	604,133.17	1,483.93	111,132.21	395,347.78	97,653.18	16.16%
<b>Department: 200 - POLICE Total:</b>	<b>2,635,978.71</b>	<b>2,886,643.46</b>	<b>102,620.94</b>	<b>672,964.13</b>	<b>411,453.82</b>	<b>1,802,225.51</b>	<b>62.43%</b>
<b>Department: 260 - FIRE</b>							
006 - CONTRACTUAL SERVICES	60,000.00	60,000.00	60,000.00	60,000.00	0.00	0.00	0.00%
<b>Department: 260 - FIRE Total:</b>	<b>60,000.00</b>	<b>60,000.00</b>	<b>60,000.00</b>	<b>60,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00%</b>
<b>Department: 280 - BUILDING INSPECTION &amp; CODE</b>							
004 - PERSONNEL SERVICES	177,847.97	177,847.97	4,464.28	22,404.49	0.00	155,443.48	87.40%
005 - SUPPLIES	6,300.00	6,300.00	54.88	738.84	0.00	5,561.16	88.27%
006 - CONTRACTUAL SERVICES	12,000.00	12,000.00	739.94	1,921.32	0.00	10,078.68	83.99%
009 - CAPITAL OUTLAY	1,250.00	1,250.00	0.00	0.00	0.00	1,250.00	100.00%
<b>Department: 280 - BUILDING INSPECTION &amp; CODE Total:</b>	<b>197,397.97</b>	<b>197,397.97</b>	<b>5,259.10</b>	<b>25,064.65</b>	<b>0.00</b>	<b>172,333.32</b>	<b>87.30%</b>
<b>Department: 301 - STREETS</b>							
004 - PERSONNEL SERVICES	628,310.79	628,310.79	22,831.17	172,358.17	0.00	455,952.62	72.57%
005 - SUPPLIES	163,700.00	163,700.00	9,459.14	30,944.96	3,599.89	129,155.15	78.90%
006 - CONTRACTUAL SERVICES	361,850.00	361,850.00	15,093.61	46,774.23	3,246.00	311,829.77	86.18%
009 - CAPITAL OUTLAY	503,500.00	503,500.00	28,146.12	30,381.01	17,120.70	455,998.29	90.57%
<b>Department: 301 - STREETS Total:</b>	<b>1,657,360.79</b>	<b>1,657,360.79</b>	<b>75,530.04</b>	<b>280,458.37</b>	<b>23,966.59</b>	<b>1,352,935.83</b>	<b>81.63%</b>
<b>Department: 900 - TRANSFERS</b>							
009 - CAPITAL OUTLAY	804,381.81	804,381.81	0.00	317,891.19	0.00	486,490.62	60.48%
<b>Department: 900 - TRANSFERS Total:</b>	<b>804,381.81</b>	<b>804,381.81</b>	<b>0.00</b>	<b>317,891.19</b>	<b>0.00</b>	<b>486,490.62</b>	<b>60.48%</b>
<b>Expense Total:</b>	<b>7,417,861.23</b>	<b>7,650,695.98</b>	<b>359,587.91</b>	<b>1,809,971.74</b>	<b>436,770.84</b>	<b>5,403,953.40</b>	<b>70.63%</b>
<b>Fund: 001 - GENERAL FUND Surplus (Deficit):</b>	<b>-24,005.13</b>	<b>-256,839.88</b>	<b>-381,594.86</b>	<b>-376,356.92</b>	<b>-436,770.84</b>	<b>-556,287.88</b>	<b>-216.59%</b>
<b>Report Surplus (Deficit):</b>	<b>-24,005.13</b>	<b>-256,839.88</b>	<b>-381,594.86</b>	<b>-376,356.92</b>	<b>-436,770.84</b>	<b>-556,287.88</b>	<b>-216.59%</b>

Fund Summary

Fund	Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)
001 - GENERAL FUND	-24,005.13	-256,839.88	-381,594.86	-376,356.92	-436,770.84	-556,287.88
Report Surplus (Deficit):	-24,005.13	-256,839.88	-381,594.86	-376,356.92	-436,770.84	-556,287.88



Gluckstadt, MS

# My Budget Report

## Group Summary

Section 5, IA)

For Fiscal: FY26 Period Ending: 01/31/2026

Sub...	Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
<b>Fund: 300 - STREET IMPROVEMENT CAP FUND (CALHOUN STATION), FED</b>							
<b>Expense</b>							
<b>Department: 301 - STREETS</b>							
006 - CONTRACTUAL SERVICES	82,702.44	82,702.44	1,673.27	9,174.94	0.00	73,527.50	88.91%
009 - CAPITAL OUTLAY	620,000.00	620,000.00	77,640.00	105,015.92	0.00	514,984.08	83.06%
<b>Department: 301 - STREETS Total:</b>	<b>702,702.44</b>	<b>702,702.44</b>	<b>79,313.27</b>	<b>114,190.86</b>	<b>0.00</b>	<b>588,511.58</b>	<b>83.75%</b>
<b>Department: 900 - TRANSFERS</b>							
009 - CAPITAL OUTLAY	328,850.00	328,850.00	0.00	0.00	0.00	328,850.00	100.00%
<b>Department: 900 - TRANSFERS Total:</b>	<b>328,850.00</b>	<b>328,850.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>328,850.00</b>	<b>100.00%</b>
<b>Expense Total:</b>	<b>1,031,552.44</b>	<b>1,031,552.44</b>	<b>79,313.27</b>	<b>114,190.86</b>	<b>0.00</b>	<b>917,361.58</b>	<b>88.93%</b>
<b>Fund: 300 - STREET IMPROVEMENT CAP FUND (CALHOUN STATION), FED Total:</b>	<b>1,031,552.44</b>	<b>1,031,552.44</b>	<b>79,313.27</b>	<b>114,190.86</b>	<b>0.00</b>	<b>917,361.58</b>	<b>88.93%</b>
<b>Report Total:</b>	<b>1,031,552.44</b>	<b>1,031,552.44</b>	<b>79,313.27</b>	<b>114,190.86</b>	<b>0.00</b>	<b>917,361.58</b>	<b>88.93%</b>

Fund Summary

Fund	Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
300 - STREET IMPROVEMENT CAF	1,031,552.44	1,031,552.44	79,313.27	114,190.86	0.00	917,361.58	88.93%
Report Total:	1,031,552.44	1,031,552.44	79,313.27	114,190.86	0.00	917,361.58	88.93%



Gluckstadt, MS

# My Budget Report

## Group Summary

Section 5, 1A)

For Fiscal: FY26 Period Ending: 01/31/2026

Sub...	Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
<b>Fund: 301 - STREET IMPROVEMENT CAP. PROJ. (GLUCKSTADT), STATE</b>							
<b>Revenue</b>							
<b>Department: 000 - NON DEPARTMENT</b>							
	164,381.81	164,381.81	0.00	164,381.81	0.00	0.00	0.00%
<b>Department: 000 - NON DEPARTMENT Total:</b>	<b>164,381.81</b>	<b>164,381.81</b>	<b>0.00</b>	<b>164,381.81</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00%</b>
<b>Revenue Total:</b>	<b>164,381.81</b>	<b>164,381.81</b>	<b>0.00</b>	<b>164,381.81</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00%</b>
<b>Fund: 301 - STREET IMPROVEMENT CAP. PROJ. (GLUCKSTADT), STATE Total:</b>	<b>164,381.81</b>	<b>164,381.81</b>	<b>0.00</b>	<b>164,381.81</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00%</b>
<b>Report Total:</b>	<b>164,381.81</b>	<b>164,381.81</b>	<b>0.00</b>	<b>164,381.81</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00%</b>

Fund Summary

Fund	Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
301 - STREET IMPROVEMENT CAF	164,381.81	164,381.81	0.00	164,381.81	0.00	0.00	0.00%
Report Total:	164,381.81	164,381.81	0.00	164,381.81	0.00	0.00	0.00%



Gluckstadt, MS

# My Budget Report

## Group Summary

Section 5, 1A)

For Fiscal: FY26 Period Ending: 01/31/2026

Sub...	Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)	Percent Remaining
<b>Fund: 200 - PD BUILDING DEBT SERVICE FUND</b>							
Revenue							
Department: 000 - NON DEPARTMENT							
	640,000.00	640,000.00	0.00	153,509.38	0.00	-486,490.62	76.01%
Department: 000 - NON DEPARTMENT Total:	640,000.00	640,000.00	0.00	153,509.38	0.00	-486,490.62	76.01%
Revenue Total:	640,000.00	640,000.00	0.00	153,509.38	0.00	-486,490.62	76.01%
Expense							
Department: 200 - POLICE							
006 - CONTRACTUAL SERVICES	1,000.00	1,000.00	0.00	0.00	0.00	1,000.00	100.00%
008 - DEBT SERVICE	639,000.00	639,000.00	0.00	153,509.38	0.00	485,490.62	75.98%
Department: 200 - POLICE Total:	640,000.00	640,000.00	0.00	153,509.38	0.00	486,490.62	76.01%
Expense Total:	640,000.00	640,000.00	0.00	153,509.38	0.00	486,490.62	76.01%
Fund: 200 - PD BUILDING DEBT SERVICE FUND Surplus (Deficit):	0.00	0.00	0.00	0.00	0.00	0.00	0.00%
Report Surplus (Deficit):	0.00	0.00	0.00	0.00	0.00	0.00	0.00%

Fund Summary

Fund	Original Total Budget	Current Total Budget	Period Activity	Fiscal Activity	Encumbrances	Variance Favorable (Unfavorable)
200 - PD BUILDING DEBT SERVICE	0.00	0.00	0.00	0.00	0.00	0.00
Report Surplus (Deficit):	0.00	0.00	0.00	0.00	0.00	0.00





Gluckstadt, MS

GLUCKSTADT ROAD WIDENING PROJECT

Period 12/1/2025 - 12/31/2025

Packet: BRPKT00265

Bank Statement		General Ledger	
Beginning Balance	750,000.00	Account Balance	750,000.00
Plus Debits	0.00	Less Outstanding Debits	0.00
Less Credits	0.00	Plus Outstanding Credits	0.00
Adjustments	0.00	Adjustments	0.00
Ending Balance	750,000.00	Adjusted Account Balance	750,000.00
Statement Ending Balance		750,000.00	
Bank Difference		0.00	
General Ledger Difference		0.00	

CASH BALANCE CONSISTS OF THE FOLLOWING GENERAL LEDGER ACCOUNTS

301-000-10100 CASH



Gluckstadt, MS

Section 5, IB)

# Bank Statement Register

## POLICE STATION DEBT SERVICE FUND

Period 12/1/2025 - 12/31/2025

Packet: BRPKT00267

Bank Statement		General Ledger	
Beginning Balance	100.24	Account Balance	100.24
Plus Debits	0.00	Less Outstanding Debits	0.00
Less Credits	0.00	Plus Outstanding Credits	0.00
Adjustments	0.00	Adjustments	0.00
Ending Balance	100.24	Adjusted Account Balance	100.24
Statement Ending Balance		100.24	
Bank Difference		0.00	
General Ledger Difference		0.00	

CASH BALANCE CONSISTS OF THE FOLLOWING GENERAL LEDGER ACCOUNTS

200-000-10100 CASH



Gluckstadt, MS

CALHOUN STATION PKWY OVERLAY PROJECT

Period 12/1/2025 - 12/31/2025

Packet: BRPKT00266

Bank Statement		General Ledger	
Beginning Balance	1,026,536.70	Account Balance	996,574.85
Plus Debits	0.00	Less Outstanding Debits	0.00
Less Credits	29,961.85	Plus Outstanding Credits	0.00
Adjustments	0.00	Adjustments	0.00
Ending Balance	996,574.85	Adjusted Account Balance	996,574.85
Statement Ending Balance		996,574.85	
Bank Difference		0.00	
General Ledger Difference		0.00	

CASH BALANCE CONSISTS OF THE FOLLOWING GENERAL LEDGER ACCOUNTS

300-000-10100 CASH

Cleared Checks				
Item Date	Reference	Item Type	Description	Amount
12/10/2025	<a href="#">12</a>	Check	Dickerson & Bowen, Inc.	-27,375.92
12/10/2025	<a href="#">13</a>	Check	Stantec Consulting Services Inc (SCSI)	-2,585.93
			Total Cleared Checks (2)	-29,961.85



Gluckstadt, MS

Section 5, IB)

# Bank Statement Register

## Transaction Summary

Transaction Type	Count	Outstanding	Cleared	Total
Check	2	0.00	-29,961.85	-29,961.85
		0.00	-29,961.85	-29,961.85



Gluckstadt, MS

# Bank Statement Register

Section 5, IB)

## COURT BOND ACCOUNT (HOLDING)

Period 12/1/2025 - 12/31/2025

Packet: BRPKT00264

### Bank Statement

### General Ledger

Beginning Balance	41,466.50	Account Balance	43,795.25
Plus Debits	8,950.00	Less Outstanding Debits	0.00
Less Credits	3,863.75	Plus Outstanding Credits	2,757.50
Adjustments	0.00	Adjustments	0.00
Ending Balance	46,552.75	Adjusted Account Balance	46,552.75

Statement Ending Balance	46,552.75
Bank Difference	0.00
General Ledger Difference	0.00

### CASH BALANCE CONSISTS OF THE FOLLOWING GENERAL LEDGER ACCOUNTS

003-000-10100

CASH

### Cleared Deposits

Item Date	Reference	Item Type	Description	Amount
12/01/2025	<a href="#">DEP0004268</a>	Deposit	CLPKT01243 BG:Cash	2,000.00
12/02/2025	<a href="#">DEP0004272</a>	Deposit	CLPKT01245 BG:Cash	2,500.00
12/16/2025	<a href="#">DEP0004321</a>	Deposit	CLPKT01258 BG:Cash	2,750.00
12/17/2025	<a href="#">DEP0004328</a>	Deposit	CLPKT01260 BG:Cash	700.00
12/23/2025	<a href="#">DEP0004349</a>	Deposit	CLPKT01267 BG:Cash	1,000.00
Total Cleared Deposits (5)				8,950.00

### Cleared Checks

Item Date	Reference	Item Type	Description	Amount
11/24/2025	<a href="#">50</a>	Check	Kimberly Boren	-528.75
12/29/2025	<a href="#">53</a>	Check	City of Gluckstadt	-3,335.00
Total Cleared Checks (2)				-3,863.75

### Outstanding Checks

Item Date	Reference	Item Type	Description	Amount
08/29/2025	<a href="#">41</a>	Check	Quanzavious Vaughn	-28.75
10/15/2025	<a href="#">45</a>	Check	Melissa Pace	-250.00
12/29/2025	<a href="#">52</a>	Check	Arnoifo Ortiz	-1,950.00
12/29/2025	<a href="#">54</a>	Check	Vickie Cole	-528.75
Total Outstanding Checks (4)				-2,757.50



Gluckstadt, MS

Section 5, IB)

# Bank Statement Register

## Transaction Summary

Transaction Type	Count	Outstanding	Cleared	Total
Check	6	-2,757.50	-3,863.75	-6,621.25
Deposit	5	0.00	8,950.00	8,950.00
		-2,757.50	5,086.25	2,328.75



Gluckstadt, MS

ICE STATION SEARCH AND SEIZURE ACCOUNT

Period 12/1/2025 - 12/31/2025

Packet: BRPKT00269

Bank Statement		General Ledger	
Beginning Balance	1,690.00	Account Balance	1,690.00
Plus Debits	0.00	Less Outstanding Debits	0.00
Less Credits	0.00	Plus Outstanding Credits	0.00
Adjustments	0.00	Adjustments	0.00
Ending Balance	1,690.00	Adjusted Account Balance	1,690.00
Statement Ending Balance		1,690.00	
Bank Difference		0.00	
General Ledger Difference		0.00	

CASH BALANCE CONSISTS OF THE FOLLOWING GENERAL LEDGER ACCOUNTS

100-000-10100 CASH



Gluckstadt, MS

**Bank Statement Register**

Section 5, IB)

**GENERAL LEDGER, PUBLIC FUNDS**

Period 12/1/2025 - 12/31/2025

Packet: BRPKT00263

**Bank Statement**

Beginning Balance	4,028,400.60
Plus Debits	420,962.32
Less Credits	429,660.48
Adjustments	0.00
Ending Balance	4,019,702.44

**General Ledger**

Account Balance	4,007,177.28
Less Outstanding Debits	2,429.50
Plus Outstanding Credits	14,954.66
Adjustments	0.00
Adjusted Account Balance	4,019,702.44

Statement Ending Balance	4,019,702.44
Bank Difference	0.00
General Ledger Difference	0.00

**CASH BALANCE CONSISTS OF THE FOLLOWING GENERAL LEDGER ACCOUNTS**

001-000-10100	CASH
001-100-44001	FEDERAL TAXES

**Cleared Deposits**

Item Date	Reference	Item Type	Description	Amount
11/26/2025	<a href="#">DEP0004255</a>	Deposit	DEPOSIT CASH RECEIPTS	408.50
11/28/2025	<a href="#">DEP0004266</a>	Deposit	CLPKT01244 BG:CC Payment	50.00
12/01/2025	<a href="#">DEP0004257</a>	Deposit	DEPOSIT CASH RECEIPTS	1,558.50
12/01/2025	<a href="#">DEP0004268</a>	Deposit	CLPKT01243 BG:CC Payment	50.00
12/01/2025	<a href="#">DEP0004268</a>	Deposit	CLPKT01243 BG:Cash	877.34
12/02/2025	<a href="#">DEP0004269</a>	Deposit	DEPOSIT CASH RECEIPTS	184.00
12/02/2025	<a href="#">DEP0004272</a>	Deposit	CLPKT01245 BG:CC Payment	1,046.00
12/02/2025	<a href="#">DEP0004272</a>	Deposit	CLPKT01245 BG:Cash	2,617.06
12/02/2025	<a href="#">DEP0004275</a>	Deposit	CLPKT01246 BG:CC Payment	50.00
12/03/2025	<a href="#">DEP0004279</a>	Deposit	DEPOSIT CASH RECEIPTS	814.00
12/03/2025	<a href="#">DEP0004283</a>	Deposit	CLPKT01249 BG:CC Payment	75.00
12/03/2025	<a href="#">DEP0004285</a>	Deposit	CLPKT01248 BG:Cash	727.00
12/03/2025	<a href="#">DEP0004285</a>	Deposit	CLPKT01248 BG:CC Payment	629.00
12/04/2025	<a href="#">DEP0004286</a>	Deposit	DEPOSIT CASH RECEIPTS	213.00
12/04/2025	<a href="#">DEP0004289</a>	Deposit	CLPKT01250 BG:CC Payment	496.00
12/04/2025	<a href="#">DEP0004289</a>	Deposit	CLPKT01250 BG:Cash	448.75
12/04/2025	<a href="#">DEP0004292</a>	Deposit	CLPKT01251 BG:CC Payment	100.00
12/05/2025	<a href="#">DEP0004293</a>	Deposit	DEPOSIT CASH RECEIPTS	965.00
12/05/2025	<a href="#">DEP0004297</a>	Deposit	CLPKT01253 BG:CC Payment	50.00
12/05/2025	<a href="#">DEP0004299</a>	Deposit	CLPKT01252 BG:Cash	1,585.00
12/05/2025	<a href="#">DEP0004299</a>	Deposit	CLPKT01252 BG:CC Payment	426.00
12/08/2025	<a href="#">DEP0004300</a>	Deposit	DEPOSIT CASH RECEIPTS	724.00
12/08/2025	<a href="#">DEP0004303</a>	Deposit	CLPKT01254 BG:Cash	731.00
12/08/2025	<a href="#">DEP0004303</a>	Deposit	CLPKT01254 BG:CC Payment	273.00



## Cleared Deposits

Section 5, IB)

Item Date	Reference	Item Type	Description	Amount
12/09/2025	<a href="#">DEP0004304</a>	Deposit	DEPOSIT CASH RECEIPTS	1,776.00
12/09/2025	<a href="#">DEP0004307</a>	Deposit	CLPKT01255 BG:Cash	2,020.00
12/09/2025	<a href="#">DEP0004307</a>	Deposit	CLPKT01255 BG:CC Payment	223.00
12/09/2025	<a href="#">DEP0004310</a>	Deposit	CLPKT01256 BG:CC Payment	50.00
12/11/2025	<a href="#">DEP0004311</a>	Deposit	DEPOSIT CASH RECEIPTS	2,387.25
12/15/2025	<a href="#">DEP0004314</a>	Deposit	CLPKT01257 BG:Cash	35,656.00
12/16/2025	<a href="#">DEP0004315</a>	Deposit	DEPOSIT CASH RECEIPTS	9,178.50
12/16/2025	<a href="#">DEP0004318</a>	Deposit	CLPKT01259 BG:CC Payment	100.00
12/16/2025	<a href="#">DEP0004321</a>	Deposit	CLPKT01258 BG:CC Payment	5,851.00
12/16/2025	<a href="#">DEP0004321</a>	Deposit	CLPKT01258 BG:Cash	8,615.50
12/17/2025	<a href="#">DEP0004322</a>	Deposit	DEPOSIT CASH RECEIPTS	1,335.00
12/17/2025	<a href="#">DEP0004326</a>	Deposit	CLPKT01261 BG:CC Payment	25.00
12/17/2025	<a href="#">DEP0004328</a>	Deposit	CLPKT01260 BG:Cash	579.00
12/18/2025	<a href="#">DEP0004331</a>	Deposit	CLPKT01262 BG:Cash	110.00
12/18/2025	<a href="#">DEP0004338</a>	Deposit	CLPKT01264 BG:CC Payment	125.00
12/19/2025	<a href="#">DEP0004332</a>	Deposit	DEPOSIT CASH RECEIPTS	2,391.25
12/19/2025	<a href="#">DEP0004335</a>	Deposit	CLPKT01263 BG:Cash	342.50
12/19/2025	<a href="#">DEP0004335</a>	Deposit	CLPKT01263 BG:CC Payment	483.50
12/19/2025	<a href="#">DEP0004341</a>	Deposit	CLPKT01265 BG:CC Payment	25.00
12/22/2025	<a href="#">DEP0004342</a>	Deposit	DEPOSIT CASH RECEIPTS	2,394.00
12/22/2025	<a href="#">DEP0004345</a>	Deposit	CLPKT01266 BG:CC Payment	1,034.50
12/22/2025	<a href="#">DEP0004345</a>	Deposit	CLPKT01266 BG:Cash	7,472.77
12/23/2025	<a href="#">DEP0004346</a>	Deposit	DEPOSIT CASH RECEIPTS	1,132.25
12/23/2025	<a href="#">DEP0004349</a>	Deposit	CLPKT01267 BG:CC Payment	345.50
12/23/2025	<a href="#">DEP0004349</a>	Deposit	CLPKT01267 BG:Cash	348.50
12/29/2025	<a href="#">DEP0004350</a>	Deposit	DEPOSIT CASH RECEIPTS	2,162.00
12/29/2025	<a href="#">DEP0004353</a>	Deposit	CLPKT01269 BG:CC Payment	150.00
12/29/2025	<a href="#">DEP0004356</a>	Deposit	CLPKT01268 BG:Cash	19,458.09
12/30/2025	<a href="#">DEP0004360</a>	Deposit	CLPKT01270 BG:Cash	6,520.45
12/31/2025	<a href="#">DEP0004363</a>	Deposit	CLPKT01271 BG:Cash	100.00
12/31/2025	<a href="#">DEP0004379</a>	Deposit	CLPKT01276 BG:CC Payment	49,623.79
12/31/2025	<a href="#">DEP0004385</a>	Deposit	CLPKT01278 BG:CC Payment	236,047.66
12/31/2025	<a href="#">DEP0004385</a>	Deposit	CLPKT01278 BG:Cash	7,588.16
Total Cleared Deposits (57)				420,749.32

## Cleared Checks

Item Date	Reference	Item Type	Description	Amount
11/03/2025	<a href="#">2789</a>	Check	Mississippi Department of Employment Sec	-547.50
11/12/2025	<a href="#">2824</a>	Check	Magnolia Shredding LLC	-150.00
11/12/2025	<a href="#">2828</a>	Check	Mississippi Association of Chiefs of Police	-375.00
11/12/2025	<a href="#">2829</a>	Check	Mississippi Department of Public Safety (Cr	-360.00
11/12/2025	<a href="#">2836</a>	Check	Phelps Dunbar LLP	-187.50
12/02/2025	<a href="#">2852</a>	Check	110 Percent, LLC	-3,180.00

Item Date	Reference	Item Type	Description	Amount
12/02/2025	<a href="#">2853</a>	Check	Colleen Wise	-200.00
12/02/2025	<a href="#">2854</a>	Check	Kelly Dabbs Commercial, LLC	-8,792.00
12/02/2025	<a href="#">2855</a>	Check	Mississippi Department of Public Safety	-248.63
12/02/2025	<a href="#">2856</a>	Check	State General Fund (DFA)	-16,700.03
12/02/2025	<a href="#">2857</a>	Check	Mississippi Department of Employment Sec	-273.75
12/10/2025	<a href="#">2858</a>	Check	Ace Bolt & Screw Co. Inc.	-229.22
12/10/2025	<a href="#">2859</a>	Check	Advanced Covert Technology	-2,288.00
12/10/2025	<a href="#">2860</a>	Check	Akros Academy of Jiu-Jitsu	-100.00
12/10/2025	<a href="#">2861</a>	Check	AutoZone Parts, Inc.	-78.11
12/10/2025	<a href="#">2862</a>	Check	Bear Creek Water Association	-251.84
12/10/2025	<a href="#">2863</a>	Check	Bridge & Watson, Inc.	-3,169.25
12/10/2025	<a href="#">2864</a>	Check	Canton Sanitary Landfill	-392.57
12/10/2025	<a href="#">2866</a>	Check	Cintas Corporation	-484.24
12/10/2025	<a href="#">2867</a>	Check	Classic Creations, Inc.	-353.29
12/10/2025	<a href="#">2868</a>	Check	Crystal Clean	-3,291.00
12/10/2025	<a href="#">2869</a>	Check	E-notice, Inc.	-60.60
12/10/2025	<a href="#">2870</a>	Check	Entergy	-4,367.36
12/10/2025	<a href="#">2871</a>	Check	FP Mailing Solutions	-167.07
12/10/2025	<a href="#">2872</a>	Check	Fuelman	-5,553.99
12/10/2025	<a href="#">2873</a>	Check	Fusionsite Mississippi LLC	-222.50
12/10/2025	<a href="#">2874</a>	Check	Gulf States Distributors, Inc.	-1,116.22
12/10/2025	<a href="#">2875</a>	Check	Guns-n-Gear	-3,754.87
12/10/2025	<a href="#">2876</a>	Check	Hartley Equipment Company, Inc.	-146.73
12/10/2025	<a href="#">2877</a>	Check	Highland Building Services, Inc.	-2,150.00
12/10/2025	<a href="#">2878</a>	Check	Hometown Promo Products	-1,674.95
12/10/2025	<a href="#">2879</a>	Check	International Code Council	-1,021.50
12/10/2025	<a href="#">2881</a>	Check	Keeling Company	-242.94
12/10/2025	<a href="#">2882</a>	Check	Lewis Electric, Inc.	-1,200.00
12/10/2025	<a href="#">2883</a>	Check	Madison County Sheriff's Office	-2,779.26
12/10/2025	<a href="#">2884</a>	Check	Magnolia Shredding LLC	-150.00
12/10/2025	<a href="#">2885</a>	Check	Mills, Scanlon, Dye & Pittman, Attorneys at	-8,877.48
12/10/2025	<a href="#">2886</a>	Check	Mississippi Municipal Clerks and Collector's	-82.50
12/10/2025	<a href="#">2887</a>	Check	Motorola Solutions, Inc.	-47,971.30
12/10/2025	<a href="#">2888</a>	Check	Murray Mud Jacking Service, Inc.	-6,600.00
12/10/2025	<a href="#">2889</a>	Check	OP Plus	-203.95
12/10/2025	<a href="#">2890</a>	Check	Parkway Quicklube & Tire, LLC	-210.90
12/10/2025	<a href="#">2891</a>	Check	Pennington & Trim Alarm Services, Inc	-69.00
12/10/2025	<a href="#">2892</a>	Check	Printables and More (G&W Marketing)	-360.00
12/10/2025	<a href="#">2893</a>	Check	Puckett Rents	-125.00
12/10/2025	<a href="#">2894</a>	Check	Revell Hardware Co., Inc.	-58.93
12/10/2025	<a href="#">2895</a>	Check	Ricks Pro Truck	-529.14
12/10/2025	<a href="#">2896</a>	Check	Robert J Young Company	-2,054.09
12/10/2025	<a href="#">2897</a>	Check	RPT Commercial, Inc.	-1,838.00
12/10/2025	<a href="#">2898</a>	Check	Scott Insurance Services LLC	-159.00
12/10/2025	<a href="#">2899</a>	Check	Southern Benefits Administrators	-100.00

## Cleared Checks

Section 5, IB)

Item Date	Reference	Item Type	Description	Amount
12/10/2025	<a href="#">2900</a>	Check	Southern Connection Police Supplies, LLC	-137.98
12/10/2025	<a href="#">2901</a>	Check	Stantec Consulting Services Inc (SCSI)	-2,460.00
12/10/2025	<a href="#">2902</a>	Check	The 20 LLC	-7,838.40
12/10/2025	<a href="#">2903</a>	Check	Thomson Reuters - West Payment Center	-802.63
12/10/2025	<a href="#">2904</a>	Check	Tyler Technologies, Inc.	-17,300.00
12/10/2025	<a href="#">2905</a>	Check	Uline, Inc.	-84.32
12/10/2025	<a href="#">2906</a>	Check	Vada Inc.	-1,988.00
12/10/2025	<a href="#">2907</a>	Check	Venable Glass Services, LLC	-640.00
12/10/2025	<a href="#">2908</a>	Check	Waste Management of Mississippi, Inc.	-379.80
Total Cleared Checks (60)				-167,130.34

## Cleared Other

Item Date	Reference	Item Type	Description	Amount
12/01/2025	<a href="#">DFT0001904</a>	Bank Draft	Blue Cross Blue Shield Of Mississippi	-10,785.15
12/01/2025	<a href="#">DFT0001905</a>	Bank Draft	Blue Cross Blue Shield Of Mississippi	-10,556.88
12/01/2025	<a href="#">MISC0000279</a>	Miscellaneous	Inverse for Delayed \$213 Loggins Payment	-213.00
12/02/2025	<a href="#">DFT0001854</a>	Bank Draft	Entergy	-385.78
12/02/2025	<a href="#">DFT0001855</a>	Bank Draft	Delta Utilities Aggregator, LLC	-116.83
12/02/2025	<a href="#">DFT0001857</a>	Bank Draft	Telepak Networks, Inc.	-2,345.69
12/02/2025	<a href="#">DFT0001858</a>	Bank Draft	Cadence Bank	-110.00
12/02/2025	<a href="#">DFT0001891</a>	Bank Draft	Equipoint Partners, LLC	-2,556.97
12/03/2025	<a href="#">DFT0001856</a>	Bank Draft	Telepak Networks, Inc.	-276.22
12/03/2025	<a href="#">DFT0001922</a>	Bank Draft	Mississippi Deferred Compensation	-392.50
12/03/2025	<a href="#">DFT0001923</a>	Bank Draft	Mississippi Deferred Compensation	-392.50
12/03/2025	<a href="#">DFT0001924</a>	Bank Draft	Mississippi Department of Revenue	-2,274.00
12/03/2025	<a href="#">DFT0001925</a>	Bank Draft	Mississippi Department of Revenue	-1,945.00
12/03/2025	<a href="#">MISC0000281</a>	Miscellaneous	Inverse of Delayed \$25 Williamson Paymen	-25.00
12/04/2025	<a href="#">DFT0001898</a>	Bank Draft	IRS Taxpayer Assistance Center	-2,694.78
12/04/2025	<a href="#">DFT0001899</a>	Bank Draft	IRS Taxpayer Assistance Center	-5,217.50
12/04/2025	<a href="#">DFT0001900</a>	Bank Draft	IRS Taxpayer Assistance Center	-11,627.88
12/04/2025	<a href="#">DFT0001901</a>	Bank Draft	IRS Taxpayer Assistance Center	-8.98
12/04/2025	<a href="#">DFT0001902</a>	Bank Draft	IRS Taxpayer Assistance Center	-62.07
12/04/2025	<a href="#">DFT0001903</a>	Bank Draft	IRS Taxpayer Assistance Center	-38.44
12/04/2025	<a href="#">DFT0001906</a>	Bank Draft	American Family Life Assurance Company c	-151.02
12/04/2025	<a href="#">DFT0001907</a>	Bank Draft	American Family Life Assurance Company c	-151.02
12/04/2025	<a href="#">DFT0001908</a>	Bank Draft	American Family Life Assurance Company c	-37.26
12/04/2025	<a href="#">DFT0001909</a>	Bank Draft	American Family Life Assurance Company c	-6.54
12/04/2025	<a href="#">DFT0001910</a>	Bank Draft	American Family Life Assurance Company c	-209.98
12/04/2025	<a href="#">DFT0001911</a>	Bank Draft	American Family Life Assurance Company c	-49.68
12/04/2025	<a href="#">DFT0001912</a>	Bank Draft	American Family Life Assurance Company c	-301.14
12/04/2025	<a href="#">DFT0001913</a>	Bank Draft	American Family Life Assurance Company c	-209.98
12/04/2025	<a href="#">DFT0001914</a>	Bank Draft	American Family Life Assurance Company c	-6.54
12/04/2025	<a href="#">DFT0001915</a>	Bank Draft	American Family Life Assurance Company c	-37.26

Item Date	Reference	Item Type	Description	Amount
12/04/2025	<a href="#">DFT0001916</a>	Bank Draft	American Family Life Assurance Company c	-49.68
12/04/2025	<a href="#">DFT0001917</a>	Bank Draft	American Family Life Assurance Company c	-301.14
12/04/2025	<a href="#">DFT0001918</a>	Bank Draft	Morgan White Administrators, Inc.	-652.13
12/04/2025	<a href="#">DFT0001919</a>	Bank Draft	Morgan White Administrators, Inc.	-165.57
12/04/2025	<a href="#">DFT0001920</a>	Bank Draft	Morgan White Administrators, Inc.	-652.13
12/04/2025	<a href="#">DFT0001921</a>	Bank Draft	Morgan White Administrators, Inc.	-165.57
12/05/2025	<a href="#">1365</a>	EFT	Marsha Weems Stacey	-1,200.00
12/05/2025	<a href="#">1366</a>	EFT	Michael Devin Whitt	-1,200.00
12/05/2025	<a href="#">EFT0000102</a>	EFT	Payroll EFT	-69,170.62
12/09/2025	<a href="#">DFT0001926</a>	Bank Draft	Mississippi Public Employees Retirement Sy	-857.56
12/09/2025	<a href="#">DFT0001927</a>	Bank Draft	Mississippi Public Employees Retirement Sy	-24,228.66
12/09/2025	<a href="#">DFT0001928</a>	Bank Draft	Mississippi Public Employees Retirement Sy	-604.32
12/09/2025	<a href="#">DFT0001929</a>	Bank Draft	Mississippi Public Employees Retirement Sy	-22,153.93
12/12/2025	<a href="#">EFT0000103</a>	EFT	Payroll EFT	-183.34
12/16/2025	<a href="#">DFT0001931</a>	Bank Draft	Madison County Tax Collector	-1,481.89
12/16/2025	<a href="#">DFT0001937</a>	Bank Draft	BankPlus	-20.00
12/19/2025	<a href="#">DFT0001895</a>	Bank Draft	IRS Taxpayer Assistance Center	-2,600.52
12/19/2025	<a href="#">DFT0001896</a>	Bank Draft	IRS Taxpayer Assistance Center	-4,703.42
12/19/2025	<a href="#">DFT0001897</a>	Bank Draft	IRS Taxpayer Assistance Center	-11,224.53
12/19/2025	<a href="#">DFT0001930</a>	Bank Draft	AT&T Mobility	-603.45
12/19/2025	<a href="#">EFT0000104</a>	EFT	Payroll EFT	-67,103.19
12/30/2025	<a href="#">MISC0000282</a>	Miscellaneous	Dec. 2025 Inhouse \$213 Payment	213.00
12/31/2025	<a href="#">DFT0001938</a>	Bank Draft	BankPlus	-22.90
Total Cleared Other (53)				-262,317.14

## Outstanding Deposits

Item Date	Reference	Item Type	Description	Amount
12/29/2025	<a href="#">DEP0004356</a>	Deposit	CLPKT01268 BG:CC Payment	463.50
12/30/2025	<a href="#">DEP0004357</a>	Deposit	DEPOSIT CASH RECEIPTS	213.00
12/30/2025	<a href="#">DEP0004360</a>	Deposit	CLPKT01270 BG:CC Payment	769.00
12/31/2025	<a href="#">DEP0004364</a>	Deposit	DEPOSIT CASH RECEIPTS	984.00
Total Outstanding Deposits (4)				2,429.50

## Outstanding Checks

Item Date	Reference	Item Type	Description	Amount
11/12/2025	<a href="#">2831</a>	Check	Mississippi-Tennessee Tactical Officers Assc	-1,000.00
11/12/2025	<a href="#">2846</a>	Check	The Christian Learning Center	-90.00
12/10/2025	<a href="#">2865</a>	Check	CDW LLC	-141.52
12/10/2025	<a href="#">2880</a>	Check	J.L. Roberts Mechanical Contracting, LLC	-776.20
12/30/2025	<a href="#">2909</a>	Check	110 Percent, LLC	-3,180.00
12/30/2025	<a href="#">2910</a>	Check	Home Depot U.S.A., Inc.	-307.44
12/30/2025	<a href="#">2911</a>	Check	Kelly Dabbs Commercial, LLC	-8,792.00

# Outstanding Checks

Section 5, IB)

Item Date	Reference	Item Type	Description	Amount
12/30/2025	<a href="#">2912</a>	Check	Michael Patrick Beasley	-120.00
12/30/2025	<a href="#">2913</a>	Check	Mississippi Department of Employment Sec	-547.50
Total Outstanding Checks (9)				-14,954.66



Gluckstadt, MS

Section 5, IB)

# Bank Statement Register

## Transaction Summary

Transaction Type	Count	Outstanding	Cleared	Total
Bank Draft	45	0.00	-123,434.99	-123,434.99
Check	69	-14,954.66	-167,130.34	-182,085.00
Deposit	61	2,429.50	420,749.32	423,178.82
EFT	5	0.00	-138,857.15	-138,857.15
Miscellaneous	3	0.00	-25.00	-25.00
		-12,525.16	-8,698.16	-21,223.32



Gluckstadt, MS

Bank Statement		General Ledger	
Beginning Balance	9,330.00	Account Balance	9,330.00
Plus Debits	0.00	Less Outstanding Debits	0.00
Less Credits	0.00	Plus Outstanding Credits	0.00
Adjustments	0.00	Adjustments	0.00
Ending Balance	9,330.00	Adjusted Account Balance	9,330.00
Statement Ending Balance		9,330.00	
Bank Difference		0.00	
General Ledger Difference		0.00	

CASH BALANCE CONSISTS OF THE FOLLOWING GENERAL LEDGER ACCOUNTS

102-000-10100 CASH

**From:** [Simpson Goodman](#)  
**To:** [Lindsay Kellum](#); [Scott Maugh](#)  
**Subject:** RE: Check Issue, PD Forfeited Funds Account (Bank Recon Issue)  
**Date:** Thursday, January 8, 2026 3:38:10 PM

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That sounds like a good, y'all.

This is evidence that your internal controls are working! (Make sure the Board knows that.) It is concerning about the bank clearing the check, but again, your timely bank recs caught it so that it could be promptly addressed.

Thanks for keeping us on the loop!

**Simpson L. Goodman, JD**



**Bridgers, Goodman, Baird & Clarke, PLLC | Certified Public Accountants**

3528 Manor Drive | Vicksburg, MS 39180

Office: (601) 636-1416 | Fax: (601) 636-1417 | Cell: (662) 820-9887

Email: [simpson.goodman@bridgerscpas.com](mailto:simpson.goodman@bridgerscpas.com) | [www.bridgerscpas.com](http://www.bridgerscpas.com)

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**From:** Lindsay Kellum <lindsay.kellum@gluckstadt.net>  
**Sent:** Thursday, January 8, 2026 3:27 PM  
**To:** Scott Maugh <scott.maugh@gluckstadt.net>; Simpson Goodman <simpson.goodman@bridgerscpas.com>  
**Subject:** RE: Check Issue, PD Forfeited Funds Account (Bank Recon Issue)

Yes, that sounds good, as I don't believe it is possible to force reconcile with a balance in Tyler. I am still waiting on the bank to rectify the issue and refund the money to the Forfeited Funds account. I have explained the importance of this due to those funds being limited to



certain expenditures only and that the check drawn on the account clearly did not come from Gluckstadt; they are checking into why it was able to be deposited, as we have a similar account number as identified on the random check. They assured me they are reaching out to research and legal and will strengthen security measures on this account, as well as provide answers.

The amount should be returned this week and will reconcile next month; I will explain to the board at the next meeting.

**LINDSAY LEONARD KELLUM, CMC**

City Clerk, City of Gluckstadt

P.O. Box 2210

Madison, MS 39130

(769) 567-2306

[Lindsay.Kellum@gluckstadt.net](mailto:Lindsay.Kellum@gluckstadt.net)



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**From:** Scott Maugh <[scott.maugh@gluckstadt.net](mailto:scott.maugh@gluckstadt.net)>

**Sent:** Thursday, January 8, 2026 3:14 PM

**To:** Lindsay Kellum <[lindsay.kellum@gluckstadt.net](mailto:lindsay.kellum@gluckstadt.net)>; Simpson Goodman <[simpson.goodman@bridgerscpas.com](mailto:simpson.goodman@bridgerscpas.com)>

**Subject:** FW: Check Issue, PD Forfeited Funds Account (Bank Recon Issue)

Lindsay/Simpson,

See below for full thread details.

I was unable to get in touch with Tyler today, and, due to time constraints. I am going to do Option B as discussed with Simpson earlier today. We will change the reconciliation statement ending balance so that it hits zero, while including this email thread as evidence of why we did so. We will include anything else deemed necessary to show that the bank made an error that is throwing off our statement. On the advice of audit, we made not transactions, and we set the reconciliation statement to be different for Tyler to let us proceed. Everything should be in order in January.

Thanks,

**SCOTT MAUGH**

Assistant City Clerk, City of Gluckstadt

P.O. Box 2210

Madison, MS 39130

Office: (769) 567-2306

Fax: (769) 567-2305

[Scott.Maugh@gluckstadt.net](mailto:Scott.Maugh@gluckstadt.net)



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**From:** Lindsay Kellum <[lindsay.kellum@gluckstadt.net](mailto:lindsay.kellum@gluckstadt.net)>

**Sent:** Thursday, January 8, 2026 2:30 PM

**To:** Mike Robinson <[MikeRobinson@BankPlus.net](mailto:MikeRobinson@BankPlus.net)>; Dexter Young <[DexterYoung@BankPlus.net](mailto:DexterYoung@BankPlus.net)>

**Cc:** Scott Maugh <[scott.maugh@gluckstadt.net](mailto:scott.maugh@gluckstadt.net)>

**Subject:** RE: Check Issue, PD Forfeited Funds Account

Thank you all for looking into this matter.

**LINDSAY LEONARD KELLUM, CMC**

City Clerk, City of Gluckstadt

P.O. Box 2210

Madison, MS 39130

(769) 567-2306

[Lindsay.Kellum@gluckstadt.net](mailto:Lindsay.Kellum@gluckstadt.net)



---

**From:** Mike Robinson <[MikeRobinson@BankPlus.net](mailto:MikeRobinson@BankPlus.net)>

**Sent:** Thursday, January 8, 2026 12:43 PM

**To:** Dexter Young <[DexterYoung@BankPlus.net](mailto:DexterYoung@BankPlus.net)>

**Cc:** Lindsay Kellum <[lindsay.kellum@gluckstadt.net](mailto:lindsay.kellum@gluckstadt.net)>; Scott Maugh <[scott.maugh@gluckstadt.net](mailto:scott.maugh@gluckstadt.net)>

**Subject:** RE: Check Issue, PD Forfeited Funds Account

Will do. Stand by



Member FDIC

## MIKE ROBINSON

Assistant Vice President  
Gluckstadt

1243 Gluckstadt Road  
Madison | MS | 39110

**o:** [\(601\)407-2322](tel:(601)407-2322)

**c:** [\(769\)234-3026](tel:(769)234-3026)

**f:** [\(601\)898-7721](tel:(601)898-7721)

**e:** [MikeRobinson@BankPlus.net](mailto:MikeRobinson@BankPlus.net)

**NMLS:**562110

**From:** Dexter Young <[DexterYoung@BankPlus.net](mailto:DexterYoung@BankPlus.net)>

**Sent:** Thursday, January 8, 2026 12:40 PM

**To:** Mike Robinson <[MikeRobinson@BankPlus.net](mailto:MikeRobinson@BankPlus.net)>

**Cc:** Lindsay Kellum <[lindsay.kellum@gluckstadt.net](mailto:lindsay.kellum@gluckstadt.net)>; Scott Maugh <[scott.maugh@gluckstadt.net](mailto:scott.maugh@gluckstadt.net)>

**Subject:** FW: Check Issue, PD Forfeited Funds Account

**Importance:** High

Mike, can you please contact the Research Department regarding this item?

Thanks



Member FDIC

## DEXTER YOUNG

First Vice President  
Nissan/Gluckstadt

1243 Gluckstadt Road  
Madison | MS | 39110

**o:** [\(601\)898-7724](tel:(601)898-7724)

**c:** [\(601\)278-2918](tel:(601)278-2918)

**f:** [\(601\)898-7721](tel:(601)898-7721)

**e:** [DexterYoung@BankPlus.net](mailto:DexterYoung@BankPlus.net)

**NMLS:**562111

**From:** Lindsay Kellum <[lindsay.kellum@gluckstadt.net](mailto:lindsay.kellum@gluckstadt.net)>

**Sent:** Thursday, January 8, 2026 12:30 PM

**To:** Sameka Branson <[SamekaBranson@BankPlus.net](mailto:SamekaBranson@BankPlus.net)>

**Cc:** Scott Maugh <[scott.maugh@gluckstadt.net](mailto:scott.maugh@gluckstadt.net)>; Dexter Young <[DexterYoung@BankPlus.net](mailto:DexterYoung@BankPlus.net)>

**Subject:** [External] Check Issue, PD Forfeited Funds Account

**Importance:** High

### This Message Is From an External Sender

Caution: This email originated from outside BankPlus. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Sameka,

We do not know why this check, made out to Dinah Boatwright, was drawn on this account? This isn't a check sent to vendor by the City of Gluckstadt – it appears from the copy of the check that it is possible we have similar bank account numbers. Please make sure we do not have a duplicate bank account number.

This needs to be drawn on the proper account as this particular account is very limited on what we can spend funds on – related to PD equipment and vehicles only. The state also audits this account closely to make sure the expenditures are proper.

We will need the amount refunded back to this account, asap.

Thanks.

**LINDSAY LEONARD KELLUM, CMC**

City Clerk, City of Gluckstadt

P.O. Box 2210

Madison, MS 39130

(769) 567-2306

[Lindsay.Kellum@gluckstadt.net](mailto:Lindsay.Kellum@gluckstadt.net)





**SOUTH MADISON COUNTY  
FIRE PROTECTION DISTRICT  
GLUCKSTADT FIRE DEPARTMENT  
639 YANDELL RD \* CANTON, MS 39046  
Phone (601)691-4595  
Fax 601-691-4450**

Date: January 5, 2026

To: City Clerk Lindsay Kellum  
From: Chief Henry Davis  
Re: Budgeted fund request

Dear Lindsay

I am writing this letter in request for the funds in the amount of \$60,000.00 that has been budgeted in the City's 2025/2026 contractual services budget for the South Madison County Fire Protection District which provides fire protection to the City of Gluckstadt. The funds will be used on the annual payment for the new Ladder Truck that was purchased.

I would appreciate your consideration.

Sincerely

Chief Henry Davis

## Ad Valorem Tax Exemption

Application of SANHUA INTERNATIONAL INC for ad valorem tax exemption for a period of 10 years as authorized by Section 27-31-101, et seq., of the Mississippi Code of 1972, as amended.

1. SANHUA INTERNATIONAL INC files this application for ad valorem tax exemption, and respectfully represents unto this Honorable Board as follows:
2. Applicant, SANHUA INTERNATIONAL INC, is a [corporation/partnership/LLC] and domiciled in the City of Gluckstadt, Madison County, Mississippi.
3. Applicant is now operating as a (specify product type) AIR CONDITIONING PARTS manufacturing/distribution type of industry within the City of Gluckstadt, Madison County, Mississippi, which factory is a bona fide (new X expanded     ) enterprise of public utility within the meaning of Section 27-31-101 et seq., and related Sections of the Mississippi Code of 1972, as amended, and is eligible for the ad valorem tax exemption granted by the above-mentioned section by enumeration, namely (manufacturing      distribution X     ).
4. That said enterprise was completed on the 16 day of DECEMBER, 20 25, within the meaning of the applicable statutes of the State of Mississippi, and therefore, the tax exemption hereby claimed should commence on said date.
5. That said (new X expanded     ) enterprise will provide approximately 24 new jobs with an estimated annual payroll of \$ 1,018,026 (INCLUDING BENEFITS).
6. That said tax exemption of the tangible property described in "Exhibit A" should be granted for a period of 10 years from said date of completion.
7. That the true value of all property included in the tax exemption is \$ 8,368,263, as shown in an itemized list attached hereto as "Exhibit A" and made a part hereof.

**WHEREFORE**, Applicant prays that this Board enter a finding that applicant's factory is in fact a (new X expanded       ) enterprise of public utility, and that the same was completed on the 16 day of DECEMBER, 2025, within the meaning of the applicable laws of Mississippi; and

That applicant be granted an exemption from ad valorem taxation, as provided by law, for a period of 10 years beginning on the 16 day of DECEMBER, 2025, upon all of the tangible property described in "Exhibit A" attached hereto and made a part hereof, used in, or necessary to the operation of the applicant's facility in the City of Gluckstadt, Madison County, Mississippi; and

That this Board approve this application by a resolution spread upon its minutes, declaring that such property is exempt from all ad valorem taxation for a period of 10 years and forward an original of this application and a certified transcript of such approval to the Mississippi Department of Revenue and upon approval of such application by the Mississippi Department of Revenue and certification of its approval, the Board will enter a final order on its minutes granting the ad valorem tax exemption herein prayed.

Respectfully submitted, this 16 day of DECEMBER, 2025.

SANHUA INTERNATIONAL INC  
Applicant

BY: Adele Liang, Associate Director

---

**Print Name & Title**

Adele Liang

Attest

Date: 12/16/2025**Ad Valorem Tax Exemption****Summary Sheet**New x      Expansion \_\_\_\_\_      Years Requested 2025      Mfg. \_\_\_\_\_      Dist. xRequest:      Real \_\_\_\_\_      Personal \_\_\_\_\_      Free Port Warehouse x1. Name of company: SANHUA INTERNATIONAL INCAddress: 252 FALLBROOK DR, SUITE 400, HOUSTON, TX 770382. Product: AIR CONDITIONING PARTS      Sq. Ft: 200,000# of Employees prior to request: 24      # of Employees with this request \_\_\_\_\_Total # of Employees 223. Average full-time hourly wage (including benefits): \$ 29.344. Year applicant began operations (this location): 2023

<b>Capital Investment:</b>	Real:	\$ _____
	Personal:	\$ <u>8,368,263</u>
	<b>Total:</b>	\$ <u>8,368,263</u>



## Ad Valorem Tax Exemption

### Information Sheet

#### Type of Ad Valorem Tax Exemption Requested:

1. Real Property \_\_\_\_\_ Property Owner: \_\_\_\_\_
2. Personal Property \_\_\_\_\_ Owner/Applicant: \_\_\_\_\_
3. Free Port Warehouse X Owner/Applicant: SANHUA INTERNATIONAL INC

#### Property Description:

1. Property is Leased 100 % or Owned \_\_\_\_\_ by the job creator?
2. Company Name: SANHUA INTERNATIONAL INC  
d/b/a: \_\_\_\_\_
3. Local Mailing Address: 252 FALLBROOK DR, SUITE 400, HOUSTON, TX 77038  
\_\_\_\_\_
4. Physical Address: 195 INDUSTRIAL BLVD, MADISON, MS 39110  
\_\_\_\_\_
5. Local Contact Name & Title: Adele Liang, Associate Director  
Telephone Number: 769-366-2560 Email Address: adele.liang@sanhuausa.com
6. Secondary Contact Name & Title: Yu Liu, Tax Accountant  
Telephone Number: 201-889-7568 Email Address: yu.liu2sanhuausa.com
7. Corporate Headquarters Address: \_\_\_\_\_  
Corporate Contact Name & Title: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_



**Workforce:**

## 1. Number of employees in the City of Gluckstadt office where the exemption will apply:

- a) Total number of full-time employees prior to request: 24
- b) Total number of employees added in this request: 0
- c) Total number of full-time employees: 22
- d) Total number of employees residing in Gluckstadt: 20

## 2. Wages:

- a) Average full-time hourly wage (excluding benefits): \$ 23.35
- Average full-time hourly wage (including benefits): \$ 29.34
- Total number of full-time hourly employees: 18
- b) Average full-time salaried wage (excluding benefits): \$ 57,700.63/Year
- Average full-time salaried wage (including benefits): \$ 70,469.41/Year
- Total number of full-time salaried employees: 6
- c) Average part-time hourly wage (excluding benefits): \$ 0
- Average part-time hourly wage (including benefits): \$ 0
- Total number of part-time hourly employees: 0

## 3. Do you anticipate hiring seasonal or temporary employees?

Yes        No X

If yes, explain your company's need for seasonal or temporary employees:

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4. Within the next two years, what does your company anticipate the level of employment to be:

Full-time salaried YES      Full-time hourly YES

Part-time NO      Seasonal/Temporary NO

5. Does your company offer benefits to all employees? Full-time YES      Part-time NO

6. Estimated annual payroll at the Gluckstadt facility:

\$ 1,018,026 (INCLUDING BENEFITS)

#### Capital Investment:

1. Amount of capital investment for this project:

Real Property Value:      \$ \_\_\_\_\_

Personal Property Value:      \$ 8,368,263

#### Expansions:

1. Is this an expansion:    Yes \_\_\_\_\_    No X

If this is an expansion, describe the expansion: \_\_\_\_\_

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#### Local Economy:

1. What purchases of goods or services are made by your company from local vendors or businesses? \_\_\_\_\_

Temporary worker, water, propane, gas, and power.

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**Transportation:**

1. Modes of shipping and receiving used by this facility:

Truck transportation, packed in pallets

2. Number of daily trucks: Inbound 4 Outbound 12

Seasonal increase, specify which month(s) May to July and truck number increase 3 to 6

3. Local, state, and federal highways most frequently used by this facility:

#55 Highway

**Company Operations:**

1. Locally owned: Yes        No X

2. Type of industry (NAIC Code): 723700

3. Product(s) Produced:

N/A

4. Product(s) Distributed:

AIR CONDITIONING PARTS

5. Describe any other process carried out by this business:

NA

6. Market area: TEXAS, TENNESSEE, IOWA

7. Estimated annual sales, manufacture, or distribution: \$ 778,518,971

**The applicant company accepts all responsibility for the preparation and filing of the ad valorem tax exemption and free port warehouse applications, respective board presentation, and approval process at both the city and county level, and the annual filing requirements, including free port warehouse reports. The City of Gluckstadt only serves in an advisory role and thus accepts no responsibility in the tax process. The City of Gluckstadt recommends that each applicant company consult and utilize its own legal counsel for the tax exemption application, presentation, approval process, and annual filing requirements.**

**INTERLOCAL COOPERATION AGREEMENT BETWEEN MADISON COUNTY,  
MISSISSIPPI, AND THE CITY OF GLUCKSTADT, MISSISSIPPI, REGARDING THE  
FUNDING OF CERTAIN ROAD IMPROVEMENTS LOCATED IN THE CITY OF  
GLUCKSTADT**

This Interlocal Cooperation Agreement (the "Agreement") is made and entered into by and between the City of Gluckstadt, Mississippi, a municipal corporation organized and existing under the laws of the State of Mississippi (the "City") and Madison County, Mississippi, a political subdivision of the State of Mississippi (the "County"), pursuant to the Mississippi Interlocal Cooperation Act of 1975, codified at § 17-13-1, et seq., Mississippi Code of 1972, as amended (the "Interlocal Act") on the date set forth hereinafter.

**RECITALS:**

WHEREAS, the City and County agree, find and determine as follows:

1. In addition to any words and terms elsewhere defined herein, the following words and terms shall have the following meanings, unless some other meaning is plainly intended:

"City" shall mean the City of Gluckstadt, Mississippi.

"County" shall mean Madison County, Mississippi.

"Project" shall mean the reconstruction, repairing, overlaying and associated improvements of certain streets located in the City of Gluckstadt, as identified in Appendix "A" attached hereto, to the extent that the funds described herein may allow the work to be done, using construction methods and materials with, in judgment of the City, will produce the best results given said available funding.

2. The governing authorities of the City and County desire to enter into a joint effort to make the most efficient use of their powers and enable them to enhance the general welfare of the City and County and the citizens of each through the improvement of streets and related infrastructure.
3. This Agreement will terminate when the Project described in Appendix "A" shall have been completed with the available funds, but no later than December 31, 2026
4. In order to provide for the infrastructure improvements, it is necessary and in the public interest for the City to cooperate with the County by entering into this Agreement.

5. The City and County desire to enter into this Agreement for the purposes of street repair and resurfacing which will enhance the general welfare of the City and the County and the citizens of each, and consequently, the economic development of the City and the County.
6. It is necessary for the City and County to enter into this Agreement in order to enable the City to proceed with the Project with a clear understanding and commitment as to the nature of the County's participation.
7. The City agrees to assume the work necessary to undertake the Project. The County agrees to reimburse the City for expenses associated with the Project up to a maximum of Seven Hundred Eight Thousand Three Hundred Thirty-Five Dollars (\$708,335.00).
8. It is in the best interests of the citizens of the City that the City would enter into and execute the Agreement.
9. It is in the best interests of the citizens of the County that the County would enter into and execute the Agreement.

**NOW, THEREFORE, FOR AND IN CONSIDERATION OF THE ABOVE AND THE MUTUAL BENEFITS ACCRUING TO THE CITY AND COUNTY, THE CITY AND COUNTY DO HEREBY AGREE AS FOLLOWS:**

**Section 1. Duration.** This Agreement shall be in force and effect until terminated in accordance with the provisions of Section 6 herein.

**Section 2. Purpose.** The purpose of this Agreement is to define the respective responsibilities of the City and County with regard to the financing and completion of the Project, as defined above.

**Section 3. Organization and Statutory Authority.** There will be no separate legal or administrative entity created pursuant to this Agreement. The City is authorized by Miss. Code §21-37-3 (Annotated), and the County is authorized by Miss. Code §19-3-41 (Annotated), to exercise and carry out the powers, authorities, and responsibilities to be exercised by each of them pursuant to the terms of this Agreement.

1. **Section 4. Financing, Staffing and Supplying.** The Project will be undertaken and financed by the City, and upon completion, the City will thereafter assume responsibility for maintenance and upkeep of the roads and streets. The County will reimburse the City for work done during the course of the Project on a monthly basis, not later than thirty days after delivery by the City

of documentation of costs incurred. The County will reimburse the City the costs incurred in performance of work necessary to accomplish the Project, up to a maximum of Seven Hundred Eight Thousand Three Hundred Thirty-Five Dollars (\$708,335.00).

2. Any additional costs incurred will be the responsibility of the City and will not be reimbursed by the County. The City will perform the work primarily through the use of contractors, with some possible incidental work performed by City personnel and equipment. The City will complete work on the Project not later than December 31, 2026, with a final invoice to the County submitted not later than January 30, 2027, and payment made as set forth above. Any portion of the Project not completed or invoiced within this time frame will not be eligible for reimbursement of the County share of the project. As the city is primarily responsible for completion of the road projects listed in Appendix "A" the county acknowledges, approves, warrants and gives permission to the city to reallocate between the individual road projects the funds provided by the county, as it sees fit, without notice to the county, provided that the reallocation, if any, does not exceed, in the aggregate, the amount of funds being provided by the county, to-wit: Seven Hundred Eight Thousand Three Hundred Thirty-Five Dollars (\$708,335.00).

**Section 5. Post Project Responsibilities.** Upon completion of the Project, responsibility for maintenance and upkeep will be the responsibility of the City.

**Section 6. Termination, Disposition of Property.** This Agreement will terminate on January 30, 2027. At the termination of the Agreement any property owned by the City and County, respectively, shall remain their property. The finished Project shall be dedicated to the City. Due to the nature of the agreement, there will be no surplus funds or property to be disposed of when the work has been completed.

**Section 7. Amendment.** This Agreement may be amended at any time by the mutual consent of the City and County by an agreement entered into pursuant to the provisions of the Interlocal Act.

**Section 8. Effective Date.** This Agreement will be effective as of the date it is approved by the respective governing bodies of the City and County, and by the Mississippi Attorney General. The initial term of this Agreement shall commence on the effective date hereof and extend through completion of the Project.

**WITNESS** the signatures of the duly authorized officers of the City and the County on



## APPENDIX "A"

***The below streets and roads as indicated below constitute those streets and roads that are subject to reconstruction, repair, overlay, and other improvements, as being associated within the definition of the "Project", as described herein:***

**Gluckstadt Road Projects:**

1. Clarkdell Road	\$118,000.00
2. Lone Wolf Drive	62,875.00
3. Gluckstadt Rd.	42,345.00
4. N. Taylor Ln	45,385.00
5. S. Taylor Ln	32,340.00
6. Stout Rd	294,390.00
7. Denim Way	84,000.00
8. Business Park Dr.	29,000.00
 TOTAL	 \$708,335.00

this 5<sup>th</sup> day of January 2026.

For the CITY OF ~~Gluckstadt~~, MISSISSIPPI

By: \_\_\_\_\_  
Walter C. Morrison, Mayor

ATTEST:


\_\_\_\_\_  
City Clerk

(SEAL)

For MADISON COUNTY, MISSISSIPPI

By:   
Gerald Steen, President  
Board of Supervisors

ATTEST:

  
Ronny Lott  
Madison County Chancery Clerk

(SEAL)



**ORDINANCE No. 2022-04****MUNICIPAL FIREWORKS ORDINANCE  
ORDINANCE OF THE MAYOR AND BOARD OF ALDERMEN OF THE CITY OF  
GLUCKSTADT, MISSISSIPPI, REGULATING THE SALE AND USAGE OF  
FIREWORKS WITHIN MUNICIPAL LIMITS**

**WHEREAS** many cultures use fireworks as a form of expressing celebration for their culture, customs, and heritage; and

**WHEREAS** Mississippi Code Section 21-19-15 grants the power to the City of Gluckstadt's Mayor and Board of Alderman as the governing authorities to prohibit or regulate the sale or use of fireworks as defined therein; and

**WHEREAS** the City of Gluckstadt is a new municipality having finally incorporated and obtained its Charter in 2021 and wishes to prevent injury or damage as it relates to the display for sale and the retail sales of fireworks as a result; and

**WHEREAS**, the 2021 Zoning Ordinance limits such sales to areas zoned C-2, and requires an approved Conditional Use permit; and

**WHEREAS** it is the intent of the City of Gluckstadt to address the spirit of International Fire Code, while not impeding the opportunity for free commerce, but in keeping with the responsibility of the City to provide code enforcement.

Now, therefore, be it ORDAINED by the Mayor and Board of Alderman for the City of Gluckstadt, Mississippi, as follows:

**SECTION 1: DEFINITIONS**

**CITY:** City of Gluckstadt

**FIRE OFFICIALS:** The Fire Chief, Fire Marshal, or their Designee of the South Madison County Fire Protection District.

**FIRE DEPARTMENT:** The South Madison County Fire Protection District, also known as the "Gluckstadt Fire Department," to include all authorized representatives of the department.

**PLANNING AND ZONING DEPARTMENT:** The City of Gluckstadt Planning and Zoning department, to include all authorized representatives of the department.

**CLASSIFICATION OF FIREWORKS:**

Class "C" Common Fireworks (Designated by Interstate Commerce Commission) - Fireworks are labeled by said commission with the Class C common fireworks label, and which contain a statutorily restricted amount of pyrotechnic composition and were designed to produce an audible effect or pyrotechnic display by combustion; their explosive composition cannot exceed two (2) grains in weight; by way of example they shall include such items as cone fountains, fire crackers,

small Chinese crackers, skyrocket;-bottle-rockets,-small- non-explosive Roman candles and rockets, pyrotechnics commonly known as "snap pops," or other matter or substances similar thereto. For purposes of this section the term "fireworks" shall also include such 1.4G fireworks which comply with the construction, chemical composition and labeling regulations of the DOT for Fireworks, UN 0336, and the U.S. Consumer Product Safety Commission as set forth in CPSC 16 CFR Parts 1500 and 1507, but does not include 1.3G fireworks, the sale of which is not permitted by this ordinance.

Excluded from the prohibition of this ordinance is the sale of toy pistols, toy canes, toy guns or other devices in which paper caps manufactured in accordance with United States Interstate Commerce Commission regulations for packing and shipping of toy paper caps are used, and toy pistol paper caps manufactured as provided in this subsection, the sale and use of which shall be permitted at all times.

**Class "B" Fireworks** - Exhibited and professional fireworks display which must be shot under controlled supervision by a licensed professional pyrotechnic operator, which may be part of any public entertainment sponsored by the City, any other public civic organization or private citizen desiring to have a fireworks display will be allowed within the City. Any public civic organization or private citizen shall be required to obtain approval from the Board of Aldermen prior to the conducting of any fireworks display or exhibition. Any such approval by the Board of Aldermen shall be conditioned upon the satisfaction by the applicant of all requirements set forth in Mississippi Code Ann. Section 45-13-11 regarding the permitting of fireworks exhibitions, as well as any other conditions deemed necessary by the Board, including but not limited to the requirement of a cash deposit or bond for damages or injuries caused by the display, or provision for reimbursement to the City for mobilization of fire equipment and personnel to maintain safety at any such display.

**NET EXPLOSIVE WEIGHT (net weight).** The weight of explosive material expressed in pounds. The net explosive weight is the aggregate amount of explosive material contained within buildings, magazines, structures, or any portions thereof, used to establish quantity-distance relationships.

#### **PERMITTED HOLIDAYS:**

INDEPENDENCE DAY (4<sup>th</sup> of JULY); 8:00 AM – 11:00 PM

CHRISTMAS HOLIDAY (25<sup>th</sup> of DECEMBER); 8:00 AM – 11:00 PM

NEW YEAR'S HOLIDAY (31<sup>st</sup> of DECEMBER and 1<sup>st</sup> of JANUARY); 8:00 AM – MIDNIGHT

## **SECTION 2: APPLICATION (SALES OF CLASS "C" COMMON FIREWORKS)**

### **APPLICATION FOR PERMITS.**

(a) An applicant for permit for sale of fireworks shall file a written application duly subscribed and sworn to by the applicant. Additionally, an Applicant must obtain a Conditional Use permit secured from the Planning and Zoning Department for fireworks stands in any C-2 zone, and the Applicant must also obtain a Transient Vendor privilege license and notify the Police Department in accordance with Section 406.08 of the City's adopted Zoning Ordinance. Once approved by the Board of Aldermen, a Conditional Use permit will remain valid, unless modifications are made to

the site, the temporary structure, or the location. Ownership and operation of the Conditional Use may not be transferred, subleased, sold, or conveyed to any other individual, firm or entity. Any such change in ownership or operation will necessitate an application for a new Conditional Use permit.

(b) Any permit granted by the Board of Aldermen under which fireworks sale, possession, or is allowed shall be issued in compliance with Section 1123 of the National Fire Protection Association, as revised, and the Mississippi Fire Prevention Code, as revised. Such permits shall require that the persons in charge of such exhibitions shall be experienced in the handling of fireworks and the members of the public attending the exhibitions shall be kept at a safe distance therefrom. Any fireworks held in storage for such exhibitions shall be kept in a closed box until removed therefrom for firing. See Miss. Code Ann. § 45-13-11.

(c) Any application(s) for the sale of fireworks shall set forth the following:

(1) The name of the association, organization, or corporation, together with the names of the persons to be in charge of the sales.

(2) The dates and time of the day at which the sales are to be held.

(3) A diagram/ sketch of the location to serve as a sales location. To be included in the diagram are:

A) Arrow indicating NORTH,

B) Structure location, all (streets, roads, drives, alleys, – public or private), Utilities that will service site, closest fire hydrant, any and all structures (inhabited or uninhabited) within six hundred (600) feet.

C) Ingress and egress for public, off road parking accommodations.

D) Temporarily erected structures shall be no closer than forty (40) feet to the property right-of-way.

E) Any on-site staff accommodations used at the sales location shall comply with all other ordinances and regulatory authorities.

(4) Based on the location of site, movable and immovable hazardous, distance to traffic lanes, and other specified and unspecified hazards, the Fire Official can set limitations on amount of net explosive materials that may be stored on site of the retail locations.

(5) A license fee for the sale of fireworks at each location shall be in the sum of two hundred and fifty dollars (\$250.00).

(6) A structure erected for the sale of fireworks shall comply with those requirements set forth thru this ordinance, and all other city ordinances or regulations. The structure shall be approved for occupancy, including NO SMOKING signs, EXIT signs, and FIRE EXTINGUISHERS.

(7) The Fire Department will confer with the Zoning and Planning Department to ensure neither department has any issues prior to approving the occupancy of the fireworks stand. Occupancy shall include the stocking of items for the sale.

(8) City representatives, including the Building Inspector, as well as a Fire Official, are authorized to inspect the site and make periodic follow-up checks, as deemed necessary, to ensure continued compliance.

### **SECTION 3: STORAGE, SALE, AND HANDLING**

(a) Fireworks shall not be sold or kept for sale in a place of business where paints, oils, varnishes, turpentine of gasoline, or other flammable substances are kept. Fireworks shall be stored in a room set aside for storage of fireworks only and shall have a sign over the entrance that reads, "Fireworks – No Smoking – Keep Open Flames Away." There shall be no less than two (2) approved (and fully charged) fire extinguishers kept in close proximity to the stock of fireworks where they are sold. Signs reading, "Fireworks for Sale – No Smoking Allowed" shall be displayed in the temporary structure that is selling and/or displaying fireworks. All fire extinguishers required herein shall be at least of type A standard (2A-10BC).

(b) Dates of sale shall be reflective of state law.

(c) Firework sales are seasonal sales only, within the times permitted by state law. No fireworks shall be sold or offered for sale at retail within the City of Gluckstadt before the fifteenth day of June and after the fifth day of July, and before the fifth day of December and after the second day of January of each year. Permitted holidays recognized for the purpose of sale shall be limited to the 4<sup>th</sup> day of July, the 25<sup>th</sup> day of December, the 31<sup>st</sup> day of December and the 1<sup>st</sup> day of January.

(d) Retail Sales Restricted. Persons desiring to sell fireworks at retail in the city shall secure a transient vendor permit from the Zoning Administrator and a privilege license from the City of Gluckstadt. Such permit shall be issued upon payment of the required two hundred- and fifty-dollar (\$250.00) fee.

(e) All retailers are forbidden to expose fireworks where the sun shines through glass on the merchandise displayed, except where fireworks are in the original package, and all fireworks kept for sale on front counters must remain in original packages, except where an attendant is on constant duty, or the firework is equipped with a threaded safety fuse. All retail stands will display a minimum of four (4) "No Smoking" signs in a prominent place, viewable to the public. The permittee shall be responsible for strict enforcement of the no-smoking regulation.

(f) It shall be unlawful for fireworks to be stored, kept, sold, or discharged within three hundred (300) feet of the property line of any gasoline pump, gasoline filling station, gasoline bulk station or any building in which gasoline or volatile liquids are sold. Additionally, all fireworks sales sites are required to be twenty-five hundred (2,500) feet away from other existing fireworks outlets, and five hundred (500) feet from any residential properties. Public safety, ingress, egress, and adequate parking will be factors considered by the Fire Official and Building Official before recommending any fireworks sales site for approval by the Mayor and Board of Aldermen.

(g) It shall be unlawful to offer for sale any fireworks of a type that have not been evaluated and approved for sale and use within the State of Mississippi by the state fire marshal. All new pieces of fireworks not having been evaluated by the state fire marshal shall be submitted to the state fire marshal for test and approval or rejection before being offered for sale to retailers or individuals within the city. It shall be unlawful to sell any fireworks item that is not properly labeled as to the manufacturer and contents of the item. It shall be unlawful to sell, possess, manufacture, fire, or transport, except as provided herein, all fireworks as defined herein, not bearing the label "I.C.C. or D.O.T. Class C common fireworks."

(h) It is hereby provided by this ordinance that all fireworks sales must be located in the Highway Commercial District (C-2) as defined by the City's Zoning Ordinance.

(i) It is further provided by this ordinance that all fireworks locations must have a permanent power pole with an electrical panel box, with a minimum of a 200-amp main. There are to be no generators, portable lighting such as light towers and/or generated powered light trees used for the sites main power source or lighting. Additionally, temporary signs are allowed to be displayed on site with proper permit, in accordance with regulations found in the City's adopted zoning ordinance.

(j) No fireworks vendor may establish a retail sales location at an existing business, parking lot, or other facility in which fireworks retail sales is not the primary intended use. No storage of any excess or unsold inventory will be allowed within the City of Gluckstadt after the expiration of fireworks seasons. No onsite storage trailers or containers shall be allowed; all fireworks merchandise shall be located in a secure enclosed area. Violation of this section shall be grounds for immediate revocation of the fireworks permit.

(k) Parking: any fireworks location wherein fireworks are being sold must have a parking lot constructed of an asphalt/asphalt composition or compacted limestone with a minimum of ten (10) off street parking spaces. Primary parking in the grass or impediment of traffic is strictly prohibited.

(l) It shall be unlawful for any person, firm, partnership, entity, or corporation to sell or offer for sale any type of fireworks until the Gluckstadt Planning and Zoning Department and/or Fire Official's office inspects and approves all facilities for occupancy. If any violations are found, they shall be fixed prior to allowing the stand to open.

(m) Age requirement. No fireworks shall be sold to any person under the age of sixteen (16) years. All persons involved in the sale of fireworks shall be at least eighteen (18) years of age.

(n) No fireworks shall be sold to any intoxicated person or any individual suspected to be under the influence of alcohol or drugs.

(o) In addition to the requirements set forth herein, this ordinance does hereby incorporate any and all provisions of the law pertaining to Section 45-13-1 through Section 45-13-15 of the Mississippi Code of 1972 Annotated.

#### **SECTION 4: USAGE OF FIREWORKS**

The discharging, shooting, and igniting of Class “C” Common fireworks within the municipal limits of the City of Gluckstadt is limited to permitted holidays as defined above. It shall be unlawful for any person to shoot, discharge, fire, explode or otherwise use any fireworks on or in any of the streets, sidewalks, alleys, residential areas or elsewhere within the City limits, except during the permitted dates and times listed under “permitted holidays” above. Any individual violating this provision shall be punished by a fine not to exceed fifty dollars (\$50.00), per each occurrence.

It is unlawful to use fire or discharge any fireworks along the route of and during any parade or in any place of public assembly unless it is an event as described and authorized by permit. If the person in charge of or sponsoring any lawful public gathering, demonstration or celebration, desires to have a fireworks display at such gathering, demonstration or celebration, the Mayor and Board of Aldermen may approve issuance of a permit authorizing the possession, and use of fireworks for such display, after first finding and determining that a reasonably competent person will be in charge of such display and that such display can be conducted at any such gathering, demonstration or celebration with reasonable safety.

It is unlawful at any time to throw, toss or aim any fireworks at any person, animal, or vehicle, nor shall any persons throw the same from a motor vehicle.

It is unlawful to explode any fireworks within three hundred (300) yards of any railroad depot or warehouse as described under Mississippi Code Section 97-37-27.

It shall be unlawful to explode or ignite fireworks within five hundred (500) feet of any church or school (while in session or during a church or school sponsored event), hospital, asylum, or within three hundred (300) feet of where fireworks are offered for sale.

#### **SECTION 5: VIOLATION AND PENALTIES**

(a) Violation of any provision of this ordinance shall be unlawful and shall be punishable by a fine of not more than \$1,000, or by imprisonment for a period not exceeding 90 days, or by both such fine and imprisonment in the discretion of the court. Each violation shall constitute a separate offense.


(b) In addition, any violations of the provisions of this ordinance which result in a conviction in the Gluckstadt Municipal Court, or any state court within Mississippi, shall bar the person so convicted from obtaining city permits and licenses relating to fireworks for a period of two years.

#### **SECTION 6: EFFECTIVE DATE**

This Ordinance shall be effective one (1) month from and after the date of its adoption and following newspaper publication as provided by Miss. Code Ann. § 21-13-11 (Rev. 2015).

SO ORDAINED, THIS THE 10th DAY OF MAY, 2022.



  
 WALTER C. MORRISON, IV  
 MAYOR

Attest:

  
 LINDSAY D. KELLUM  
 CITY CLERK



	Aye	Nay
ALDERWOMAN BATES	<u>✓</u>	<u>      </u>
ALDERMAN POWELL	<u>✓</u>	<u>      </u>
ALDERMAN SLAY	<u>✓</u>	<u>      </u>
ALDERMAN TAYLOR	<u>      </u>	<u>✓</u>
ALDERWOMAN WILLIAMS	<u>✓</u>	<u>      </u>

## ORDINANCE No. \_\_\_\_\_

**AMENDED MUNICIPAL FIREWORKS ORDINANCE**  
**ORDINANCE OF THE MAYOR AND BOARD OF ALDERMEN OF THE CITY OF**  
**GLUCKSTADT, MISSISSIPPI, REGULATING THE SALE AND USAGE OF**  
**FIREWORKS WITHIN MUNICIPAL LIMITS**

**WHEREAS**, Mississippi Code Section 21-19-5 grants the power to the City of Gluckstadt's Mayor and Board of Alderman as the governing authorities to prohibit or regulate the sale or use of fireworks as defined therein; and

**WHEREAS**, the City of Gluckstadt previously adopted an Ordinance Prohibiting the Sale and Regulating the Usage of Fireworks and now wishes for said Ordinance to be repealed in its entirety; and

**WHEREAS**, the City of Gluckstadt now wishes for the previous Ordinance to be amended, with certain sections repealed; and

**WHEREAS**, firework sales shall require an approved Conditional Use permit and all required permits and inspections as set forth herein, and shall be limited to areas zoned C-2; and

**WHEREAS**, it is the intent of the City of Gluckstadt to address the spirit of International Fire Code, while not impeding the opportunity for free commerce, but in keeping with the responsibility of the City to provide code enforcement.

Now, therefore, be it ORDAINED by the Mayor and Board of Alderman for the City of Gluckstadt, Mississippi, as follows:

**SECTION 1: DEFINITIONS**

**CITY:** City of Gluckstadt

**FIRE OFFICIALS:** The Fire Chief, Fire Marshal, or their Designee of the South Madison County Fire Protection District.

**FIRE DEPARTMENT:** The South Madison County Fire Protection District, also known as the "Gluckstadt Fire Department," to include all authorized representatives of the department.

**PLANNING AND ZONING DEPARTMENT:** The City of Gluckstadt Planning and Zoning department, to include all authorized representatives of the department.

**CLASSIFICATION OF FIREWORKS:**

Class "C" Common Fireworks (Designated by Interstate Commerce Commission) - Fireworks are labeled by said commission with the Class C common fireworks label, and which contain a statutorily restricted amount of pyrotechnic composition and were designed to produce an audible effect or pyrotechnic display by combustion; their explosive composition cannot exceed two (2) grains in weight; by way of example they shall include such items as cone fountains, fire

crackers, small Chinese crackers, skyrockets;-bottle-rockets,-small- non-explosive Roman candles and rockets, pyrotechnics commonly known as "snap pops," or other matter or substances similar thereto. For purposes of this section the term "fireworks" shall also include such 1.4G fireworks which comply with the construction, chemical composition and labeling regulations of the DOT for Fireworks, UN 0336, and the U.S. Consumer Product Safety Commission as set forth in CPSC 16 CFR Parts 1500 and 1507, but does not include 1.3G fireworks, the sale of which is not permitted by this ordinance.

Excluded from the prohibition of this ordinance is the sale of toy pistols, toy canes, toy guns or other devices in which paper caps manufactured in accordance with United States Interstate Commerce Commission regulations for packing and shipping of toy paper caps are used, and toy pistol paper caps manufactured as provided in this subsection, the sale and use of which shall be permitted at all times.

**Class "B" Fireworks** - An exhibited and professional fireworks display which must be shot under controlled supervision by a licensed professional pyrotechnic operator, which may be part of any public entertainment sponsored by the City, any other public civic organization or private citizen desiring to have a fireworks display will be allowed within the City. Any public civic organization or private citizen shall be required to obtain approval from the Board of Aldermen prior to the conducting of any fireworks display or exhibition. Any such approval by the Board of Aldermen shall be conditioned upon the satisfaction by the applicant of all requirements set forth in Mississippi Code Ann. Section 45-13-11 regarding the permitting of fireworks exhibitions, as well as any other conditions deemed necessary by the Board, including but not limited to the requirement of a cash deposit or bond for damages or injuries caused by the display, or provision for reimbursement to the City for mobilization of fire equipment and personnel to maintain safety at any such display.

**NET EXPLOSIVE WEIGHT (net weight).** The weight of explosive material expressed in pounds. The net explosive weight is the aggregate amount of explosive material contained within buildings, magazines, structures, or any portions thereof, used to establish quantity-distance relationships.

#### **PERMITTED HOLIDAYS:**

INDEPENDENCE DAY (4<sup>th</sup> of JULY); 8:00 AM – 11:00 PM

CHRISTMAS HOLIDAY (25<sup>th</sup> of DECEMBER); 8:00 AM – 11:00 PM

NEW YEAR'S HOLIDAY (31<sup>st</sup> of DECEMBER and 1<sup>st</sup> of JANUARY); 8:00 AM – MIDNIGHT

## **SECTION 2: APPLICATION (SALES OF CLASS "C" COMMON FIREWORKS)**

### **APPLICATION FOR PERMITS.**

(a) An applicant for permit for sale of fireworks shall file a written application duly subscribed and sworn to by the applicant. Additionally, an Applicant must obtain a Conditional Use permit secured from the Planning and Zoning Department for fireworks stands in any C-2 zone, and the Applicant must also obtain a Transient Vendor privilege license and notify the Police Department in accordance with Section 406.08 of the City's adopted Zoning Ordinance. Once approved by the Board of Aldermen, a Conditional Use permit will remain valid, unless

modifications are made to the site, the temporary structure, or the location. Ownership and operation of the Conditional Use may not be transferred, subleased, sold, or conveyed to any other individual, firm or entity. Any such change in ownership or operation will necessitate an application for a new Conditional Use permit.

(b) Any permit granted by the Board of Aldermen under which fireworks sale, possession, or use is allowed shall be issued in compliance with Section 1123 of the National Fire Protection Association, as revised, and the Mississippi Fire Prevention Code, as revised. Such permits shall require that the persons in charge of such exhibitions shall be experienced in the handling of fireworks and the members of the public attending the exhibitions shall be kept at a safe distance therefrom. Any fireworks held in storage for such exhibitions shall be kept in a closed box until removed therefrom for firing. See Miss. Code Ann. § 45-13-11.

(c) Any application(s) for the sale of fireworks shall set forth the following:

(1) The name of the association, organization, or corporation, together with the names of the persons to be in charge of the sales.

(2) The dates and time of the day at which the sales are to be held.

(3) A diagram/ sketch of the location to serve as a sales location. To be included in the diagram are:

A) Arrow indicating NORTH,

B) Structure location, all (streets, roads, drives, alleys, – public or private), Utilities that will service site, closest fire hydrant, any and all structures (inhabited or uninhabited) within six hundred (600) feet.

C) Ingress and egress for public, off road parking accommodations.

D) Temporarily erected structures shall be no closer than forty (40) feet to the property right-of-way.

E) Any on-site staff accommodations used at the sales location shall comply with all other ordinances and regulatory authorities.

(4) Based on the location of site, movable and immoveable hazardous, distance to traffic lanes, and other specified and unspecified hazards, the Fire Official can set limitations on amount of net explosive materials that may be stored on site of the retail locations.

(5) A license fee for the sale of fireworks at each location shall be in the sum of two hundred and fifty dollars (\$250.00).

(6) A structure erected for the sale of fireworks shall comply with those requirements set forth thru this ordinance, and all other city ordinances or regulations. The structure shall be approved for occupancy, including NO SMOKING signs, EXIT signs, and FIRE EXTINGUISHERS.

(7) The Fire Department will confer with the Zoning and Planning Department to ensure neither department has any issues prior to approving the occupancy of the fireworks stand. Occupancy shall include the stocking of items for the sale.

(8) City representatives, including the Building Inspector, as well as a Fire Official, are authorized to inspect the site and make periodic follow-up checks, as deemed necessary, to ensure continued compliance.

### **SECTION 3: STORAGE, SALE, AND HANDLING**

(a) Fireworks shall not be sold or kept for sale in a place of business where paints, oils, varnishes, turpentine of gasoline, or other flammable substances are kept. Fireworks shall be stored in a room set aside for storage of fireworks only and shall have a sign over the entrance that reads, "Fireworks – No Smoking – Keep Open Flames Away." There shall be no less than two (2) approved (and fully charged) fire extinguishers kept in close proximity to the stock of fireworks where they are sold. Signs reading, "Fireworks for Sale – No Smoking Allowed" shall be displayed in the temporary structure that is selling and/or displaying fireworks. All fire extinguishers required herein shall be at least of type A standard (2A-10BC).

(b) Dates of sale shall be reflective of state law.

(c) Firework sales are seasonal sales only, within the times permitted by state law. No fireworks shall be sold or offered for sale at retail within the City of Gluckstadt before the fifteenth day of June and after the fifth day of July, and before the fifth day of December and after the second day of January of each year. Permitted holidays recognized for the purpose of sale shall be limited to the 4<sup>th</sup> day of July, the 25<sup>th</sup> day of December, and the 1<sup>st</sup> day of January.

(d) Retail Sales Restricted. Persons desiring to sell fireworks at retail in the city shall secure a transient vendor permit from the Zoning Administrator and a privilege license from the City of Gluckstadt. Such permit shall be issued upon payment of the required two hundred- and fifty-dollar (\$250.00) fee.

(e) All retailers are forbidden to expose fireworks where the sun shines through glass on the merchandise displayed, except where fireworks are in the original package, and all fireworks kept for sale on front counters must remain in original packages, except where an attendant is on constant duty, or the firework is equipped with a threaded safety fuse. All retail stands will display a minimum of four (4) "No Smoking" signs in a prominent place, viewable to the public. The permittee shall be responsible for strict enforcement of the no-smoking regulation.

(f) It shall be unlawful for fireworks to be stored, kept, sold, or discharged within three hundred (300) feet of the property line of any gasoline pump, gasoline filling station, gasoline bulk station or any building in which gasoline or volatile liquids are sold. Additionally, all fireworks sales sites are required to be four thousand (4,000) feet away from other existing fireworks outlets, and five hundred (500) feet from any residential properties. Public safety, ingress, egress, and adequate parking will be factors considered by the Fire Official and Building Official before recommending any fireworks sales site for approval by the Mayor and Board of Aldermen.

(g) It shall be unlawful to offer for sale any fireworks of a type that have not been tested and approved for sale and use within the State of Mississippi by the state fire marshal. All new pieces of fireworks not having been tested by the state fire marshal shall be submitted to the state fire marshal for test and approval or rejection before being offered for sale to retailers or individuals within the city. It shall be unlawful to sell any fireworks item that is not properly labeled as to the manufacturer and contents of the item. It shall be unlawful to sell, possess, manufacture, fire, or transport, except as provided herein, all fireworks as defined herein, not bearing the label "I.C.C. or D.O.T. Class C common fireworks."

(h) It is hereby provided by this ordinance that all fireworks sales must receive a conditional use permit and be located in the Highway Commercial District (C-2) as defined by the City's Zoning Ordinance.

(i) It is further provided by this ordinance that all fireworks locations must have a permanent power pole with an electrical panel box, with a minimum of a 200-amp main. There are to be no generators, portable lighting such as light towers and/or generated powered light trees used for the sites main power source or lighting. Additionally, temporary signs are allowed to be displayed on site with proper permit, in accordance with regulations found in the City's adopted zoning ordinance.

(j) No fireworks vendor may establish a retail sales location at an existing business, parking lot, or other facility in which fireworks retail sales is not the primary intended use. No storage of any excess or unsold inventory will be allowed within the City of Gluckstadt after the expiration of fireworks seasons. No onsite storage trailers or containers shall be allowed; all fireworks merchandise shall be located in a secure enclosed area. Violation of this section shall be grounds for immediate revocation of the fireworks permit.

(k) Parking: any fireworks location wherein fireworks are being sold must have a parking lot constructed of an asphalt/asphalt composition or compacted limestone with a minimum of ten (10) off street parking spaces. Primary parking in the grass or impediment of traffic is strictly prohibited.

(l) It shall be unlawful for any person, firm, partnership, entity or corporation to sell or offer for sale any type of fireworks until the Gluckstadt Planning and Zoning Department and/or Fire Official's office inspects and approves all facilities for occupancy. If any violations are found, they shall be fixed prior to allowing the stand to open.

(m) Age requirement. No fireworks shall be sold to any person under the age of sixteen (16) years. All persons involved in the sale of fireworks shall be at least eighteen (18) years of age.

(n) No fireworks shall be sold to any intoxicated person or any individual suspected to be under the influence of alcohol or drugs.

(o) In addition to the requirements set forth herein, this ordinance does hereby incorporate any and all provisions of the law pertaining to Section 45-13-1 through Section 45-13-15 of the Mississippi Code of 1972 Annotated.

## **SECTION 4: USAGE OF FIREWORKS**

The discharging, shooting, and igniting of Class “C” Common fireworks within the municipal limits of the City of Gluckstadt is limited to permitted holidays as defined above. It shall be unlawful for any person to shoot, discharge, fire, explode or otherwise use any fireworks on or in any of the streets, sidewalks, alleys, residential areas or elsewhere within the City limits, except during the permitted dates and times listed under “permitted holidays” above. Any individual violating this provision shall be punished by a fine not to exceed fifty dollars (\$50.00), per each occurrence.

It is unlawful to use fire or discharge any fireworks along the route of and during any parade or in any place of public assembly unless it is an event as described and authorized by permit. If the person in charge of or sponsoring any lawful public gathering, demonstration or celebration, desires to have a fireworks display at such gathering, demonstration or celebration, the Mayor and Board of Aldermen may approve issuance of a permit authorizing the possession, and use of fireworks for such display, after first finding and determining that a reasonably competent person will be in charge of such display and that such display can be conducted at any such gathering, demonstration or celebration with reasonable safety.

It is unlawful at any time to throw, toss or aim any fireworks at any person, animal, or vehicle, nor shall any persons throw the same from a motor vehicle.

It is unlawful to explode any fireworks within three hundred (300) yards of any railroad depot or warehouse as described under Mississippi Code Section 97-37-27.

It shall be unlawful to explode or ignite fireworks within five hundred (500) feet of any church or school (while in session or during a church or school sponsored event), hospital, asylum, or within three hundred (300) feet of where fireworks are offered for sale.

## **SECTION 5: VIOLATION AND PENALTIES**

(a) Violation of any provision of this ordinance shall be unlawful and shall be punishable by a fine of not more than \$1,000, or by imprisonment for a period not exceeding 90 days, or by both such fine and imprisonment in the discretion of the court. Each violation shall constitute a separate offense.

(b) In addition, any violations of the provisions of this ordinance which result in a conviction in the Gluckstadt Municipal Court, or any state court within Mississippi, shall bar the person so convicted from obtaining city permits and licenses relating to fireworks for a period of two years.

## **SECTION 6: REPEALED**

Any provision of the previous fireworks ordinance, or of any other ordinance, which conflicts with any provision of this amended ordinance is hereby repealed.

**SECTION 7: EFFECTIVE DATE**

This Ordinance shall be effective thirty (30) days after its passage and after publication of same as required in § 21-13-11 Mississippi Code of 1972.

ORDAINED, ADOPTED AND APPROVED by the Mayor and Board of Aldermen of the City of Gluckstadt, Madison County, Mississippi at its regular meeting held on the \_\_\_\_\_ day of \_\_\_\_\_, 2026.

MOTION made to adopt the foregoing Ordinance was made by Alderman \_\_\_\_\_ and SECONDED by Alderman \_\_\_\_\_ and the foregoing having first been reduced to writing, was submitted to a Roll Call Vote, the result was as follows:

Alderman Bates voted:	Aye / Nay
Alderman Powell voted:	Aye / Nay
Alderman Campbell voted:	Aye / Nay
Alderman Taylor voted:	Aye / Nay
Alderman Williams voted:	Aye / Nay

WHEREUPON, the Mayor declared the Motion had carried and that the Ordinance was adopted.

SO ORDAINED, ADOPTED, AND APPROVED by the Mayor and Board of Alderman of the City of Gluckstadt, Madison County, Mississippi at its regular meeting held on the \_\_\_\_\_ day of \_\_\_\_\_, 2026.

\_\_\_\_\_  
WALTER C. MORRISON, IV  
MAYOR

Attest:

\_\_\_\_\_  
LINDSAY D. KELLUM  
CITY CLERK

[SEAL]



**ORDINANCE No. \_\_\_\_\_**

**ORDINANCE OF THE MAYOR AND BOARD OF ALDERMEN OF  
THE CITY OF GLUCKSTADT, MISSISSIPPI AMENDING SECTIONS 301 AND 2202  
OF THE ZONING ORDINANCE OF THE CITY OF GLUCKSTADT, MISSISSIPPI**

**WHEREAS**, the Mayor and Board of Aldermen of the City of Gluckstadt, Mississippi did lawfully adopt a Zoning Ordinance on December 16, 2021, after proper notice and a public hearing; and,

**WHEREAS**, the Mayor and Board of Aldermen now desire to amend certain sections of the City's Zoning Ordinance; and,

**WHEREAS**, in the time and manner provided for by law, the City of Gluckstadt did cause a public hearing to be noticed and published and set for January 13, 2026, at 6:00 o'clock p.m. in City Hall before the Mayor and Board of Aldermen to consider a text amendment to the City's Zoning Ordinance; and,

**WHEREAS**, at the time date and place specified in the notice, the Mayor and Board of Aldermen of the City of Gluckstadt, Mississippi did conduct a full and complete hearing and thereafter did recommend that the Zoning Ordinance of the City of Gluckstadt, Mississippi be amended as set out hereinafter; and,

**WHEREAS**, the Mayor and Board of Aldermen find that there exists both a public need and a change in character of the neighborhood for a text amendment to the City's Zoning Ordinance; and

**NOW THEREFORE BE IT ORDAINED**, by the Mayor and Board of Aldermen of the City of Gluckstadt, Mississippi, that the following sections are hereby adopted as amendments to the Official Zoning Ordinance of the City of Gluckstadt, Mississippi, as provided in the following sections:

**SECTION 1**

That the matters and facts stated in the preamble hereof are found to be true and correct.

**SECTION 2**

Amend "ARTICLE III: INTERPRETATION AND DEFINITIONS" as follows:

1. Amend "SECTION 301 – DEFINITIONS" by adding thereto the following definitions:

**"Fireworks Stand:** A permanent building or temporary structure, tent, or similar facility, for the seasonal, retail sale of Class "C" Common Fireworks, as defined by

applicable federal and state law and municipal ordinance, during the periods authorized by state law and municipal ordinance.

### **SECTION 3**

Amend “ARTICLE XXII: HIGHWAY COMMERCIAL DISTRICT (C-2)” as follows:

1. Amend “SECTION 2202 – CONDITIONAL USES AND STRUCTURES” so that paragraph “F” now reads as follows:

“Fireworks stands. A fireworks stand shall operate only during periods permitted by state law and municipal ordinance and shall be subject to all required approvals, including but not limited to a transient vendor permit, fire safety approval, and any other permits required by municipal ordinance. Fireworks stands shall comply with all separation distances, safety standards, parking requirements, and operational limitations established by municipal ordinance, and shall not constitute a permanent use of land or structure.”

### **SECTION 4**

This Ordinance shall take effect and be in force one (1) month from and after passage as provided by law.

MOTION made to adopt the foregoing Ordinance was made by Alderman \_\_\_\_\_ and SECONDED by Alderman \_\_\_\_\_ and the foregoing having first been reduced to writing, was submitted to a Roll Call Vote, the result was as follows:

Alderman Bates voted:	Aye / Nay
Alderman Powell voted:	Aye / Nay
Alderman Campbell voted:	Aye / Nay
Alderman Taylor voted:	Aye / Nay
Alderman Williams voted:	Aye / Nay

WHEREUPON, the Mayor declared the Motion had carried and that the Ordinance was adopted.

SO ORDAINED, ADOPTED, AND APPROVED by the Mayor and Board of Alderman of the City of Gluckstadt, Madison County, Mississippi at its regular meeting held on the \_\_\_\_\_ day of \_\_\_\_\_, 2026.

\_\_\_\_\_  
Walter C. Morrison, Mayor of the  
City of Gluckstadt, Mississippi

ATTEST:

---

Lindsay Kellum, City Clerk

[ S E A L ]

**From:** [Zachary Giddy](#)  
**To:** [Chip Williams](#); [Jayce Powell](#); [Jayce Powell Personal Email](#); [Jessie Campbell](#); [John Taylor](#); [John Taylor](#); [Miya Bates](#); [Miya Bates Personal Email](#); [Walter Morrison](#); [Walter Morrison](#)  
**Cc:** [Lindsay Kellum](#); [Mike McCollum](#); [Lindsay Kellum](#); [John Scanlon](#); [Missy Huddleston](#)  
**Subject:** Fire Works Ordinance  
**Date:** Wednesday, December 10, 2025 6:17:18 PM  
**Attachments:** [Fireworks Ordinance \(For Review\).pdf](#)

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Mayor and Board:

Please see the attached Fire Works Ordinance that was adopted in 2022, prior to the ordinance adopted which prohibited the sale of fireworks. I believe this Ordinance will provide a good starting point for the new fire works ordinance to be considered during the January meeting. If there are any provisions that you would like revised, removed, etc., please let me know as soon as possible so that I can prepare the new ordinance.

Thanks.

Regards,

***Zachary L. Giddy***



800 Avery Blvd., Ste. 101

Ridgeland, MS 39157

(601) 957-2600

[zgiddy@millsscanlon.com](mailto:zgiddy@millsscanlon.com)

[www.millsscanlon.com](http://www.millsscanlon.com)

**ORDINANCE OF THE MAYOR AND BOARD OF ALDERMEN OF  
THE CITY OF GLUCKSTADT, MISSISSIPPI AMENDING THE  
SIGN REGULATIONS**

**WHEREAS**, the Mayor and Board of Aldermen of the City of Gluckstadt, Mississippi did lawfully adopt an ordinance establishing sign regulations on June 13, 2023; and,

**WHEREAS**, the Mayor and Board of Aldermen now desire to amend certain sections of the sign regulations; and,

**WHEREAS**, the City of Gluckstadt is authorized by the statutes of the State of Mississippi, Section 21-19-1 of the Mississippi Code of 1972, as amended, to adopt regulations to secure the general welfare of the municipality;

**NOW THEREFORE BE IT ORDAINED**, by the Mayor and Board of Aldermen of the City of Gluckstadt, Mississippi, that the following sections are hereby adopted as amendments to the sign regulations adopted by the City of Gluckstadt, Mississippi, as provided in the following sections:

**SECTION 1**

That the matters and facts stated in the preamble hereof are found to be true and correct.

**SECTION 2**

Amend Section VIII – Exempt Signs to add the following to subparagraph VIII.A:

11. Any business licensed to conduct business within the City of Gluckstadt shall be permitted one (1) temporary business sign, with no permit fee required, which may be portable in nature, subject to the following conditions:
  - (a) The temporary sign shall not exceed four (4) feet in height and two and one-half (2.5) feet in width.
  - (b) The temporary sign shall only be displayed during the business's normal hours of operation and shall be removed from public view at the close of normal business hours.
  - (c) Temporary signs shall be placed entirely on private property and shall not obstruct or interfere with:
    - Parking spaces, driving aisles, or any point of ingress and egress;
    - Sidewalks or pedestrian pathways;
    - Building entrances, exits, or required egress; and

- Visibility for motorists or pedestrians.
- (d) The temporary sign shall be non-illuminated, non-flashing, and shall not contain moving, animated, or electronic elements.
- (e) The sign shall be temporary in nature, shall not be permanently affixed to the ground or structure, and shall not require a sign permit.
- (f) The sign shall be maintained in good condition and shall not be damaged, deteriorated, or unsightly as determined by the City.
- (g) The City reserves the right to require removal of any temporary sign that creates a safety hazard, nuisance, or violates any other applicable City ordinance.

### **SECTION 3**

This ordinance shall be effective thirty (30) days from and after its passage.

MOTION made to adopt the foregoing Ordinance was made by Alderman \_\_\_\_\_ and SECONDED by Alderman \_\_\_\_\_ and the foregoing having first been reduced to writing, was submitted to a Roll Call Vote, the result was as follows:

Alderman Bates voted:	Aye / Nay
Alderman Powell voted:	Aye / Nay
Alderman Campbell voted:	Aye / Nay
Alderman Taylor voted:	Aye / Nay
Alderman Williams voted:	Aye / Nay

WHEREUPON, the Mayor declared the Motion had carried and that the Ordinance was adopted.

SO ORDAINED, ADOPTED, AND APPROVED by the Mayor and Board of Alderman of the City of Gluckstadt, Madison County, Mississippi at its regular meeting held on the \_\_\_\_\_ day of \_\_\_\_\_, 2026.

\_\_\_\_\_  
Walter C. Morrison, Mayor of the  
City of Gluckstadt, Mississippi

ATTEST:

\_\_\_\_\_  
Lindsay Kellum, City Clerk

[ S E A L ]



## CITY OF GLUCKSTADT

MISSISSIPPI

OFFICE OF THE CITY CLERK

### MEMORANDUM

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**TO:** Mayor & Board of Aldermen

**FROM:** Lindsay Kellum, City Clerk

**DATE:** January 13, 2026

**SUBJECT:** General Update, City Administration

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The City Clerk will provide a brief update on the below city administration matters and answer questions.

Items:

- Finance & Budget
- Grants Management
- Accounts Payable
- Fixed Assets
- Training & Education
- Human Resources and Payroll
- Communications and Website
- Public Records Requests
- Events & Chamber of Commerce



## CITY OF GLUCKSTADT

MISSISSIPPI  
OFFICE OF THE CITY CLERK

### MEMORANDUM

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**TO:** Mayor & Board of Alderman

**FROM:** Scott Maugh, Deputy City Clerk

**DATE:** 01/08/2026

**SUBJECT:** Privilege & Transient Vendor License Report (Monthly Update)

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From December 1, 2025, to December 31, 2025, the City of Gluckstadt processed twenty-nine (29) Regular Privilege Licenses.

The amount of fees collected in 2025 to date is as follows:

Privilege: \$45,398.04  
Transient: \$0



===== DISTRIBUTION =====									
ID	ISSUED TO	DATE	PACKET	TYPE	FEE	PENALTY	TAX	INTEREST	TOTAL
0000137	HAZEL D. WHITING LL	12/08/2025	00421	Payment	20.00-	.00	.00	.00	20.00-
0000139	ACE OF GRACE, LLC	12/31/2025	00431	Payment	50.00-	.00	.00	.00	50.00-
0000141	INDUSTRIAL AUTOMATI	12/29/2025	00429	Payment	92.50-	.00	.00	.00	92.50-
0000142	ALPHA FINANCIAL & T	12/31/2025	00431	Payment	20.00-	.00	.00	.00	20.00-
0000144	GLUCKSTADT SECURITY	12/01/2025	00419	Payment	20.00-	.00	.00	.00	20.00-
0000145	TELPRO COMMUNICATIO	12/31/2025	00431	Payment	30.00-	.00	.00	.00	30.00-
0000149	HYDRONIC TECHNOLOGY	12/04/2025	00420	Payment	30.00-	.00	.00	.00	30.00-
0000232	SIMPLI NAIL SPA LLC	12/04/2025	00420	Payment	20.00-	.00	.00	.00	20.00-
0000233	COLORIZE HAIR STUDI	12/09/2025	00422	Payment	30.00-	.00	.00	.00	30.00-
0000234	HEALING HANDS REHAB	12/15/2025	00423	Payment	48.00-	.00	.00	.00	48.00-
0000238	YUMI ASIAN KITCHEN,	12/01/2025	00419	Payment	30.00-	.00	.00	.00	30.00-
0000239	CARR PLUMBING SUPPL	12/30/2025	00430	Payment	830.00-	.00	.00	.00	830.00-
0000240	PURSUIT PROPERTIES,	12/15/2025	00423	Payment	30.00-	.00	.00	.00	30.00-
0000245	CHILDREN'S ACADEMY	12/16/2025	00424	Payment	105.00-	.00	.00	.00	105.00-
0000248	POWDER KEG INDUSTRI	12/08/2025	00421	Payment	30.00-	.00	.00	.00	30.00-
0000249	YARD SARGE, LLC	12/30/2025	00430	Payment	30.00-	.00	.00	.00	30.00-
0000256	MISSISSIPPI TENT &	12/22/2025	00427	Payment	102.00-	.00	.00	.00	102.00-
0000262	BANKPLUS	12/30/2025	00430	Payment	30.00-	.00	.00	.00	30.00-
0000267	PS ROOF LAB, LLC	12/22/2025	00427	Payment	57.00-	.00	.00	.00	57.00-
0000270	AUTOZONE	12/30/2025	00430	Payment	340.00-	.00	.00	.00	340.00-
0000330	LHEART ENTERPRISES,	12/30/2025	00430	Payment	49.95-	.00	.00	.00	49.95-
0000334	KESTENBAUM HOLDINGS	12/01/2025	00419	Payment	20.00-	.00	.00	.00	20.00-
0000335	YANDELL SHELL LLC	12/09/2025	00422	Payment	65.00-	.00	.00	.00	65.00-
0000337	WEEMS MCDONALD LLC	12/08/2025	00421	Payment	30.00-	.00	.00	.00	30.00-

Section 8, IB)

===== DISTRIBUTION =====									
ID	ISSUED TO	DATE	PACKET	TYPE	FEE	PENALTY	TAX	INTEREST	TOTAL
0000339	CLINTON NUTRITION C	12/18/2025	00425	Payment	20.00-	.00	.00	.00	20.00-
0000384	DELTA GLASS LLC	12/01/2025	00419	Payment	20.00-	.00	.00	.00	20.00-
0000385	WREN & IVY	12/04/2025	00420	Payment	35.75-	.00	.00	.00	35.75-
0000386	BANK OF COMMERCE	12/15/2025	00423	Payment	20.00-	.00	.00	.00	20.00-
0000387	QUAD INTERMED COMPA	12/23/2025	00428	Payment	30.00-	.00	.00	.00	30.00-

Section 8, 1B)

===== F E E C O D E T O T A L S B Y T Y P E =====

===== DISTRIBUTION =====							
FEE CODE	TYPE	COUNT	FEE	PENALTY	TAX	INTEREST	TOTAL
BEER FLAT	Payment	1	15.00CR	0.00	0.00	0.00	15.00CR
Over11	Payment	5	361.95CR	0.00	0.00	0.00	361.95CR
Schdl-A	Payment	7	1,428.25CR	0.00	0.00	0.00	1,428.25CR
Schdl-B	Payment	17	430.00CR	0.00	0.00	0.00	430.00CR
GRAND TOTAL FOR PERIOD							2,235.20CR

===== T O T A L S B Y T R A N S A C T I O N T Y P E =====

===== DISTRIBUTION =====							
TYPE	COUNT	FEE	PENALTY	TAX	INTEREST	TOTAL	
Payment	29	2,235.20CR	0.00	0.00	0.00	2,235.20CR	
TOTAL FOR PERIOD	29						2,235.20CR

Section 8, 1B)

## SELECTION CRITERIA

Section 8, 1B)

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REPORT OPTIONS:

LICENSE RANGE: THRU ZZZZZZZZZZ  
PACKET RANGE: 0 THRU 99999  
TRANSACTION RANGE: 12/01/2025 THRU 12/31/2025  
LICENSE STATUS: All  
LICENSE CODE: All  
FEE CODE: All

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## PRINT OPTIONS:

PRINT TOTALS ONLY: NO

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## TRANSACTION TYPE OPTIONS:

ALL: YES  
PAYMENT: YES  
REFUND CHECK: YES  
REVERSE PAYMENT: YES  
REVERSE REFUND: YES

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## ADJUSTMENT OPTIONS:

ADJUSTMENT CODE: ALL

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\*\*\* END OF REPORT \*\*\*

CITY OF GLUCKSTADT ACTIVE GRANTS											
REPORT: CITY CLERK'S OFFICE (GRANT ADMINISTRATION)											
NO.	DEPARTMENT	GRANT NAME & SOURCE	GRANT FUNDING YEAR	PURPOSE	AMOUNT	AWARDED	BREAKDOWN OF ITEMS REQUESTED	MATCH	STATUS	EXPENDED FUNDS TO DATE	REIMBURSEMENT TO DATE
1	POLICE	STATE AND LOCAL CYBER SECURITY GRANT PROGRAM	FY2022	CYBERSECURITY PROTECTION (CITY SYSTEMS)	\$53,010.00	9/1/2025	\$11,700.00 - CAP. OUTLAY EQUIPMENT (FIREWALL, POWER SUPPLY); \$41,310.00 - CONTRACTUAL SERVICES: INTRUSION DETECTION/PREVENTION SOFTWARE	NONE	UPS EQUIPMENT QUOTES RECEIVED & QUOTE FROM THE20 FOR CONTRACTUAL SERVICES BOA APPROVED 12/9/25 & ORDERED; PENDING RECEIPT OF ITEMS; Q1 REPORT SUBMITTED 12/8/25.	\$7,392.71	NONE AT THIS TIME
2	POLICE	MISSISSIPPI OFFICE OF HIGHWAY SAFETY: POLICE TRAFFIC SERVICES GRANT	FY2026	PERSONNEL & EQUIPMENT	\$39,999.00	7/23/2025	\$35,000.00 - PERSONNEL: SALARIES & OVERTIME; \$45.00 - CONTRACTUAL SERVICES (SHIPPING); \$4,954.00 - CAP. OUTLAY EQUIPMENT (VEHICLE OUTFITTING)	NONE	GRANT PERIOD & REPORTING STARTED 10/1/25 (PD); REIM. SUBMISSIONS FILED FOR OCT AND NOV; DEC. REIM. PENDING; 1ST QUARTERLY REPORT SUBMITTED 12/15/25.	\$4,434.96	NONE AT THIS TIME
3	POLICE	PATRICK LEAHY BULLETPROOF VEST PARTNERSHIP	FY2025	POLICE PROTECTION VESTS	\$5,731.64	9/26/2024	\$5,731.64 - CAPITAL OUTLAY EQUIPMENT (OFFICER, VESTS)	\$2,865.82	\$1730.00 PURCHASE ORDER ISSUED 10/2/25; OCTOBER REIMBURSEMENT PENDING SUBMISSION - RECEIVED ITEMS, ON 1/13/26 CLAIMS; WAITING ON PROOF OF PAYMENT; NEW FY25 APPLICATION WAS SUBMITTED 11/21/25 FOR 3 VESTS, \$2595.00 WITH 50% MATCH.	\$3,079.41	\$414.50
4	PUBLIC WORKS	FEDERAL HIGHWAY ADMINISTRATION: SURFACE TRANSPORTATION BLOCK GRANT (MDOT/LPA)	FY2024	CALHOUN STATION PKWY OVERLAY	\$759,000.00	5/14/2024	CONSTRUCTION PHASE OF CALHOUN STATION PKWY OVERLAY PROJECT	\$189,750.00	PRELIMINARY CONSTRUCTION PHASE BEGAN 12/1/25.	\$114,190.86	NONE AT THIS TIME
5	POLICE / EMA	HOMELAND SECURITY GRANT PROGRAM	FY2025	MOBILE COMMAND TRAILER & GENERATOR	\$30,000.00	10/1/2025	\$30,000.00 - CAP. OUTLAY TRAILERS AND EQUIPMENT	NONE	PURCHASE REQUEST APPROVED BY BOA UNDER 11/10/25 CONSENT; PURCHASE ORDER ISSUED 11/21/25; PENDING DELIVERY; Q1 REPORT SUBMITTED 12/8/25.	\$31,323.00	NONE TO DATE

6	POLICE	HOMELAND SECURITY GRANT PROGRAM	FY2025	POLICE EQUIPMENT (MOBILE RADIOS & CHARGERS)	\$49,150.00	10/1/2025	\$47,050.00 - CAP. OUTLAY EQUIPMENT; \$1700.00 - SUPPLIES; \$400.00 - CONTRACTUAL SERVICES	NONE	PURCHASE REQUEST APPROVED BY BOA UNDER 11/10/25 CONSENT; PURCHASE ORDER ISSUED 11/13/25; DELIVERED 11/27/25; INVOICE PAID ON CLAIMS 12/9/25; WAITING PROOF OF PAYMENT TO SUBMIT; Q1 REPORT SUBMITTED 12/8/25.	\$47,971.30	NONE TO DATE
7	PARKS/ PUBLIC WORKS	MISSISSIPPI OUTDOOR STEWARDSHIP TRUST FUND	FY2026	OUTDOOR RECREATION AND CONSERVATION (PARK ACQUISITION AND IMPROVEMENTS)	\$1,807,488.00	PENDING	\$1,807,488.00: MUCK EXCAVATION, BANK STABILIZATION, EROSION CONTROL MEASURES, WALKING TRAILS, NATIVE PLANT RESORATION, KAYAK LAUNCH, PARKING LOT CONSTRUCTION	\$200,832.00	APPROVED FOR APPLICATION BY BOA; DRAFTED AND APPLIED FOR 9/19/25; PENDING AWARD NOTIFICATION (ESTIMATE, FEBRUARY 9TH).	NONE TO DATE	NONE TO DATE
8	CITY ADMIN.	AMERICA 250 GRANT (LEGACY GRANT)	FY2026	CELEBRATION OF AMERICA'S SEMI-QUINCENTENNIAL ANNIVERSARY (250); LEGACY GRANT - PERMANENT HISTORICAL PROJECT	\$20,000.00	12/22/2025	\$20,000: GLUCKSTADT HISTORICAL PROJECT (DOCUMENTARY, HISTORY OF GLUCKSTADT)	\$20,000 (50% MUST BE IN CASH, REMAINDER CAN BE IN-KIND)	AWARDED 12/22/25; NEED APPROVAL TO ACCEPT AWARD, SIGN AWARD DOCUMENTS, ISSUE PRESS RELEASE & SET FIRST MEETING WITH DOCUMENTARIAN RE: NEXT STEPS.	NONE TO DATE	NONE TO DATE
9	ADMIN.	G.A. CARMICHEAL FAMILY HEALTH CENTER: MAYORAL HEALTH COUNCIL PROGRAM	FY2026	MAYORAL HEALTH COUNCIL	\$6,000.00	10/14/2025	\$6000.00 - HEALTH COUNCIL COORDINATOR & ACTIVITIES	NONE	RECEIVED DELIVERABLES 1/8/25; NEED APPROVAL TO ACCEPT AWARD AND SIGN DOCUMENTS; INITIAL MEETING SET FOR 1/16/25 AT 12:00 PM.	NONE TO DATE	NONE TO DATE
10	CITY ADMIN.	AMERICA 250 GRANT (MISSISSIPPI ARTS COMMISSION PUBLIC ART GRANT)	FY2026	CELEBRATION OF AMERICA'S SEMI-QUINCENTENNIAL ANNIVERSARY (250); PUBLIC ART GRANT	\$12,000.00	PENDING	\$12,000.00 - PUBLIC ART PROJECT CELEBRATING AMERICA250	\$12,000.00 (10% MUST BE IN CASH, REMAINDER CAN BE IN-KIND)	APPROVED 12/9/25 TO APPLY FOR THE 1/15/26 DEADLINE; APPLICATION IN PROGRESS.	NONE TO DATE	NONE TO DATE
11	POLICE	BUREAU OF JUSTICE ASSISTANCE: JUSTICE ASSISTANCE GRANT	FY2024	EQUIPMENT & TECHNOLOGY	\$13,816.30	PENDING	\$13,816.30 - LAPTOPS (COMPATIBLE WITH CAD)	NONE	APPLICATION SUBMITTED BY 12/15/25 DEADLINE; PENDING AWARD NOTIFICATION.	NONE TO DATE	NONE TO DATE
12	POLICE	MISSISSIPPI OFFICE OF HIGHWAY SAFETY: POLICE TRAFFIC SERVICES GRANT	FY2027	PERSONNEL & EQUIPMENT	TBD (MEETING WITH PD 1/12/26 TO DETERMINE NEEDS)	1/30/2026	TBD - PERSONNEL: SALARIES & OVERTIME & EQUIPMENT	NONE	GRANT PERIOD OPENED 12/5/25 AND DEADLINE IS 1/30/2026; NEED BOA APPROVAL TO APPLY FOR FY27 MOHS TRAFFIC GRANT.	NONE TO DATE	NONE AT THIS TIME
13	POLICE	NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION: ROAD TO ZERO COMMUNITY TRAFFIC SAFETY GRANT	FY2027	PERSONNEL & EQUIPMENT	TBD (MEETING WITH PD 1/12/26 TO DETERMINE NEEDS)	1/16/2026	TBD - TRAFFIC AND ROAD EQUIPMENT; TRAINING	NONE	GRANT PERIOD OPENED 12/23/25 AND DEADLINE IS 1/16/2026; NEED BOA APPROVAL TO APPLY FOR FY27 NHTSA TRAFFIC SAFETY GRANT.	NONE TO DATE	NONE AT THIS TIME

14	POLICE	STATE AND LOCAL CYBER SECURITY GRANT PROGRAM	FY2023	CYBERSECURITY PROTECTION (CITY SYSTEMS)	TBD (MEETING WITH PD 1/12/26 TO DETERMINE NEEDS)	2/27/2026	TBD - CYBER SECURITY TECHNOLOGY, EQUIPMENT AND SOFTWARE	NONE	GRANT PERIOD OPENED 1/5/2026 AND DEADLINE IS 2/27/2026; NEED BOA APPROVAL TO APPLY FOR FY27 SLCGP GRANT.	NONE TO DATE	NONE AT THIS TIME
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**To:** FY27 Highway Safety Grant Applicants  
**From:** Leslie M. Travis, Bureau Director of Programs, Mississippi Office of Highway Safety  
**Date:** December 5, 2025  
**Re:** MOHS FY27 Funding Applications/Funding Guidelines

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### **FY27 MOHS Grant Applications and Funding Guidelines**

The Mississippi Office of Highway Safety (MOHS) is requesting applications for federally funded highway safety programs for the **FY27 grant funding cycle of October 1, 2026 to September 30, 2027**. Applications will be available and released on **December 5, 2025**.

New Applicants may obtain an electronic application by visiting the Mississippi Department of Public Safety's website at [www.dps.ms.gov](http://www.dps.ms.gov). The application packet will contain the FY27 Grant Application and Grant Funding Guidelines. If you are unable to access the application on the Mississippi Office of Highway or the Mississippi Department of Public Safety's websites, please contact the MOHS at the number (601) 391-4924.

Continuation grant applicants will receive an email on December 5, 2025 with the application packet that will contain the FY27 Grant Application and Grant Funding Guidelines.

**\*\*\*PLEASE READ THE GRANT FUNDING GUIDELINES CAREFULLY\*\*\***

It is important to read all documents included within the packet due to revisions/updates for the funding process and the submission process of the FY27 MOHS Grant Application.

**The deadline for final FY27 MOHS Grant Application submission is January 30, 2026. All FY27 grant applications must be received through the Mississippi Office of Highway Safety email address on or before Close of Business (COB) January 30, 2026, at [mohs@dps.ms.gov](mailto:mohs@dps.ms.gov).**

### **GRANT WRITING SESSIONS**

The Mississippi Office of Highway Safety (MOHS) will not be holding grant writing sessions. If assistance is needed with the FY27 application, continuation projects may contact their Program Manager, and new applicants can contact the MOHS Bureau Director of Programs at (601)391-4924 or [LMcCree@dps.ms.gov](mailto:LMcCree@dps.ms.gov).



**FY27 MOHS OCCUPANT PROTECTION GRANT APPLICATION (402**

Section 8, ID)

**Mississippi Office of Highway Safety**

P.O. Box 1633

Canton, MS 39046

Phone: (601)391-4924

mohs@dps.ms.gov

1. Applicant Name:

Mailing Address:

Telephone:

E-Mail:

2. Date:

3. Beginning and Ending Dates:

\_\_\_ Full Grant: (October 1, 2026 - September 30, 2027)

\_\_\_ Mini Grant: (April 1, 2027 - September 30, 2027)

\_\_\_ Special Wave (May 1, 2027 – June 30, 2027)

4. Subgrant Payment Method:

  X   Cost Reimbursement Method

5. UEI # -

6. Congressional District-

7. Program Title: Occupant Protection

8. The following funds will be proposed for FY27 funding:

A. COST CATEGORY		B. SOURCE OF FUNDS	
(1) Personal Services-Salary		(1) Federal	
(2) Personal Services-Fringe (State Only)		(2) State	
(3) Contractual Services		(3) Local	
(4) Travel		(4) Other	
(5) Equipment			
(6) Commodities			
TOTAL		TOTAL	

9. The applicant agrees to operate the program outlined in this application in accordance with all provisions as included herein. The following sections are attached and incorporated into this application:

**Project Identification****Contractual****Commodities****Proposed Countermeasures****Travel****Fringe (State Agency Only)****Personal Services****Equipment**

All policies, terms, conditions, and provisions in the application provided to applicants, are also incorporated into this agreement, and applicant agrees to fully comply herewith.

10. Approved Signature of Authorized Official  
(Mayor/Board of Supervisor President/Commissioner) for  
Jurisdiction to Apply:

Signature

Date

Print Name:

Title:

MOHS USE Only:

The Mississippi Office of Highway Safety is requesting the information below to determine if a had prior experience with the same or similar sub-awards.

This section must be filled out completely for all project applications.

Please answer YES or NO to the questions below.	YES	NO	N/A
Has the agency had federal or state grants similar to the MS Office of Highway Safety grant?			
Has the agency had at least 3 years' experience with federal grants?			
Has the department staff remained unchanged during the <b>2026</b> grant year (October 2025 – current)?			
Has the agency administration remained unchanged during the <b>2026</b> grant year? For example, is the Authorized Signatory Official, Sheriff, and/or Chief the same individual from (October 2025 – current)?			
Is the agency accounting system the same as the <b>2025</b> grant year (October 2024 – September 2025)?			
Has the agency received a federal award <b>directly</b> from a federal awarding agency (the Department of Justice, NHTSA, or another federal agency)? If <b>YES</b> , answer the questions below. If <b>NO</b> , type N/A for the questions below.			
If your agency receives, federal awards directly from a federal awarding agency, does the agency receive monitoring from that Federal awarding agency? For example, does your agency receive monitoring “directly” from the Department of Justice, NHTSA, or another federal agency? Please note, this question is not pertaining to the sub-grantee monitoring conducted by the Mississippi Office of Highway Safety. <b>(If this question is not applicable to your agency, select N/A)</b>			
If your agency receives direct monitoring from a Federal awarding agency, did the federal agency determine that there were no financial or compliance issues? <b>(If this question is not applicable to your agency, select N/A)</b>			

**Problem Identification: Location**

This section must be filled out completely for all project applications.

City Name:	
County Name:	
Surrounding Counties:	
Troop District:	
Number of Officers In Agency:	
Number of Officers to Work Grant:	
Number of Square Miles:	
Number of Population:	
Major Roadways in the Area:	

**Problem Identification Summary:**

**Occupant Protection (402 OP)** - Occupant Protection enforcement projects are strictly for seatbelt and child restraint related activities, programs, and projects.

Please provide a detailed problem identification description for the location that the grant will seek funding, such as high unbelted fatality/injury/crash areas, college/universities, factories, community events, etc. **Please limit to 350 words for the Problem Identification Summary.**

## Problem Identification

### **Proposed Target, Performance Measure and Strategies to be achieved during FY27:**

See Grant Funding Guidelines for information on correct format and information needed under this section. Must be specific, measureable (include hard numbers from previous year), detailed outline of program activities and projected achievements during grant period.

**Occupant Protection (402 OP)** - The Occupant Protection program is to reduce the number of unbelted fatalities and injuries among adults and children. Agencies must have a presence of unbelted fatalities, injuries, and citations in the area of service. The use of high visibility enforcement during national campaigns (Click It or Ticket), as well as other special events and holiday periods in an effort to increase the usage rate through the enforcement of state restraint laws.

**Please use 2023 fatality and injury crash data.**

### **Target for Enforcement Project-Occupant Protection (402OP): Please select “reduce or maintain”.**

The jurisdiction/agency will (reduce or maintain) the number of unbelted fatalities from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

The jurisdiction/agency will (reduce or maintain) the number of unbelted injuries from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

**Performance Measures for Enforcement Project:** Continuation Projects should use 2025 grant funded citation data, if available. If your agency has never applied for grant funds or has not applied in several years, please start your “grant funded” citations at “0”. **Please select “increase or maintain”.**

(Increase or Maintain) the number of grant funded Seatbelt citations from \_\_\_\_\_ in FY25 to \_\_\_\_\_ in FY27.

(Increase or Maintain) the number of grant funded Child Restraint citations from \_\_\_\_\_ in FY25 to \_\_\_\_\_ in FY27.

### **Strategies for Project:**

- Conduct at least \_\_\_\_\_ checkpoints during year. (Enforcement Only)
- Conduct at least \_\_\_\_\_ saturation patrols during year. (Enforcement Only)

**FY27 Proposed Program Coordination:**

If grant is awarded, please identify the following persons that will be working on grant activities and will be responsible for the grant. **NOTE: The signatory official is the Mayor, Board of Supervisors President, or Commissioner**

<b>Name of Chief/Sheriff/Partner:</b>	<b>Name of Project Director:</b>
<b>Phone Number:</b>	<b>Phone Number:</b>
<b>Email Address:</b>	<b>Email Address:</b>

<b>Name of Financial Manager:</b>	<b>Name of Signatory Official:</b>
<b>Phone Number:</b>	<b>Phone Number:</b>
<b>Email Address:</b>	<b>Email Address:</b>

**FY27 Proposed Program Coordination:**  
**Proposed Project Staff for Grant Responsibilities:**

Submit information for proposed project staff that will be funded with federal funds under the grant agreement. All expenses must be in accordance to current state and federal guidelines.

**Unallowable Personnel Expenses for FY27:** Fringe benefits (FICA & Retirement) and health insurance will not be allowable personnel expenses during FY27 for local law enforcement agencies. Fringe benefits is only allowable for state agencies.

The **Special Traffic Enforcement (STEP) Officer(s)** work Overtime Enforcement Only grants. On this project, the STEP officer is defined as a non-individual officer. All grant funded hours worked as a STEP Officer must be over and beyond the officer's normal work hours for his/her agency.

<b>Personnel Title:</b>	<b>% of Time</b>	<b>Regular Rate of Pay</b>	<b>Overtime Rate of Pay</b>	<b># of Hours</b>	<b>Total:</b>

The regular and overtime rate of pay noted above should be the rate of pay the officer is paid by your agency. The rate of pay should not be increased for grant purposes. If approved for funding, all pay rates requested for reimbursement will be verified with the agency check stub and/or agency payroll documentation.

**(STATE AGENCY ONLY)**

Fringe Amounts: When a State enforcement agency includes overtime salary or wages, traffic safety funds can pay for the additional cost of fringe benefits (FICA and Retirement only).

Submit information for proposed fringe amounts per project staff that will be funded with federal funds under the grant agreement.

<b>Personnel:</b>	<b>Fringe Item (FICA and/or Retirement):</b>	<b>%</b>	<b>Total</b>
<b>Total Fringe:</b>			

**FY27 Proposed Contractual Services Expenses:**

Include a detailed assessment of contractual services within the program area in which you will be applying. Also, include a cost estimate for all contractual needs (rental, shipping costs, etc.). All expenses must be in accordance to current state and federal guidelines.

Type of Contractual Service Expenses:	Quantity/Amount of Service/Amount per Month:	Total Costs of Expenses:
<b>Total Contractual Service Expense:</b>		

**FY27 Proposed Travel Expenses:**

Include a detailed assessment of travel needs within the program area in which you will be applying. Also, include a cost estimate for all travel needs (airfare, hotel, hotel taxes, per diem, mileage, parking, baggage, and gratuity). All expenses must be in accordance to current state and federal guidelines.

Type of Travel:	Number of People:	Cost:	Total:
<b>Total Travel Expense:</b>			

**FY27 Proposed Equipment:**

Grant funding must be tied to performance, data and problem identification. Applicants that are requesting equipment only applications will **not** be funded. Please list the cost for each piece of equipment requested.

**Important Note: MOHS defines major equipment as “...each item \$1,000.00” or more. All computers regardless of value are considered equipment. All other items must be requested under Commodities.**

Federal guidelines require equipment purchased must be essential to the project. If any equipment is requested in the application, **please include quotes (0 to \$5,000.00 requires one quote, over \$5,000.00 requires two quotes)** for the equipment, equipment descriptions and a thorough explanation of the use of the equipment and how it will impact the target and the agency problem identification.

All equipment must be approved by MOHS and/or NHTSA, be included on the Conforming Product List (CPL) and must be used specifically for the purposes for which is purchased. CPL list can be found at:

**Unallowable equipment for FY27: Guns, Ammunition, Uniforms, Vehicles, Body Armor and Body Cameras. Radar and lidars are unallowable under alcohol/impaired funding sources.**

Type of Equipment:	# Requested:	Cost Per Item (Quote Required):	Line Total:
<b>Total Equipment Expense:</b>			

### **FY27 Proposed Commodities:**

Include a detailed assessment of other grant expenses within the program area in which you are applying. Also, include a cost estimate for all additional grant expenses (mouthpieces, gloves, traffic safety cones, flashlights, reflective safety vests, etc.). All expenses must be in accordance to current state and federal guidelines.

Federal guidelines require commodities purchased must be essential to the project. If any commodities are requested in the application, **please include quotes (0 to \$5,000.00 requires one quote, over \$5,000.00 requires two quotes)** for the commodities, commodities descriptions and a thorough explanation of the use of the commodities and how it will impact the target and the agency problem identification.

Type of Commodity Expenses:	Quantity	Cost Per Item (Quote Required):	Total of Expense:
<b>Total of Commodity Expenses:</b>			



# Mississippi Office of Highway Safety

## **MOHS FY27 Application Submission**

The application submitted to the MOHS is a request for funds. Funding is based on funds available to the MOHS through federal and state funds. Application requests received are not guaranteed and will be subject to be adjusted, as funding is available.

Each application will be reviewed by the MOHS staff and management for application completeness, data provided, citation information, budget requests of personnel, contractual services, travel, equipment and other expenses requested to enhance the already existing program. The proposed targets, performance measure and strategies are also reviewed for effectiveness and efficiency.

Applications received from continuation grant agencies will be reviewed by MOHS staff and management for application completeness, data provided, citation information, budget requests of personnel, contractual services, travel, equipment and other expenses requested to enhance the already existing program. Grants will also be funded based on the review of past grant performance of meeting targets and performance measures, expenditure of previous grant funds and information from program documentation and assessments.

The MOHS grant program is a data driven program and all applications must represent a need and the ability to help reach the State's target and performance measures to help reduce fatalities, crashes and injuries.

## **Submission of Financial Audit**

All applicants for the FY27 MOHS Grant Application must submit a copy of the most recent A-133 financial audit from the requesting agency. If your agency doesn't meet the requirement for an A-133 Audit, you should submit the most recent financial audit. If an audit is not included with the grant application, the application will not be considered for funding eligibility.

## **Incomplete Applications:**

If all sections of this Application are not filled out, documentation provided and/or justifications provided, this Application will not be considered for review and/or approval. This includes missing signatures.

## **Agreement of Understanding and Compliance:**

The Agreement of Understanding and Compliance documents will be attached within the FY27 Grant Agreement. The Applicant will be required to sign all compliance documents upon receipt of the finalized Grant Agreement between the State, MOHS and applicant. Certifications and assurances will be included in the Grant Agreement.

Section 8, ID)

mohs@dps.ms.gov

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**The Mississippi Office of Highway Safety is requesting the information below to determine if a applicant had prior experience with the same or similar sub-awards.**

This section must be filled out completely for all project applications.

<b>Please answer YES or NO to the questions below.</b>	<b>YES</b>	<b>NO</b>	<b>N/A</b>
Has the agency had federal or state grants similar to the MS Office of Highway Safety grant?			
Has the agency had at least 3 years' experience with federal grants?			
Has the department staff remained unchanged during the <b>2026</b> grant year (October 2025 – current)?			
Has the agency administration remained unchanged during the <b>2026</b> grant year? For example, is the Authorized Signatory Official, Sheriff, and/or Chief the same individual from (October 2025 – current)?			
Is the agency accounting system the same as the <b>2025</b> grant year (October 2024 – September 2025)?			
Has the agency received a federal award <b>directly</b> from a federal awarding agency (the Department of Justice, NHTSA, or another federal agency)? If <b>YES</b> , answer the questions below. If <b>NO</b> , type N/A for the questions below.			
If your agency receives, federal awards directly from a federal awarding agency, does the agency receive monitoring from that Federal awarding agency? For example, does your agency receive monitoring “directly” from the Department of Justice, NHTSA, or another federal agency? Please note, this question is not pertaining to the sub-grantee monitoring conducted by the Mississippi Office of Highway Safety. <b>(If this question is not applicable to your agency, select N/A)</b>			
If your agency receives direct monitoring from a Federal awarding agency, did the federal agency determine that there were no financial or compliance issues? <b>(If this question is not applicable to your agency, select N/A)</b>			

**Problem Identification: Location**

This section must be filled out completely for all project applications.

City Name:	
County Name:	
Surrounding Counties:	
Troop District:	
Number of Officers in Agency:	
Number of Officers to Work Grant:	
Number of Square Miles:	
Number of Population:	
Major Roadways in the Area:	

**Problem Identification Summary:**

**Alcohol Countermeasures (154AL)** - Alcohol enforcement projects are strictly for **alcohol only** related activities, programs and projects.

**Impaired Driving (405d)** - Impaired Driving enforcement projects are strictly for **alcohol and drug** related activities, programs and projects.

Please provide a detailed problem identification description for the location that the grant will seek funding, such as high fatality/injury/crash areas, college/universities, factories, community events, alcohol related establishments, etc. **Please limit to 350 words for the Problem Identification Summary.**

**Proposed Target, Performance Measure and Strategies to be achieved during FY27:**

See Grant Funding Guidelines for information on correct format and information needed under this section. Must be specific, measureable (include hard numbers from previous year), detailed outline of program activities and projected achievements during grant period.

**Alcohol Countermeasures (154AL)** - Alcohol enforcement projects are strictly for alcohol only related activities, programs and projects. Agencies must have a presence of alcohol related fatalities, injuries, and citations in service. Alcohol programs will work national priority program blitz campaigns of Drive Sober or Get Pulled Over. The alcohol program is to work within the state to reduce alcohol related DUI fatalities and injuries through high visibility enforcement, checkpoints, saturation patrols and earned media.

**Impaired Driving (405d)** - The Impaired Driving program is for enforcement agencies working to reduce alcohol and drug related fatalities on roadways. Agencies must have a presence of alcohol and drug related fatalities, injuries, and citations in service. Impaired Driving programs will work national priority program blitz campaigns of Drive Sober or Get Pulled Over. Grant funds are to reduce alcohol and drug related fatalities and injuries through high visibility enforcement, checkpoints, saturation patrols and earned media.

**Please use 2023 fatality and injury data.****Target for Enforcement Project-Alcohol Countermeasures (154AL): Please select “reduce or maintain”.**

The jurisdiction/agency will (reduce or maintain) the number of alcohol related **fatalities** from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

The jurisdiction/agency will (reduce or maintain) the number of alcohol related **injuries** from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

**Target for Enforcement Project-Impaired Driving (405d): Please select “reduce or maintain”.**

The jurisdiction/agency will (reduce or maintain) the number of alcohol related **fatalities** from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

The jurisdiction/agency will (reduce or maintain) the number of drug related **fatalities** from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

The jurisdiction/agency will (reduce or maintain) the number of alcohol related **injuries** from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

The jurisdiction/agency will (reduce or maintain) the number of drug related **injuries** from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

**Performance Measures for Enforcement Project:** Continuation Projects should use 2025 grant fund data, if available. If your agency has never applied for grant funds or has not applied in several years, please start your “grant funded” citations at “0”. If you are requesting 405 D-Impaired Driving Funding, you must include a performance measure for alcohol and a performance measure for impaired (drug). **Please select “increase or maintain”.**

(Increase or Maintain) the number of grant funded DUI Arrest citations from \_\_\_\_ in FY25 to \_\_\_\_ in FY27.

**\*\* If applying for (405 D) fund: Please include measure listed below\*\***

(Increase or Maintain) the number of grant funded DUI Other (drug) citations from \_\_\_\_ in FY25 to \_\_\_\_ in FY27.

### **Strategies for Project:**

- Conduct at least \_\_\_\_ checkpoints during year. (Enforcement Only)
- Conduct at least \_\_\_\_ saturation patrols during year. (Enforcement Only)
- Conduct at least \_\_\_\_ alcohol presentations during year (If Applicable for 154 Alcohol Funding Grants Only with a Individual Officer)
- Will there be Law Enforcement Instructor training (SFST, ARIDE, DRE) hours/time conducted and/or claimed during grant period? (**Individual Officers Only**-This is a requirement for instructors to receive reimbursement)

\_\_\_\_ Yes      \_\_\_\_ No

### **Instructor Training Note**

The instructor training is allowable on the specific grant based on funding source:

- 154 Alcohol Funding – SFST only
- 405D Alcohol and Drug Funding – SFST, ARIDE, DRE

ARIDE and DRE Instructor Training is unallowable on a 154 Alcohol Grant.

**FY27 Proposed Program Coordination:**

If grant is awarded, please identify the following persons that will be working on grant activities and will be responsible for the grant. **NOTE: The signatory official is the Mayor, Board of Supervisors President, or Commissioner**

<b>Name of Chief/Sheriff/Partner:</b>	<b>Name of Project Director:</b>
<b>Phone Number:</b>	<b>Phone Number:</b>
<b>Email Address:</b>	<b>Email Address:</b>

<b>Name of Financial Manager:</b>	<b>Name of Signatory Official:</b>
<b>Phone Number:</b>	<b>Phone Number:</b>
<b>Email Address:</b>	<b>Email Address:</b>

**FY27 Proposed Program Coordination:**  
**Proposed Project Staff for Grant Responsibilities:**

Submit information for proposed project staff that will be funded with federal funds under the grant agreement. All expenses must be in accordance to current state and federal guidelines.

**Unallowable Personnel Expenses for FY27:** Fringe benefits (FICA & Retirement) and health insurance will not be allowable personnel expenses during FY27 for local law enforcement agencies. Fringe benefits is only allowable for state agencies.

The **Special Traffic Enforcement (STEP) Officer(s)** work Overtime Enforcement Only grants. On this project, the STEP officer is defined as a non-individual officer. All grant funded hours worked as a STEP Officer must be over and beyond the officer's normal work hours for his/her agency.

The **Individual Officer(s)** on this project is defined as an officer working enforcement at approximately 2080 hours at an approximate rate of pay per hour. (Continuation Projects Only)

**Individual Officer Criteria:** The MS Office of Highway Safety may provide funding for a currently approved Individual DUI Officer. In order to maintain funding for an individual officer, an agency must be a continuation project and meet 60% of the following criteria:

- At least (1) DUI Fatal in 2023;
- At least (1) DUI Injury in 2023;
- Top 30 Alcohol or Drug Fatality County;
- FY25 Grant Funded Arrests of 52 or higher, per officer;
- Met or Exceeded Performance Measures agreed upon by agency in FY25 Grant Agreement

Personnel Title:	% of Time	Regular Rate of Pay	Overtime Rate of Pay	# of Hours	Total

The regular and overtime rate of pay noted above should be the rate of pay the officer is paid by your agency. The rate of pay should not be increased for grant purposes. If approved for funding, all pay rates requested for reimbursement will be verified with the agency check stub and/or agency payroll documentation.

#### **(STATE AGENCY ONLY)**

Fringe Amounts: When a State enforcement agency includes overtime salary or wages, traffic safety funds can pay for the additional cost of fringe benefits (FICA and Retirement only).

Submit information for proposed fringe amounts per project staff that will be funded with federal funds under the grant agreement.

Personnel:	Fringe Item (FICA and/or Retirement):	%	Total
<b>Total Fringe:</b>			



**FY27 Proposed Contractual Services Expenses:**

Include a detailed assessment of contractual services within the program area in which you will be applying. Also, include a cost estimate for all contractual needs (rental, shipping costs, etc.). All expenses must be in accordance to current state and federal guidelines.

Type of Contractual Service Expenses:	Quantity/Amount of Service/Amount per Month:	Total Costs of Expenses:
<b>Total Contractual Service Expense:</b>		

**FY27 Proposed Travel Expenses:**

Include a detailed assessment of travel needs within the program area in which you will be applying. Also, include a cost estimate for all travel needs (airfare, hotel, hotel taxes, per diem, mileage, parking, baggage, and gratuity). All expenses must be in accordance to current state and federal guidelines.

Type of Travel:	Number of People:	Cost:	Total:
<b>Total Travel Expense:</b>			

**FY27 Proposed Equipment:**

Grant funding must be tied to performance, data and problem identification. Applicants that are requesting equipment only applications will **not** be funded. Please list the cost for each piece of equipment requested.

**Important Note:** MOHS defines major equipment as “...each item \$1,000.00” or more. All computers regardless of value are considered equipment. All other items must be requested under Commodities.

Federal guidelines require equipment purchased must be essential to the project. If any equipment is requested in the application, **please include quotes (0 to \$5,000.00 requires one quote, over \$5,000.00 requires two quotes)** for the equipment, equipment descriptions and a thorough explanation of the use of the equipment and how it will impact the target and the agency problem identification.

All equipment must be approved by MOHS and/or NHTSA, be included on the Conforming Product List (CPL) and must be used specifically for the purposes for which is purchased. CPL list can be found at:

Cameras. Radar and lidars are unallowable under alcohol/impaired funding sources.

Type of Equipment:	# Requested:	Cost Per Item (Quote Required):	Line Total:
<b>Total Equipment Expense:</b>			

**FY27 Proposed Commodities:**

Include a detailed assessment of other grant expenses within the program area in which you are applying. Also, include a cost estimate for all additional grant expenses (mouthpieces, gloves, traffic safety cones, flashlights, reflective safety vests, etc.). All expenses must be in accordance to current state and federal guidelines.

Federal guidelines require commodities purchased must be essential to the project. If any commodities are requested in the application, **please include quotes (0 to \$5,000.00 requires one quote, over \$5,000.00 requires two quotes)** for the commodities, commodities descriptions and a thorough explanation of the use of the commodities and how it will impact the target and the agency problem identification.

Type of Commodity Expenses:	Quantity	Cost Per Item (Quote Required):	Total of Expense:
<b>Total of Commodity Expenses:</b>			

# Mississippi Office of Highway Safety

## **MOHS FY27 Application Submission**

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## **Submission of Financial Audit**

All applicants for the FY27 MOHS Grant Application must submit a copy of the most recent A-133 financial audit from the requesting agency. If your agency doesn't meet the requirement for an A-133 Audit, you should submit the most recent financial audit. If an audit is not included with the grant application, the application will not be considered for funding eligibility.

## **Incomplete Applications:**

If all sections of this Application are not filled out, documentation provided and/or justifications provided, this Application will not be considered for review and/or approval. This includes missing signatures.

## **Agreement of Understanding and Compliance:**

The Agreement of Understanding and Compliance documents will be attached within the FY27 Grant Agreement. The Applicant will be required to sign all compliance documents upon receipt of the finalized Grant Agreement between the State, MOHS and applicant. Certifications and assurances will be included in the Grant Agreement.

# FY27 MOHS POLICE TRAFFIC SERVICES GRANT APPLICATION (402)

## Mississippi Office of Highway Safety

P.O. Box 1633

Canton, MS 39046

Phone: (601)391-4924

mohs@dps.ms.gov

1. Applicant Name:  Mailing Address:   Telephone:  E-Mail:	2. Date:  3. Beginning and Ending Dates: ____ Full Grant: (October 1, 2026 - September 30, 2027) ____ Mini Grant: (April 1, 2027 - September 30, 2027) ____ Special Wave (May 1, 2027 – June 30, 2027)
	4. Subgrant Payment Method: <u>  X  </u> Cost Reimbursement Method
	5. UEI # -
	6. Congressional District-
7. Program Title: Police Traffic Services	
8. The following funds will be proposed for FY27 funding:	
A. COST CATEGORY	B. SOURCE OF FUNDS
(1) Personal Services-Salary	(1) Federal
(2) Personal Services-Fringe (State Only)	(2) State
(3) Contractual Services	(3) Local
(4) Travel	(4) Other
(5) Equipment	
(6) Commodities	
TOTAL	TOTAL
9. The applicant agrees to operate the program outlined in this application in accordance with all provisions as included herein. The following sections are attached and incorporated into this application:	
<b>Project Identification</b> <b>Contractual</b> <b>Commodities</b>	<b>Proposed Countermeasures</b> <b>Travel</b> <b>Fringe (State Agency Only)</b>
	<b>Personal Services</b> <b>Equipment</b>
All policies, terms, conditions, and provisions in the application provided to applicants, are also incorporated into this agreement, and applicant agrees to fully comply herewith.	
10. Approved Signature of Authorized Official (Mayor/Board of Supervisor President/Commissioner) for Jurisdiction to Apply:	MOHS USE Only:
Signature _____ Date _____	
Print Name:	
Title:	

The Mississippi Office of Highway Safety is requesting the information below to determine if a had prior experience with the same or similar sub-awards.

This section must be filled out completely for all project applications.

Please answer YES or NO to the questions below.	YES	NO	N/A
Has the agency had federal or state grants similar to the MS Office of Highway Safety grant?			
Has the agency had at least 3 years' experience with federal grants?			
Has the department staff remained unchanged during the <b>2026</b> grant year (October 2025 – current)?			
Has the agency administration remained unchanged during the <b>2026</b> grant year? For example, is the Authorized Signatory Official, Sheriff, and/or Chief the same individual from (October 2025 – current)?			
Is the agency accounting system the same as the <b>2025</b> grant year (October 2024 – September 2025)?			
Has the agency received a federal award <b>directly</b> from a federal awarding agency (the Department of Justice, NHTSA, or another federal agency)? If <b>YES</b> , answer the questions below. If <b>NO</b> , type N/A for the questions below.			
If your agency receives, federal awards directly from a federal awarding agency, does the agency receive monitoring from that Federal awarding agency? For example, does your agency receive monitoring “directly” from the Department of Justice, NHTSA, or another federal agency? Please note, this question is not pertaining to the sub-grantee monitoring conducted by the Mississippi Office of Highway Safety. <b>(If this question is not applicable to your agency, select N/A)</b>			
If your agency receives direct monitoring from a Federal awarding agency, did the federal agency determine that there were no financial or compliance issues? <b>(If this question is not applicable to your agency, select N/A)</b>			

**Problem Identification: Location**

This section must be filled out completely for all project applications.

City Name:	
County Name:	
Surrounding Counties:	
Troop District:	
Number of Officers In Agency:	
Number of Officers to Work Grant:	
Number of Square Miles:	
Number of Population:	
Major Roadways in the Area:	

**Problem Identification Summary:**

**Police Traffic Services (402 PT)** - Police Traffic Services enforcement projects are for seatbelt, child restraint, and speed related activities, programs, and projects.

Please provide a detailed problem identification description for the location that the grant will seek funding, such as high unbelted and speed areas, high fatality/injury/crash areas, college/universities, factories, community events, etc. **Please limit to 350 words for the Problem Identification Summary.**

**Proposed Target, Performance Measure and Strategies to be achieved during FY27:**

See Grant Funding Guidelines for information on correct format and information needed under this section. Must be specific, measureable (include hard numbers from previous year), detailed outline of program activities and projected achievements during grant period.

**Police Traffic Services (402 PT)** - The traffic enforcement necessary to directly impact fatalities and injuries which includes all aspects of traffic enforcement in the combined areas of Occupant Protection, Child Restraint and Speed. Police Traffic Service programs will work the national priority program blitz campaign Click It or Ticket.

**Please use 2023 fatality and injury crash data.**

**Target for Enforcement Project-Police Traffic Services (402PT): Please select “reduce or maintain”.**

The jurisdiction/agency will (reduce or maintain) the number of unbelted fatalities from \_\_\_\_ in 2023 to \_\_\_\_ by the end of 2027.

The jurisdiction/agency will (reduce or maintain) the number of unbelted injuries from \_\_\_\_ in 2023 to \_\_\_\_ by the end of 2027.

The jurisdiction/agency will (reduce or maintain) the number of speed fatalities from \_\_\_\_ in 2023 to \_\_\_\_ by the end of 2027.

The jurisdiction/agency will (reduce or maintain) the number of speed injuries from \_\_\_\_ in 2023 to \_\_\_\_ by the end of 2027.

**Performance Measures for Enforcement Project:** Continuation Projects should use 2025 grant funded citation data, if available. If your agency has never applied for grant funds or has not applied in several years, please start your “grant funded” citations at “0”. **Please select “increase or maintain”.**

(Increase or Maintain) the number of grant funded Seatbelt citations from \_\_\_\_ in FY25 to \_\_\_\_ in FY27.

(Increase or Maintain) the number of grant funded Child Restraint citations from \_\_\_\_ in FY25 to \_\_\_\_ in FY27.

(Increase or Maintain) the number of grant funded Speed citations from \_\_\_\_ in FY25 to \_\_\_\_ in FY27.

**Strategies for Project:**

- Conduct at least \_\_\_\_ checkpoints during year. (Enforcement Only)
- Conduct at least \_\_\_\_ saturation patrols during year. (Enforcement Only)

**FY27 Proposed Program Coordination:**

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If grant is awarded, please identify the following persons that will be working on grant activities and will be responsible for the grant. **NOTE: The signatory official is the Mayor, Board of Supervisors President, or Commissioner**

Name of Chief/Sheriff/Partner:	Name of Project Director:
Phone Number:	Phone Number:
Email Address:	Email Address:

Name of Financial Manager:	Name of Signatory Official:
Phone Number:	Phone Number:
Email Address:	Email Address:

**FY27 Proposed Program Coordination:**  
**Proposed Project Staff for Grant Responsibilities:**

Submit information for proposed project staff that will be funded with federal funds under the grant agreement. All expenses must be in accordance to current state and federal guidelines.

**Unallowable Personnel Expenses for FY27:** Fringe benefits (FICA & Retirement) and health insurance will not be allowable personnel expenses during FY26 for local law enforcement agencies. Fringe benefits is only allowable for state agencies.

The **Special Traffic Enforcement (STEP) Officer(s)** work Overtime Enforcement Only grants. On this project, the STEP officer is defined as a non-individual officer. All grant funded hours worked as a STEP Officer must be over and beyond the officer's normal work hours for his/her agency.

Personnel Title:	% of Time	Regular Rate of Pay	Overtime Rate of Pay	# of Hours	Total:

The regular and overtime rate of pay noted above should be the rate of pay the officer is paid by your agency. The rate of pay should not be increased for grant purposes. If approved for funding, all pay rates requested for reimbursement will be verified with the agency check stub and/or agency payroll documentation.



**(STATE AGENCY ONLY)**

Fringe Amounts: When a State enforcement agency includes overtime salary or wages, traffic safety funds can pay for the additional cost of fringe benefits (FICA and Retirement only).

Submit information for proposed fringe amounts per project staff that will be funded with federal funds under the grant agreement.

<b>Personnel:</b>	<b>Fringe Item (FICA and/or Retirement):</b>	<b>%</b>	<b>Total</b>
<b>Total Fringe:</b>			

**FY27 Proposed Contractual Services Expenses:**

Include a detailed assessment of contractual services within the program area in which you will be applying. Also, include a cost estimate for all contractual needs (rental, shipping costs, etc.). All expenses must be in accordance to current state and federal guidelines.

<b>Type of Contractual Service Expenses:</b>	<b>Quantity/Amount of Service/Amount per Month:</b>	<b>Total Costs of Expenses:</b>
<b>Total Contractual Service Expense:</b>		

**FY27 Proposed Travel Expenses:**

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<b>Type of Travel:</b>	<b>Number of People:</b>	<b>Cost:</b>	<b>Total:</b>
<b>Total Travel Expense:</b>			

**FY27 Proposed Equipment:**

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**Unallowable equipment for FY27: Guns, Ammunition, Uniforms, Vehicles, Body Armor and Body Cameras. Radar and lidars are unallowable under alcohol/impaired funding sources.**

Type of Equipment:	# Requested:	Cost Per Item (Quote Required):	Line Total:
<b>Total Equipment Expense:</b>			

**FY27 Proposed Commodities:**

Include a detailed assessment of other grant expenses within the program area in which you are applying. Also, include a cost estimate for all additional grant expenses (mouthpieces, gloves, traffic safety cones, flashlights, reflective safety vests, etc.). All expenses must be in accordance to current state and federal guidelines.

Federal guidelines require commodities purchased must be essential to the project. If any commodities are requested in the application, **please include quotes (0 to \$5,000.00 requires one quote, over \$5,000.00 requires two quotes)** for the commodities, commodities descriptions and a thorough explanation of the use of the commodities and how it will impact the target and the agency problem identification.

Type of Commodity Expenses:	Quantity	Cost Per Item (Quote Required):	Total of Expense:
<b>Total of Commodity Expenses:</b>			

# Mississippi Office of Highway Safety

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Applications received from continuation grant agencies will be reviewed by MOHS staff and management for application completeness, data provided, citation information, budget requests of personnel, contractual services, travel, equipment and other expenses requested to enhance the already existing program. Grants will also be funded based on the review of past grant performance of meeting targets and performance measures, expenditure of previous grant funds and information from program documentation and assessments.

The MOHS grant program is a data driven program and all applications must represent a need and the ability to help reach the State's target and performance measures to help reduce fatalities, crashes and injuries.

## **Submission of Financial Audit**

All applicants for the FY27 MOHS Grant Application must submit a copy of the most recent A-133 financial audit from the requesting agency. If your agency doesn't meet the requirement for an A-133 Audit, you should submit the most recent financial audit. If an audit is not included with the grant application, the application will not be considered for funding eligibility.

## **Incomplete Applications:**

If all sections of this Application are not filled out, documentation provided and/or justifications provided, this Application will not be considered for review and/or approval. This includes missing signatures.

## **Agreement of Understanding and Compliance:**

The Agreement of Understanding and Compliance documents will be attached within the FY27 Grant Agreement. The Applicant will be required to sign all compliance documents upon receipt of the finalized Grant Agreement between the State, MOHS and applicant. Certifications and assurances will be included in the Grant Agreement.

**FY27**  
**MISSISSIPPI OFFICE OF HIGHWAY SAFETY**  
**FUNDING GUIDELINES FOR**  
**LAW ENFORCEMENT**  
**GRANT APPLICATIONS**



Mississippi Department of Public Safety  
Division of Public Safety Planning  
Office of Highway Safety  
P.O. Box 1633  
Canton, MS 39046  
Phone: (601)391-4924  
[mohs@dps.ms.gov](mailto:mohs@dps.ms.gov)

**Schedule for Application Process:**

- Application released December 5, 2025 – Application packets will be available at the following sites: Department of Public Safety website – <https://www.dps.ms.gov>
- Application Deadline January 30, 2026 – Grant applications may be submitted early but are due no later than 5:00 p.m. on January 30, 2026. Grant applications received after the due date will be noted and may be delayed in processing for the upcoming grant year.
- Funding Notification – All applicants will be notified of application results no later than July 2026.
- Completed grant applications packets must be **submitted electronically** to the Mississippi Office of Highway Safety email address at:

**mohs@dps.ms.gov**

**A complete grant application packet should only include:**

1. The FY27 Grant Application
2. Most recent A-133 Financial Audit. If your agency doesn't meet the requirement for an A-133 Audit, you should submit the most recent financial audit. If an audit is not included with the grant application, the application will not be considered for funding eligibility.

**Note:** Do not submit policies, payroll schedules, or any additional information in the application packet. If approved for funding, MOHS will request required documents for FY27 at a later date.

**Applicant Criteria and Program Areas of Funding for Law Enforcement Applications**

**Eligible Applicants:** All law enforcement jurisdictions/agencies, which may include municipal, county, and state law enforcement agencies.

**Eligible Program Expenses:** Personal Services-Salary (Regular and Overtime), Fringe (State Agency Only), Contractual Services, Travel, Equipment, Commodities, Training (Grant Related Only).

**Overtime Enforcement Only Grants:** For FY27, MOHS is offering three (3) applications. Select the application that will best fit your agency's need, problem identification, and target.

1. Impaired Driving Law Enforcement (154 and 405d)
2. Occupant Protection Law Enforcement (402)
3. Police Traffic Service Law Enforcement (402)

**Individual Officer and Overtime Enforcement Grant (Continuation Projects Only):** Applicants must be currently funded with an approved Individual Officer in FY26. No new projects will be funded. For FY27, MOHS is offering one (1) application.

1. Impaired Driving Law Enforcement (154 and 405d)

## **Purpose of the Funding Guidelines**

The purpose of this document is to outline the specific criteria to be followed in the preparation of highway safety applications for funding. The manual provides directions and guidelines to assist state and local agencies in obtaining federal funding support for their highway safety programs.

The Mississippi Office of Highway Safety (MOHS) receives annual funding under the Highway Safety Act of 1966, State and Community Highway Safety Grant Program currently operating under the new authorization The Infrastructure Investment and Jobs Act (IIJA). The funding was established to provide financial assistance to states to stimulate the development of traffic safety projects at the state and local levels. The funding is received from the National Highway Traffic Safety Administration (NHTSA) and the Federal Highway Administration (FHWA) to the state to support highway safety programs. The success of the programs is determined by the efforts and interest demonstrated by the state and local agencies with traffic safety responsibilities.

The State produces a Highway Safety Plan (HSP), which provides for statewide initiatives, directs activity toward resolving identified traffic safety problems, and establishes statewide targets and performance measures for highway safety. The planning process incorporates the solicitation of applications or proposals (through the problem identification process) for highway safety activities from state agencies and political subdivisions to ensure a statewide effort that will satisfy state highway safety objectives. Applications for funding submitted for traffic safety activities are not restricted to any dollar value but must provide evidence of being cost effective. Applications must state in detail the goals of the project, the problem to be addressed, and the associated activities.

These guidelines are provided to assist the applicant agency in developing traffic safety activities, eligible for federal support and aid in reaching state highway safety goals and objectives. The FY27 grant year **begins October 1<sup>st</sup> and ends September 30<sup>th</sup>**. Applications can be requested for funding for full year grants (October-September), mini grants (April 1<sup>st</sup> – September 30<sup>th</sup>) or special wave grants (see 154/405d, 402 OP, 402 PT applications for specific special wave dates). All dates will be approved by MOHS.

### **FY27 Mississippi Office of Highway Safety Targets, Performance Measures and Strategies:**

Per Federal guidelines, the Mississippi Office of Highway Safety must set targets, performance measures and strategies that will be accomplished on an annual basis to remain in federal and state compliance and meet all federal and state requirements for funding.

By funding agencies and projects across the State of Mississippi, the MOHS hopes to achieve success in the target areas and reach all proposed performance measures, by performing specialized strategies.

### **FY27 MOHS Law Enforcement Program Areas:**

**Alcohol Countermeasures (154AL)** - Alcohol enforcement projects are strictly for alcohol only related activities, programs, and projects. Agencies must have a presence of alcohol related fatalities, injuries, and citations in service. Alcohol programs will work national priority program blitz campaigns of Drive Sober or Get Pulled Over. The alcohol program is to work within the state to reduce alcohol related DUI fatalities and injuries through high visibility enforcement, checkpoints, saturation patrols and earned media.

**Impaired Driving (405d)** - The Impaired Driving program is for enforcement agencies working to reduce alcohol and drug related fatalities on roadways. Agencies must have a presence of alcohol and drug related fatalities,

injuries, and citations in service. Impaired Driving programs will work national priority program blitz campaigns of Drive Sober or Get Pulled Over. Grant funds are to reduce alcohol and drug related fatalities and injuries through high visibility enforcement, checkpoints, saturation patrols and earned media.

**Occupant Protection (402 OP)** - The Occupant Protection program is to reduce the number of unbelted fatalities, and injuries among adults and children. Agencies must have a presence of unbelted fatalities, injuries, and citations in service. The use of high visibility enforcement during national campaigns (Click It or Ticket), as well as other special events and holiday periods are to increase the usage rate through the enforcement of state restraint laws. The Occupant Protection program will focus on the enforcement of not only adult drivers, but the enforcement of child restraint laws.

**Police Traffic Services (402 PT)** - The traffic enforcement necessary to directly impact fatalities and injuries which includes all aspects of traffic enforcement in the combined areas of Occupant Protection, Child Restraint and Speed. Police Traffic Service programs will work the national priority program blitz campaign Click It or Ticket. The Police Traffic Services program will focus on all aspects of highway safety through high visibility enforcement, checkpoints, saturation patrols and earned media and must show performance in occupant protection, child restraints and speed control.

### **Instructions for the Completion of Application Signature Sheet:**

Fill out the FY27 Grant Application Signature sheet in its entirety.

1. Applicant Name, Mailing Address, Telephone and Email Address.
2. Date: Date of the Application Submission
3. Beginning and Ending Dates: Application begin/end dates will have options based on the grant application the agency is applying for during the FY27 grant year. See the following options and provide a "X" in the box of your choice:

**Impaired Driving Grants (154 or 405d)**

\_\_\_\_ Full Grant (October 1, 2026 - September 30, 2027)

\_\_\_\_ Mini Grant: (April 1, 2027 - September 30, 2027)

\_\_\_\_ Special Wave (December 1, 2026 – January 31, 2027)

**Occupant Protection (402)**

\_\_\_\_ Full Grant (October 1, 2026 - September 30, 2027)

\_\_\_\_ Mini Grant: (April 1, 2027 - September 30, 2027)

\_\_\_\_ Special Wave (May 1, 2027 – June 30, 2027)

**Police Traffic Services (402)**

\_\_\_\_ Full Grant (October 1, 2026 - September 30, 2027)

\_\_\_\_Mini Grant: (April 1, 2027 - September 30, 2027)

\_\_\_\_Special Wave (May 1, 2027 – June 30, 2027)

4. Sub-grantee Payment Method: Completed
5. UEI# - Unique Entity Identifier; city/county clerk can provide. This number must be “**active**” and remain active throughout the grant period.
6. Congressional District
7. Program Title: Program you are applying for grant funding. 154 Alcohol, 405d Alcohol and Drug, 402 Occupant Protection, 402 Police Traffic Services.
8. Funding Requested
  - a. Cost Category
    1. Personal Services-Salary
    2. Personal Services-Fringes (State Agency Only)
    3. Contractual Services
    4. Travel
    5. Equipment
    6. Commodities
  - b. Source of Funds
    1. Federal
    2. State
    3. Local
    4. Other
9. Agreement Statement: Completed
10. Approved Signature of Authorized Official (Mayor/Board of Supervisor President/Commissioner) for Jurisdiction to Apply.

**Prior Experience with Federal Awards:**

Fill out the chart on the application to reflect if the applicant had prior experience with the same or a similar federal sub-award. Answer Yes or No to the requested questions. This section must be completed for all project applications.



**Problem Identification: Location (Law Enforcement Grants)**

Fill out the chart on the application to reflect all requested information.

<b>City Name:</b>	
<b>County Name:</b>	
<b>Surrounding Counties:</b>	
<b>Troop District:</b>	
<b>Number of Officers in Agency:</b>	
<b>Number of Officers to Work Grant:</b>	

<b>Number of Square Miles:</b>	
<b>Number of Population:</b>	
<b>Major Roadways in the Area:</b>	

**Problem Identification Summary: (Law Enforcement)**

Please provide a detailed problem identification description for the location the grant will seek funding, such as fatality/injury/crash areas, college/universities, factories, community events, alcohol related establishments, high speed areas, etc.

**Please limit to 350 words for the Problem Identification Summary.** Provide as much information as possible about how your agency will work toward the highway safety issues for the area of service.

**Proposed Target, Performance Measure and Strategies to be achieved during FY27:**

**TARGET:** This section must be completed for all project applications. Please provide a description of how the agency will counter the problems stated in the problem identification sections above. **Use 2023 State Data for fatality and injury crashes. If state data is not available, provide local data.**

**Target for Enforcement Projects:** What targets will your agency work toward accomplishing during the FY27 grant year?

**(154AL) Alcohol Countermeasures Applications:**

The jurisdiction/agency will (reduce or maintain) the number of alcohol related fatalities from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

The jurisdiction/agency will (reduce or maintain) the number of alcohol related injuries from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

**(405d) Impaired Driving Applications:**

The jurisdiction/agency will (reduce or maintain) the number of alcohol related fatalities from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

The jurisdiction/agency will (reduce or maintain) the number of drug related fatalities from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

The jurisdiction/agency will (reduce or maintain) the number of alcohol related injuries from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

The jurisdiction/agency will (reduce or maintain) the number of drug related injuries from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

**(402) Occupant Protection Applications:**

The jurisdiction/agency will (reduce or maintain) the number of unbelted fatalities from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

The jurisdiction/agency will (reduce or maintain) the number of unbelted injuries from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

**(402) Police Traffic Services Applications:**

The jurisdiction/agency will (reduce or maintain) the number of unbelted fatalities from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

The jurisdiction/agency will (reduce or maintain) the number of unbelted injuries from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

The jurisdiction/agency will (reduce or maintain) the number of speed fatalities from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

The jurisdiction/agency will (reduce or maintain) the number of speed injuries from \_\_\_\_\_ in 2023 to \_\_\_\_\_ by the end of 2027.

**Police Traffic Service applications must include an unbelted and speed target.**

**\*\*Note\*\* Be reasonable with your targets, do not set a target that your agency will not be able to attain or maintain.**

**PERFORMANCE MEASURE:** This section must be completed for all project applications. Please provide a description of how the agency will counter the problems stated in the problem identification sections above. **Continuation Projects should use 2025 Grant Funded Citation Data. If your agency has never applied for grant funds or has not applied in several years, start your grant funded citations at “0”.**

**Performance Measure for Enforcement Projects:** What grant funded performance goals will your agency work toward accomplishing during the FY27 grant year to obtain the target set?

**(154AL) Alcohol Countermeasures Applications:**

(Increase or Maintain) the number of grant funded DUI Arrest citations from \_\_\_\_ in FY25 to \_\_\_\_ in FY27.

**\*\* If applying for (405D) fund: Please include measure listed below\*\***

(Increase or Maintain) the number of grant funded DUI Other (drug) citations from \_\_\_\_ in FY25 to \_\_\_\_ in FY27.

**Alcohol/Impaired Driving Performance Measure Example:**

Increase the number of grant funded DUI Arrest citations from (80) in FY25 to (88) in FY27.

Increase the number of grant funded DUI Other (drug) citations from (34) in FY25 to (37) in FY27.

**402 Occupant Protection Applications:**

**\*\* Occupant Protection applications must include both a seatbelt and child restraint performance measure.\*\***

**Performance Measure:** (Increase or Maintain) the number of grant funded Seatbelt citations from \_\_\_\_ in FY25 to \_\_\_\_ in FY27.

**Performance Measure:** (Increase or Maintain) the number of grant funded Child Restraint citations from \_\_\_\_ in FY25 to \_\_\_\_ in FY27.

**Occupant Protection Performance Measure Example:**

Increase the number of grant funded seatbelt citations from (199) in FY25 to (219) in FY27.

Increase the number of grant funded child restraint citations from (28) in FY25 to (32) in FY27.

**402 Police Traffic Services Applications:**

**\*\* Occupant Protection applications must include seatbelt, child restraint and speed performance measures.\*\***

Performance Measure: (Increase or Maintain) the number of grant funded Seatbelt citations from \_\_\_\_ n FY25 to \_\_\_\_ in FY27.

Performance Measure: (Increase or Maintain) the number of grant funded Child Restraint citations from \_\_\_\_ in FY25 to \_\_\_\_ in FY27.

Performance Measure: (Increase or Maintain) the number of grant funded Speed citations from \_\_\_\_ in FY25 to \_\_\_\_ in FY27.

**Police Traffic Services Performance Measure Example:**

Increase the number of grant funded seatbelt citations from (199) in FY25 to (219) in FY27.

Increase the number of grant funded child restraint citations from (28) in FY25 to (32) in FY27.

Increase the number of grant funded speed citations from (30) in FY25 to (36) in FY27.

**\*\*Note\*\* Be reasonable with your performance measures, do not set measures that your agency will not be able to attain or maintain. Performance measures are reviewed throughout the grant year for performance efficiency and effectiveness.**

**STRATEGIES:** This section must be completed for all project applications.

**Strategies for Enforcement Projects:** What strategies will your agency perform to reach the performance measure and the target for the FY27 grant year?

**NOTE: If applicants will be performing saturation patrols or checkpoints, please provide the grant funded numbers your agency anticipates performing during the grant year.**

Saturation Patrols: Saturation patrols involve an increased enforcement effort, targeting specific areas, to identify and arrest the impaired driver (DUI Saturation Patrols) or identify seatbelt violations (OP Saturation Patrols). Multiple agencies often combine and concentrate their resources to conduct saturation patrols.

Checkpoints: Checkpoints are defined as law enforcement officials that evaluate drivers for signs of alcohol or drug impairment (DUI Checkpoints) or seatbelt usage (OP Checkpoints) at certain points on the roadway. Vehicles are stopped in a specific sequence, such as every other vehicle or every fourth, fifth or sixth vehicle.

The frequency with which vehicles are stopped depends on the personnel available to staff the checkpoint and traffic conditions. Checkpoints are not mandatory for Occupant Protection and or Police Traffic Service Grants

**Strategy Examples:**

- Conduct at least \_\_\_\_\_ checkpoints during year. (Enforcement Only)
- Conduct at least \_\_\_\_\_ saturation patrols during year. (Enforcement Only)
- Conduct at least \_\_\_\_\_ alcohol presentations during year (If Applicable for **154 Alcohol Funding Grants Only with an Individual Officer**)
- Will there be Law Enforcement Instructor training (SFST, ARIDE, DRE) hours/time conducted and/or claimed during grant period? (If Applicable for 154 Alcohol and 405D **Individual Officers Only-This is a requirement for instructors to receive reimbursement**)

\_\_\_\_\_ Yes      \_\_\_\_\_ No

### **FY27 Proposed Program Coordination:**

If grant is awarded, please identify the following persons that will be responsible for the grant activities.

**NOTE: The signatory official is the Mayor, Board of Supervisors President, or Commissioner**

<b>Name of Chief/Sheriff/Partner:</b>	<b>Name of Project Director:</b>
<b>Phone Number:</b>	<b>Phone Number:</b>
<b>Email Address:</b>	<b>Email Address:</b>

<b>Name of Financial Manager:</b>	<b>Name of Signatory Official:</b>
<b>Phone Number:</b>	<b>Phone Number:</b>
<b>Email Address:</b>	<b>Email Address:</b>

### **FY27 Proposed Program Coordination:**

### **Proposed Project Staff for Grant Responsibilities:**

Submit information for proposed project staff that will be funded with federal funds under the grant agreement.

**Unallowable Personnel Expenses for FY27:** Fringe benefits (FICA & Retirement) and health insurance will not be allowable personnel expenses during FY27 for local law enforcement agencies. Fringe benefits is only allowable for state agencies.

The **Special Traffic Enforcement (STEP) Officer(s)** work Overtime Enforcement Only grants. On this project, the STEP officer is defined as a non-individual officer. All grant funded hours worked as a STEP Officer must be over and beyond the officer's normal work hours for his/her agency.

The **Individual Officer(s)** on this project is defined as an officer working enforcement at approximately 2080 hours at an approximate rate of pay per hour. (Continuation Projects Only)

**Individual Officer Criteria:** The MS Office of Highway Safety may provide funding for a currently approved Individual DUI Officer. To maintain funding for an individual officer, an agency must be a continuation project and meet 60% of the following criteria:

- At least (1) DUI Fatal in 2023.
- At least (1) DUI Injury in 2023.
- Top 30 Alcohol or Drug Fatality County.
- FY25 Grant Funded Arrests of 52 or higher, per officer.
- Met or Exceeded Performance Measures agreed upon by agency in FY25 Grant Agreement

Personnel Title:	% of Time	Regular Rate of Pay	Overtime Rate of Pay	# of Hours	Total

The regular and overtime rate of pay noted above should be the rate of pay the officer is paid by the agency. The rate of pay should not be increased for grant purposes. If approved for funding, all pay rates requested for reimbursement will be verified with the agency check stub and/or agency payroll documentation.

- Individual Officer @ approx.  $(\text{rate of pay}) \times \text{approx. } (\# \text{ of hours}) = (\text{total salary})$   
Over-time or regular time above and beyond normal work hours @ approx.  $(\text{rate of pay}) \times \text{approx. } (\# \text{ of hours}) = (\text{total amount})$
- STEP Officers over-time or regular time above and beyond normal work hours @ approx.  $(\text{rate of pay}) \times \text{approx. } (\# \text{ of hours}) = (\text{total amount})$

- Dispatcher over-time or regular time above and beyond normal work hours @ approx.  $\frac{\text{rate of pay}}{\text{rate of pay}} \times \text{approx. } (\# \text{ of hours}) = (\text{total salary})$
- Jailer over-time or regular time above and beyond normal work hours @ approx.  $\frac{\text{rate of pay}}{\text{rate of pay}} \times \text{approx. } (\# \text{ of hours}) = (\text{total salary})$
- Transporter over-time or regular time above and beyond normal work hours @ approx.  $\frac{\text{rate of pay}}{\text{rate of pay}} \times \text{approx. } (\# \text{ of hours}) = (\text{total salary})$

### **(STATE AGENCY ONLY)**

Fringe Amounts: When a State law enforcement agency includes overtime salary or wages, traffic safety funds can pay for the additional cost of fringe benefits (FICA and Retirement only).

Submit information for proposed fringe amounts per project staff that will be funded with federal funds under the grant agreement.

Personnel:	Fringe Item (FICA and/or Retirement):	%	Total
<b>Total Fringe:</b>			

### **Examples of Fringe Amounts. Add any additional Fringe expenses as needed.**

- $(\text{Personnel}) - \frac{(\text{total of salary being claimed above}) \times 7.65\%}{(\text{total of salary being claimed above}) \times (\% \text{ being requested})} = (\text{total FICA})$   
 $\frac{(\text{total of salary being claimed above}) \times (\% \text{ being requested})}{(\text{total of salary being claimed above}) \times (\% \text{ being requested})} = (\text{total Retirement})$   
 Total fringe =  $(\text{total fringe})$

### **FY27 Proposed Contractual Services Expenses:**

Include a detailed assessment of contractual services within the program area in which you will be applying. Also, include a cost estimate for all contractual needs (rental, shipping costs, etc.). All expenses must be in accordance with current state and federal guidelines.

Type of Contractual Services Expenses:	Quantity/Amount of Service/Amount per Month:	Total Costs of Expenses:
<b>Total Contractual Service Expense:</b>		

#### **Examples of Proposed Contractual Service Expenses:**

(Type of Service) - (Quantity) X (Price) = (total)

(Type of Service) - (Amount of Service) X (% being requested) = (amount to reimburse)

(Type of Service) - (Amount per month) X 12 = (amount to reimburse)

#### **FY27 Proposed Travel Expenses:**

Include a detailed assessment of travel needs within the program area in which you will be applying. Also, include a cost estimate for all travel needs (airfare, hotel, hotel taxes, per diem, mileage, parking, baggage, and gratuity). All expenses must be in accordance with current state and federal guidelines.

Type of Travel:	Number of People:	Cost:	Total:
<b>Total Travel Expense:</b>			

Possible travel opportunities for FY27 funds: In-State and Out of State Conferences

#### **In-State Highway Safety Training for Law Enforcement Agencies (STORM Conference)**

- Allowable Cost: Meals only - Meals can only be claimed with an overnight hotel stay.
  - Meals (per diem total) X (#) of days = (total)
  - 20% gratuity X (Total meals) = (total)
  - Trip amount per person (total of all above)
  - Number of people (#) x (trip amount) = (total travel amount)

#### **Out of State Highway Safety Training/Conference for Law Enforcement Agencies**



- Registration fee (amount)
- Room rate (amount) X (#) of nights X (%) room taxes = (total)
- Meals (per diem total) X (#) of days = (total)
- 20% gratuity X (Total meals) = (total)
- Airfare (amount)
- Misc. (baggage, parking, taxi, etc.) (amount)
- Trip amount per person (total of all above)
- Number of people (#) x (trip amount) = (total travel amount)

### **FY27 Proposed Equipment:**

Grant funding must be tied to performance, data, and problem identification. **Applicants that are requesting equipment only applications will not be funded.** Please list the cost for each piece of equipment requested.

**Important Note: MOHS defines major equipment as “...each item \$1,000.00” or more. All computers regardless of value are considered equipment. All other items must be requested under Commodities.**

Federal guidelines require equipment purchased must be essential to the project. If any equipment is requested in the application, **please include quotes (0 to \$5,000.00 requires one quote, over \$5,000.00 requires two quotes)** for the equipment, equipment descriptions and a thorough explanation of the use of the equipment and how it will impact the target and the agency problem identification.

All equipment must be approved by MOHS and/or NHTSA, be included on the Conforming Product List (CPL) and must be used specifically for the purposes for which is purchased. CPL list can be found at:

- Alcohol Screening Devices: (Only 154/405D/402PTS)  
<http://www.gpo.gov/fdsys/pkg/FR-2012-06-14/pdf/2012-14582.pdf>
- Breath Alcohol Measurement Devices: (Only 154/405D/402PTS)  
<http://www.gpo.gov/fdsys/pkg/FR-2012-06-14/pdf/2012-14581.pdf>
- Calibrating Units for Breath Alcohol Testers (Only 154/405D/402PTS)  
[http://www.dot.gov/sites/dot.dev/files/docs/20121022\\_CPL\\_Calibrating\\_Units.pdf](http://www.dot.gov/sites/dot.dev/files/docs/20121022_CPL_Calibrating_Units.pdf)
- Radar Speed –Measuring Devices (Only 402PTS)  
<http://www.nhtsa.gov/people/injury/enforce/SpeedMeasure/radarcpldec162002.htm>
- Lidar Speed-Measuring Devices (Only 402PTS)  
<http://icsw.nhtsa.gov/people/injury/enforce/SpeedMeasure/lidarcpldec162002.pdf>

**Unallowable equipment for FY27: Guns, Ammunition, Uniforms, Vehicles, Body Armor, Body Cameras. Radar and/or lidars are unallowable under Alcohol/Impaired Driving funding sources.**

Type of Equipment:	# Requested:	Cost Per Item (Quote Required):	Line Total:
<b>Total Equipment Expense:</b>			

**Examples of Proposed Equipment Expenses:**

(Equipment name): (Quantity) X (Price) = (total)

**FY27 Proposed Commodities:**

Include a detailed assessment of other grant expenses within the program area in which you are applying. Also, include a cost estimate for all additional grant expenses (mouthpieces, gloves, traffic safety cones, flashlights, reflective safety vests, etc.) based on current state and federal guidelines.

Federal guidelines require commodities purchased must be essential to the project. If any commodities are requested in the application, **please include quotes (0 to \$5,000.00 requires one quote, over \$5,000.00 requires two quotes)** for the commodities, commodities descriptions and a thorough explanation of the use of the commodities and how it will impact the target and the agency problem identification.

Type of Commodity Expenses:	Quantity	Cost Per Item (Quote Required):	Total of Expense:
<b>Total of Commodity Expenses:</b>			

**Examples of Proposed Commodities Expenses:**

(Type of Service): (Quantity) X (Price) = (total)

## **Mississippi Office of Highway Safety**

### **MOHS FY27 Application Submission**

The application submitted to the MOHS is a request for funds. Funding is based on funds available to the MOHS through federal and state funds. Application requests received are not guaranteed and will be subject to be adjusted, as funding is available.

Each application will be reviewed by the MOHS staff and management for application completeness, data provided, citation information, budget requests of personnel, contractual services, travel, equipment, and other expenses requested to enhance the already existing program. The proposed targets, performance measure and strategies are also reviewed for effectiveness and efficiency.

Applications received from continuation grant agencies will be reviewed by MOHS staff and management for application completeness, data provided, citation information, budget requests of personnel, contractual services, travel, equipment, and other expenses requested to enhance the already existing program. Grants will also be funded based on the review of past grant performance of meeting targets and performance measures, expenditure of previous grant funds and information from program documentation and assessments.

The MOHS grant program is a data driven program and all applications must represent a need and the ability to help reach the State's target and performance measures to help reduce fatalities, crashes, and injuries.

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### **Incomplete Applications:**

If all sections of this Application are not filled out, documentation provided and/or justifications provided, this Application will not be considered for review and/or approval. This includes missing signatures.

### **Agreement of Understanding and Compliance:**

The Agreement of Understanding and Compliance documents will be attached within the FY27 Grant Agreement. The Applicant will be required to sign all compliance documents upon receipt of the finalized Grant Agreement between the State, MOHS, and applicant. Certifications and assurances will be included in the Grant Agreement.

## **REMINDER**

### **Applications must include:**

- **FY27 Application (with Signatory Official signature and date included)**
- **Most Recent Financial Audit of Agency**
- **Cost Allocation of Contractual Services (If Applicable)**
- **Quotes for Equipment and Commodities (If Applicable)**
- **Applications are due: January 30, 2026**

### **Contact Information:**

**Mississippi Office of Highway Safety  
Mississippi Department of Public Safety  
Division of Public Safety Planning  
P.O. Box 1633  
Canton, Mississippi 39046  
Office – 601-391-4924  
Email: [mohs@dps.ms.gov](mailto:mohs@dps.ms.gov)  
Website: [www.dps.ms.gov](http://www.dps.ms.gov)**

**From:** [KERRY MINNINGER](#)  
**To:** [Lindsay Kellum](#); [Scott Maugh](#)  
**Subject:** Fw: Funding Opportunity: Traffic Safety Grants for Public Safety Agencies  
**Date:** Tuesday, December 23, 2025 2:27:12 PM

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[Sent from AT&T Yahoo Mail for iPhone](#)

Begin forwarded message:

On Tuesday, December 23, 2025, 10:31 AM, 911.gov Updates <[911.gov@public.govdelivery.com](mailto:911.gov@public.govdelivery.com)> wrote:

Header



**Funding Available for Roadway Safety  
Projects and Research**

## *Road to Zero Community Traffic Safety 2026 Grants*

The National Highway Traffic Safety Administration (NHTSA) Office of EMS (OEMS) encourages EMS and 911 agencies to learn more about applying for 2026 Road to Zero Community Traffic Safety Grants. Funded by NHTSA, these grants support projects and research to improve roadway safety, address disparities in mobility safety and access, and work toward achieving zero traffic fatalities. **Applications are due January 16, 2026, at 11:59 p.m. ET.**

### **Apply Here**

Awarded grant recipients will receive one year of funding to implement a project aligned with one or more components of the Safe System Approach to traffic safety: Safer People, Safer Vehicles, Safer Speeds, Safer Roads and Post-Crash Care. Post-crash care is essential for improving the survivability of crashes through expedient access to emergency medical care, creating safe conditions for first responders and reducing the risk of secondary crashes through traffic incident management practices.

For more information including details on grant requirements, recordings of informational webinar dates and a list of past awarded projects, visit the [National Safety Council's page on Community Traffic Safety Grants](#).

**[Sign up](#) to receive the latest news from NHTSA's National 911 Program, including webinars, newsletters and industry updates.**

### **Contact Us**

1200 New Jersey Avenue, SE  
Washington, DC 20590  
[nhtsa.national911@dot.gov](mailto:nhtsa.national911@dot.gov)

[911.gov](#)

[NHTSA](#)

[DOT](#)

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[Home \(https://nsc.org\)](https://nsc.org)[View Your Submissions \(/login?ReturnUrl=/user%2F](#)

Section 8, IE)

[\(https://nsc.org\)](https://nsc.org)

## 2026 Road to Zero Traffic Safety Grants

Ends on Fri, Jan 16, 2026 11:59 PM

Application deadline is **January 16, 2026 at 11:59 pm Eastern**

### 2026 Road to Zero Traffic Safety Grants

**Road to Zero Coalition:** Launched in 2016 as a partnership between the U.S. Department of Transportation National Highway Traffic Safety Administration (NHTSA) and the National Safety Council (NSC), the Road to Zero Coalition has the goal of ending fatalities on our nation's roads by 2050. Tens of thousands of people die on U.S. roads in preventable crashes each year, with record high numbers of deaths for pedestrians and cyclists seen in recent years. To address this devastating reality and work towards a safer future, the Road to Zero Coalition, made up of over 1,800 member organizations, brings a cross-sector approach to implementing proven techniques. RTZ shares innovative research and actionable information, and advances the conversation around transportation safety through its three-pillar framework focused on:

- Doubling down on what works through proven, evidence-based strategies
- Advancing life-saving technology in vehicles and infrastructure
- Prioritizing safety by adopting a Safe System Approach (<https://www.transportation.gov/NRSS/SafeSystem>) and creating a positive safety culture

**Road to Zero Grant Program:** The Road to Zero Traffic Safety Grant Program is focused on supporting innovative and promising approaches for implementing evidence-based countermeasures, supporting a Safe System approach, and performing necessary research to address traffic fatalities and serious injuries. [Learn more about the Road to Zero Grant Program \(https://www.nsc.org/road/resources/road-to-zero/road-to-zero-grants\)](https://www.nsc.org/road/resources/road-to-zero/road-to-zero-grants) and the work of previous grantees.

- Proposals should demonstrate the promising nature of the countermeasure by describing the innovative implementation approach, citing the evidence of effectiveness or identifying how effectiveness will be evaluated, and/or discussing how the project fills a gap or addresses existing disparities in traffic safety.
- Proposed projects should have measurable objectives and generalizable results. That is, projects should demonstrate innovative approaches that could be replicated in other locations or scaled up to a broader level.
- Grants are intended for comprehensive projects involving planning and evaluation. **Funding is unlikely for requests that are primarily for one-off purchases of equipment or materials.**
- The scope of work should be realistically achievable within a one-year time frame; funded extensions are not available.



- Proposals from past Road to Zero grantees are acceptable. They may be for new projects or for additional innovations on the previous project (i.e. phase #2) but not a continuation of any current or previous project.

### Eligibility

- Applicant must be a Road to Zero Coalition Member (<https://docs.google.com/forms/d/e/1FAIpQLSdnyUsLhdhd-uNMcjsKxa97ezGhxGuxhUfuKxiqb96Lo4Wfw/viewform?c=0&w=1>)
- Applicant must be an organization or other entity. Individuals cannot apply.
- Government Entities (cities, states, counties, governors' safety offices, etc.) and private sector companies also qualify.
- Proposed programs must operate within the United States.
- Federally-recognized Indian Tribes, Tribal Organizations, and Urban Indian Organizations are also eligible.

### Funding

- Organizations may apply for a one-year grant.
- Supplanting is prohibited. "Supplanting" is defined as the "Use of Federal funds to support personnel or an activity that is already supported (paid for) by any other funds".
- Proposals selected will be reimbursed for mutually agreed grant expenses.
- Awarded grants are contingent upon the availability of funds; awards may be given in the range of \$50,000 - \$200,000.

### Timeline

- Grant applications are due by January 16, 2026 at 11:59 pm Eastern. This deadline is firm and cannot be extended.**
- Successful applicants will be notified in Spring 2026.
- Grant work will have an expected completion date of on or before one year after the date of the award.

### Reporting

- Proposals selected will be required to submit monthly reports and documentation showing objectives that have been met.
- Documentation will show objectives that have been met, time spent, and expenses incurred for grant activity.
- Grantees will submit monthly invoices for reimbursement using guidelines set out by Road to Zero and the National Safety Council.
- Grantees will be expected to have quarterly meetings with Road to Zero staff.
- Grantees will be expected to submit a formal final report detailing the project objectives and results.
- Grantees will be expected to participate in promotional activities for the grant program and the funded projects including presenting on webinars and other meetings.
- These grants are subject to the Federal funding requirements under CFDA #20.614.

### Review Committee

- All submissions will undergo a technical review by National Safety Council staff, and will then be forwarded to an external Review Selection Committee for consideration.
- Committee members will include individuals such as business leaders, safety advocates, researchers, etc.
- Individuals and/or organizations applying for grants will not be eligible to serve on the Review Selection Committee.
- Final evaluation of the grant application will be composed of evaluation and scoring by the Review Selection Committee and National Safety Council staff.

### Award Information


- \$750,000 dollars will be disbursed per year, and the requested amounts must be between \$50,000 and \$200,000.

**Grant applications are due by 11:59 pm (Eastern time) January 16, 2026. If you have questions email us at [roadtozero@nsc.org](mailto:roadtozero@nsc.org). National Safety Council and Road to Zero Coalition staff cannot comment or provide guidance on the strength or compatibility of a proposed project.**

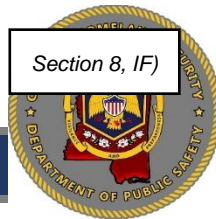
Section 8, IE)

**We use Submittable to accept and review our submissions.**

**[Submit Application \(/login?returnUrl=%2fsubmit%2f335153%2f2026-road-to-zero-traffic-safety-grants\)](/login?returnUrl=%2fsubmit%2f335153%2f2026-road-to-zero-traffic-safety-grants)**

 [Technical Help \(https://www.submittable.com/help/submitter?orgId=9717\)](https://www.submittable.com/help/submitter?orgId=9717) | [Privacy Policy \(http://www.submittable.com/privacy\)](http://www.submittable.com/privacy)

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## Mississippi Office of Homeland Security

### Mississippi Office of Homeland Security State and Local Cybersecurity Grant Program (SLCGP) Notice of Funding Announcement January 5, 2026

The purpose of this announcement is to provide guidance for submitting grant applications for the upcoming State and Local Cybersecurity Grant Program (SLCGP). All applications must clearly demonstrate alignment with the following SLCGP objectives:

#### SLCGP Objectives:

- Objective 1: Develop and establish appropriate governance structures, including developing, implementing, or revising cybersecurity plans, to improve capabilities to respond to cybersecurity incidents and ensure continuity of operations.
- Objective 2: Understand their current cybersecurity posture and areas for improvement based on continuous testing, evaluation, and structured assessments.
- Objective 3: Implement security protections commensurate with risk.
- Objective 4: Ensure organization personnel are appropriately trained in cybersecurity, commensurate with responsibility.

Applicants must fill out the application form in its entirety. Incomplete applications will not be considered for review. Projects that meet one or more of the SLCGP Objectives will be prioritized and reviewed first for funding consideration. Project requests that fall outside the federal objectives may still be reviewed; however, they will be considered secondary to those that directly align with the program's objectives.

**Eligibility:** This grant solicitation is only open to agencies and local entities that have submitted a Memorandum of Understanding (MOU) and Consent for Batch 1, Batch 2, and Batch 3 of the program. All other interested agencies or entities that have not yet provided the required MOU and Consent will be forwarded information on how to participate in future batches, which are anticipated to open in Summer 2026.

**Allowable Costs:** For the upcoming application solicitation, the MOHS will focus on the following priority funding areas.

- Contractual Services
- Equipment
- Commodities/Supplies
- Other

**Application Release:** The Mississippi Office of Homeland Security (MOHS) will release the State and Local Cybersecurity program grant application on **Thursday, January 15, 2026**. The SLCGP application, along with the funding guidance document will be available on the MOHS website at: <https://www.homelandsecurity.ms.gov/>

**Electronic Application:** The application will be available in an electronic format. On the official release date, a link to the application will be posted on our website. The link will resemble the following format:

<https://mohsgrants.jotform.com/253526323139960>

Applications will be accepted only in electronic format and must be submitted through the official link. Upon submission, the system will automatically apply a date and time stamp. All required documents must be uploaded within the application at the time of submission, as incomplete applications will not be considered. The following documents will be required as part of the application process:

- Audit (Most Recent)
- Cybersecurity Assessment (If Applicable)
- NIMS Certifications (100, 200, 700 and 800)
- Additional Justification Statement (If Applicable)

**Virtual Grant Writing:** The MOHS will also host two (2) virtual grant writing workshops to answer questions regarding the grant and provide updates on grant funding, priority areas and information about the upcoming grant year. Please electronically register for the virtual grant writing by **Friday, January 23, 2026.**

Dates for the SLCGP grant writing sessions will be held on:

- January 28, 2025: Webinar Time: 9:00 a.m.-10:00 a.m.
- February 10, 2025: Webinar Time 9:00 a.m.-10:00 a.m.

**Instructions and Deadlines:** All applications and required documentation must be submitted electronically to the MOHS email address at [mohsgrants@dps.ms.gov](mailto:mohsgrants@dps.ms.gov) no later than **February 27, 2026, at 5:00 p.m.** Applications must be fully completed, with all required fields, information, and signatures included.

MOHS requests that all jurisdictions prioritize funding requests to address gaps and vulnerabilities identified through a needs assessment. Funding is limited, projects addressing high-priority gaps and vulnerabilities, and those that meet state priorities, will be funded.

Applications and required documentation submitted after the deadline will not be considered for funding, though they may be reviewed if additional or reallocation funding becomes available. Submission of an application does not guarantee funding, and MOHS will only review applications that fully align with the agency's funding priorities.

**FEMA Federal Grant Specific Information:** Further federal grant specific information can be found on the FEMA website at: <https://www.fema.gov/grants/preparedness/homeland-security>

**Questions:** For questions related to the grant application, guidelines or need technical assistance, please contact the MOHS email address at [mohsgrants@dps.ms.gov](mailto:mohsgrants@dps.ms.gov).

**From:** [Orlandrious Bloodsaw](#)  
**To:** [spann4116@gmail.com](mailto:spann4116@gmail.com); [Lindsay Kellum](#)  
**Subject:** JHS-CEC Mayoral Health Council: Introduction  
**Date:** Tuesday, January 6, 2026 3:53:11 PM  
**Importance:** High

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Good afternoon,

My name is Orlandrious Bloodsaw, and I serve as the Community Outreach Specialist for the Jackson Heart Study Mayoral Health Council.

We are pleased to discuss the establishment or re-establishment of the Mayoral Health Council.

At your convenience, please provide the details for any upcoming meeting so that we may ensure proper coordination and appropriate preparation to discuss the goals, expectations, and initiatives of the Council.

Please note that while Excel may have previously served as your primary point of contact, I will be fulfilling that role moving forward and will be available to assist with coordination, planning, and next steps related to this initiative.

Thank you for your time and consideration. I look forward to working collaboratively with you.

Respectfully,

*Orlandrious Bloodsaw  
Outreach Director/PrEP Navigator  
G.A. Carmichael Family Health Center  
1668 W. Peace Street  
Canton, MS 39046  
Office: (601) 859 5213 ext:2787  
Cell: (601) 339 4291  
[obloodsaw@gacfhc.org](mailto:obloodsaw@gacfhc.org)*

## **SUBAWARD AGREEMENT**

This Subaward Agreement (the “Agreement”) is made and entered into as of January 1, 2026 (the “Effective Date”), by and between G.A. Carmichael Family Health Center, Inc., a not-for-profit corporation organized under the laws of Mississippi with its principal place of business at 1668 West Peace Street, Canton, Mississippi 39046 (hereinafter referred to as the “Prime Recipient”), and the City of Gluckstadt, MS, a municipal corporation organized under the laws of the State of Mississippi with its principal place of business at 343 Distribution Drive, Madison MS 39110 (hereinafter referred to as the “Subrecipient”).

### **RECITALS**

WHEREAS, the Jackson Heart Study (“JHS”), initiated in 1998, is a longitudinal investigation of risk factors associated with the disproportionate burden of cardiovascular disease (“CVD”) in African-Americans;

WHEREAS, Prime Recipient has entered into Contract Number 75N92025D00041 (the “Prime Award”) with the National Institutes of Health, National Heart, Lung, and Blood Institutes (hereinafter referred to as “NIH” or “Awarding Agency”) to provide a Community Engagement Center (“CEC”) to support activities to promote cardiovascular health in the Jackson community and beyond;

WHEREAS, the CEC will continue to support novel epidemiologic research on CVD and related heart, lung, blood, and sleep diseases in a multi-generational African-American cohort, serve as a resource to the scientific community for future research, promote cardiovascular health in the local community, and encourage underrepresented minority students to pursue biomedical careers;

WHEREAS, the Prime Recipient desires to engage the Subrecipient to perform community-based health outreach activities, including blood pressure screenings, documentation, health education, and referrals to health services as required under the Prime Award;

WHEREAS, the Subrecipient possesses the necessary qualifications, expertise, facilities, and personnel to perform such work;

WHEREAS, the Prime Recipient is authorized under the terms of the Prime Award to enter into this Agreement with the Subrecipient for the performance of a portion of the work required under the Prime Award; and

WHEREAS, the Parties desire to establish the terms and conditions under which the Subrecipient will perform such work.

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

## **AGREEMENT**

### **Article I. Scope of Work**

1.1. Statement of Work. The Subrecipient shall perform the work described in Attachment A, “Statement of Work” (the “Work”), which is attached hereto and incorporated herein by reference. The Subrecipient shall work independently and not as an agent of the Prime Recipient. The Subrecipient shall be required to furnish all the necessary services, qualified personnel, material, equipment, and facilities, not otherwise provided by the Prime Recipient. The Subrecipient shall perform the Work in accordance with the terms and conditions of this Agreement and the applicable terms and conditions of the Prime Award.

1.2. Changes to Scope of Work. Any changes to the Statement of Work must be made in writing and executed by authorized representatives of both parties. The Prime Recipient may, from time to time, request changes in the Statement of Work to be performed by the Subrecipient. If such changes cause an increase or decrease in the cost or time required for performance of the Work, an equitable adjustment shall be made, and this Agreement shall be modified accordingly.

1.3. Key Personnel. Subrecipient Principal Investigator and any other Subrecipient personnel identified in the Agreement (“Key Personnel”) is considered essential to the work to be performed under the Agreement. Any change in Key Personnel or reduction in Key Personnel commitment shall be proposed in writing for review and approval of Prime Recipient. In the event that Subrecipient desires to replace Key Personnel, Subrecipient shall notify the Prime Recipient in writing within five (5) business days of the date of such replacement and shall propose substitute Key Personnel, identifying the proposed substitute in the notice. The Principal Investigator shall notify Subrecipient within ten (10) business days after receipt of the notice whether it will continue the Agreement with the substitute Key Personnel or terminate the Agreement.

### **Article II. Period of Performance**

2.1. Term. The period of performance of this Agreement shall commence on January 1, 2026 and shall continue through September 14, 2026 (the “Term”), unless earlier terminated in accordance with the provisions of this Agreement. The initial period of performance of this Agreement is subject to the approval of NIH. Thereafter, the Agreement will extend for an

additional period of one-year subject to the express agreement of the parties without further NIH approval.

2.2. Extension. The Term of this Agreement may be extended by mutual written agreement of the Parties. Any extension shall be contingent upon satisfactory performance by the Subrecipient and the availability of funds.

### **Article III. Compensation and Payment**

3.1. Invoicing. The Subrecipient shall submit invoices to the Prime Recipient on a Monthly basis. Each invoice shall include:

1. Subrecipient's name and address
2. Invoice date and number
3. Agreement number
4. Period covered by the invoice
5. Total amount requested
6. Itemized costs by budget category
7. Cumulative costs to date
8. A monthly written report detailing activities that have been conducted to date, including a brief summary of planned activities for the following month. Prime Recipient may request additional details.
9. Certification that the invoice is true and correct

Invoices shall be submitted to:

G.A. Carmichael Family Health Center, Inc.  
 Attention: Tasha Brown, Director of Population Health  
 1668 West Peace Street  
 Canton, Mississippi 39046  
 Email: tashabrown@gacfhc.org

3.2. Payment Terms. The Prime Recipient shall pay all properly submitted and undisputed invoices within thirty (30) days of receipt. Payment may be withheld, in whole or in part, in the event of the Subrecipient's non-compliance with any term or condition of this Agreement or the Prime Award.



3.3. Financial Records. The Subrecipient shall maintain accurate and complete financial records of all costs incurred and payments received under this Agreement in accordance with generally accepted accounting principles and practices. Such records shall be made available to the Prime Recipient, the NIH, and the Comptroller General of the United States, or any of their duly authorized representatives, upon request.

3.4. Base Period Cost. The total estimated cost of the Base Period of performance under this task order is Six Thousand Dollars (\$6,000.00).

3.5. Period of Performance. Unless the Government exercises its option(s) pursuant to FAR Clause 52.217-9, *Option to Extend the Term of the Contract*, this task order consists solely of the Base Period of performance.

3.6. Options to Extend the Term. Pursuant to FAR Clause 52.217-9, Option to Extend the Term of the Contract, the Government may, by unilateral modification, extend the term of this task order and require the Contractor to perform one or more option periods. Any such option must be exercised by the Government prior to the expiration of the then-current period of performance in accordance with the notice requirements of that clause.

If the Government exercises an option period, the estimated cost of this task order shall be increased as follows:

Period Total Estimated Cost	Period Total Estimated Cost
Base Period: September 15, 2025 – September 14, 2026	\$6,000
Option period 1: September 15, 2026 – September 14, 2027	\$6,000
Option Period 2: September 15, 2027 – September 14, 2028	\$6,000
Option Period 3: September 15, 2028 – September 14, 2029	\$6,000
Option Period 4: September 15, 2029 – September 14, 2030	\$6,000

Total Base and Option Periods:

\$30,000

#### Article IV. Audits and Records

4.1. Record Retention. All records and documents pertinent to each year of this Agreement shall be retained by the Subrecipient in accordance with FAR Subpart 4.7, "Contractor Records Retention", and for a period of five years following the Subrecipient's final payment. Records that are the subject matter of audits, appeals, litigation, or the settlement of claims arising out of the performance of the Agreement shall be retained until such audits, appeals, litigation, or claims have been disposed of, or until the end of the regular five-year retention period, whichever is later. Unless court actions or audit proceedings have been initiated, the Subrecipient may substitute copies made by microfilming, photocopying, or similar methods for the original records.

4.2. Audits. The NIH-NHLBI, Comptroller General of the United States, or any of their duly authorized representatives, shall have access to any pertinent books, documents, papers and records of the Subrecipient, including patient records and research data to make audits, examinations, excerpts and transcripts. Further, any negotiated contract in excess of \$10,000 made by the Subrecipient with any lower-tier subcontractor for effort or material necessary to perform the Work shall include a provision to the effect that the NIH-NHLBI, the Comptroller General, or any of their duly authorized representatives shall have access to pertinent records for similar purposes. The rights of access to records shall not be limited to the required retention period, but shall last as long as the records are retained.

4.3. Site Visits. The Prime Recipient, NIH-NHLBI, or their duly authorized representatives shall have the right, at all reasonable times, to make site visits whenever and wherever the Work is performed under this Agreement, to review project accomplishments, and to provide such technical assistance as may be required. If a site visit is made, the Subrecipient shall provide all reasonable facilities and assistance for the site visitors' safety and convenience in the performance of their duties. The Subrecipient shall provide the Prime Recipient with any support needed to complete a site visit reports within ten (10) business days following such site visit. Support of such site visits and reports by Subrecipient shall be at no additional cost or price to Prime Recipient.

#### Article V. Compliance with Laws and Regulations

5.1. General Compliance. The Subrecipient shall comply with all applicable federal, state, and local laws, regulations, and policies, including but not limited to those specifically referenced in this Agreement and the Prime Award.

5.2. Equal Opportunity. The Subrecipient understands that the Prime Recipient is an equal opportunity employer and therefore maintains a policy which prohibits unlawful discrimination based on race, color, creed, sex, age, national origin, physical handicap, disability, or any other consideration made unlawful by federal, state, or local laws. All such discrimination is unlawful and the Subrecipient agrees during the term of the Agreement that the Subrecipient shall strictly adhere to this policy in its employment practices and the provision of services.

5.3. Federal Law. Subrecipient shall comply with all Federal statutes relating to non-discrimination. These include, but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352), which prohibits discrimination on the basis of race, color, or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§ 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§ 6101-6107), which prohibits discrimination on the basis of age; and (e) the requirements of any other nondiscrimination statute(s) which may apply to the proposal.

5.4. HIPAA/Protected Health Information ("PHI"). The Parties acknowledge that they entered a Business Associate Agreement ("BAA") for the purpose of complying with the HIPAA Rules and the HITECH Act. The incorporation of the BAA into the Agreement creates a unified agreement between the Parties with respect to their business relationship, including the exchange, handling, and protection of PHI. The termination of the BAA for any reason shall constitute grounds for termination of the Agreement to the extent that the Agreement requires the exchange of PHI. The obligations set forth in the BAA with respect to PHI shall survive the termination of the Agreement as outlined in the Termination section of the BAA.

5.5. Debarment and Suspension. The Subrecipient certifies that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.

The Subrecipient shall immediately notify the Prime Recipient if, during the Term of this Agreement, the Subrecipient or any of its principals become debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in any federal transaction.

5.6. Drug-Free Workplace. The Subrecipient certifies that it will provide a drug-free workplace in accordance with the Drug-Free Workplace Act of 1988 (41 U.S.C. §§ 8101-8106) and its

implementing regulations.

5.7. Anti-Lobbying. The Subrecipient certifies that no federal appropriated funds have been paid or will be paid, by or on behalf of the Subrecipient, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.

5.8. Conflict of Interest. The Subrecipient shall comply with the NIH regulations on conflict of interest, including but not limited to those outlined in 42 CFR Part 50, Subpart F, “Responsibility of Applicants for Promoting Objectivity in Research for which PHS Funding is Sought” and 45 CFR Part 94, “Responsible Prospective Contractors”.

The Subrecipient shall report to the Prime Recipient any conflicting financial interest of any other person responsible for the design, conduct, or reporting of the Work within three (3) business days of identifying the conflict.

## **Article VI. Intellectual Property**

6.1. Background Intellectual Property. Each party shall retain ownership of all intellectual property rights in any inventions, discoveries, materials, methods, processes, techniques, know-how, data, information, and other technology that were owned or controlled by such party prior to the Effective Date or that are developed or acquired by such party independently of this Agreement (collectively, “Background Intellectual Property”).

6.2. Inventions. Ownership of any invention, discovery, or improvement conceived or first reduced to practice in the performance of the Work under this Agreement (each, an “Invention”) shall follow the provisions of the Bayh-Dole Act (35 U.S.C. §§ 200-212) and the implementing regulations at 37 CFR Part 401.

The Subrecipient shall promptly disclose to the Prime Recipient, in writing, each Invention that is or may be patentable and that was conceived or first reduced to practice in the performance of the Work. The Subrecipient shall elect in writing whether it will retain title to any such Invention within two (2) years of disclosure to the Prime Recipient.

6.3. Patent Applications. If the Subrecipient elects to retain title to an Invention, the Subrecipient shall file a patent application on such Invention within one (1) year after election

or prior to the end of any statutory period in which valid patent protection can be obtained in the United States, whichever is earlier.

The Subrecipient shall include the following statement in the specification of any patent application filed on an Invention and any patent issuing thereon: "This invention was made with government support under Contract Number 75N92025D00041 awarded by the National Institutes of Health. The government has certain rights in the invention."

6.4. Government Rights. The Subrecipient acknowledges that the federal government shall have the rights set forth in the Bayh-Dole Act and the implementing regulations with respect to any Invention, including but not limited to:

1. A nonexclusive, nontransferable, irrevocable, paid-up license to practice or have practiced for or on behalf of the United States any Invention throughout the world; and
2. March-in rights as set forth in 35 U.S.C. § 203.

6.5. Copyrights. The Subrecipient shall have the right to copyright any work that is subject to copyright and that was developed under this Agreement. The Prime Recipient and the federal government shall have a royalty-free, nonexclusive, irrevocable right to reproduce, publish, or otherwise use, and to authorize others to use, any such copyrighted work for federal purposes.

6.6. Data Rights. The Prime Recipient and the federal government shall have unlimited rights in all data first produced in the performance of the Work, except as otherwise provided in this Agreement or the Prime Award.

## **Article VII. Confidential Information**

7.1. Definition. "Confidential Information" means any information disclosed by one party (the "Disclosing Party") to the other party (the "Receiving Party") in connection with this Agreement that is marked as "Confidential" or "Proprietary" or that, given the nature of the information and the circumstances of disclosure, would reasonably be considered confidential or proprietary.

Confidential Information does not include information that:

1. Is or becomes publicly available through no fault of the Receiving Party;
2. Is already known to the Receiving Party at the time of disclosure, as evidenced by the Receiving Party's written records;
3. Is independently developed by the Receiving Party without use of or reference to the Disclosing Party's Confidential Information;

4. Is rightfully obtained by the Receiving Party from a third party without restriction on use or disclosure; and
5. Is required to be disclosed by law, regulation, or court order, provided that the Receiving Party gives the Disclosing Party prompt written notice of such requirement and cooperates with the Disclosing Party in seeking a protective order or other appropriate remedy.

7.2. Obligations. The Receiving Party shall:

1. Use the Disclosing Party's Confidential Information solely for the purpose of performing its obligations under this Agreement;
2. Protect the Disclosing Party's Confidential Information with at least the same degree of care that it uses to protect its own confidential information, but in no event less than reasonable care;
3. Not disclose the Disclosing Party's Confidential Information to any third party without the Disclosing Party's prior written consent, except as expressly permitted by this Agreement; and
4. Limit access to the Disclosing Party's Confidential Information to those of its employees, agents, and contractors who need such access for purposes of performing this Agreement and who are bound by obligations of confidentiality at least as restrictive as those set forth in this Agreement.

7.3. Return or Destruction. Upon the expiration or termination of this Agreement, or upon the Disclosing Party's earlier request, the Receiving Party shall promptly return to the Disclosing Party all copies of the Disclosing Party's Confidential Information or, at the Disclosing Party's option, destroy all copies of the Disclosing Party's Confidential Information and certify such destruction in writing to the Disclosing Party.

7.4. Survival. The obligations of confidentiality and non-use set forth in this Article shall survive the expiration or termination of this Agreement for a period of five (5) years.

## **Article VIII. Publications and Publicity**

8.1. Publications. The Subrecipient shall have the right to publish or otherwise disclose the results of the Work, subject to the following:

1. The Subrecipient shall provide the Prime Recipient with a copy of any proposed publication or presentation at least thirty (30) days prior to submission for publication or presentation;
2. The Prime Recipient may request that the Subrecipient delay publication or presentation for up to an additional sixty (60) days to allow for the filing of patent

applications or the implementation of other measures to protect intellectual property;  
and

3. The Subrecipient shall remove any of the Prime Recipient's Confidential Information from any proposed publication or presentation upon the Prime Recipient's request.

8.2. Acknowledgment. The Subrecipient shall acknowledge the support of the NIH in all publications and presentations of the results of the Work with language similar to the following: "This work was supported by the National Institutes of Health under Contract Number 75N92025D00041."

8.3. Publicity. Neither party shall use the name, logo, or trademarks of the other party or the NIH, or any adaptation thereof, in any advertising, promotional, or sales literature without the prior written consent of the owner of such name, logo, or trademark.

## **Article IX. Representations and Warranties**

9.1. Mutual Representations and Warranties. Each party represents and warrants to the other party that:

1. It has the full right, power, and authority to enter into this Agreement and to perform its obligations hereunder;
2. The execution, delivery, and performance of this Agreement by such party have been duly authorized by all necessary corporate or institutional action;
3. This Agreement constitutes the legal, valid, and binding obligation of such party, enforceable against such party in accordance with its terms; and
4. Its performance under this Agreement will not conflict with or result in a breach or violation of any agreement, understanding, or restriction to which it is a party or by which it is bound.

9.2. Subrecipient Representations and Warranties. The Subrecipient certifies, represents, and warrants to the Prime Recipient that:

1. It has the necessary expertise, facilities, and personnel to perform the Work;
2. It will perform the Work in a professional and workmanlike manner, in accordance with the highest standards of care and diligence practiced by recognized research organizations in performing services of a similar nature;
3. It will comply with all applicable laws, regulations, and policies in the performance of the Work;

4. It has not been debarred or suspended by any federal agency and will not use in any capacity the services of any person debarred or suspended by any federal agency in connection with the Work; and
5. To the best of its knowledge, the performance of the Work will not infringe or misappropriate the intellectual property rights of any third party.
6. No part of the total Agreement amount provided herein shall be paid directly or indirectly to any officer or employee of Prime Recipient as wages, compensation, or gifts in exchange for acting as officer, agent, employee, subcontractor, or consultant to Subrecipient in connection with any Work contemplated or performed relative to the Agreement.

9.3. Disclaimer. EXCEPT AS EXPRESSLY SET FORTH IN THIS AGREEMENT, NEITHER PARTY MAKES ANY REPRESENTATIONS OR WARRANTIES OF ANY KIND, WHETHER EXPRESS, IMPLIED, STATUTORY, OR OTHERWISE, AND EACH PARTY SPECIFICALLY DISCLAIMS ALL IMPLIED WARRANTIES, INCLUDING ANY WARRANTIES OF MERCHANTABILITY, FITNESS FOR A PARTICULAR PURPOSE, OR NON-INFRINGEMENT, TO THE MAXIMUM EXTENT PERMITTED BY APPLICABLE LAW.

#### **Article X. Indemnification and Limitation of Liability**

10.1. Indemnification by Subrecipient. The Subrecipient shall indemnify, defend, and hold harmless the Prime Recipient, its officers, directors, employees, and agents from and against any and all claims, damages, losses, liabilities, costs, and expenses (including reasonable attorneys' fees) arising out of or relating to:

1. The Subrecipient's breach of any representation, warranty, covenant, or obligation under this Agreement
2. The negligence, recklessness, or willful misconduct of the Subrecipient or its employees, agents, or contractors in the performance of the Work
3. Any claim that the Work or any deliverable provided by the Subrecipient infringes or misappropriates the intellectual property rights of any third party

10.2. Indemnification Procedure. The Prime Recipient shall promptly notify the Subrecipient in writing of any claim for which it seeks indemnification under this Article. The Subrecipient shall have the right to control the defense and settlement of any such claim, provided that the Subrecipient shall not settle any claim without the Prime Recipient's prior written consent if such settlement would impose any liability or obligation on the Prime Recipient.

10.3. Limitation of Liability. EXCEPT FOR BREACHES OF CONFIDENTIALITY OBLIGATIONS, INFRINGEMENT OR MISAPPROPRIATION OF INTELLECTUAL PROPERTY RIGHTS, OR INDEMNIFICATION OBLIGATIONS, IN NO EVENT SHALL EITHER PARTY BE LIABLE TO THE OTHER



PARTY FOR ANY INDIRECT, INCIDENTAL, SPECIAL, EXEMPLARY, CONSEQUENTIAL, OR PUNITIVE DAMAGES, INCLUDING, BUT NOT LIMITED TO, LOSS OF PROFITS, DATA, OR USE, HOWEVER CAUSED AND ON ANY THEORY OF LIABILITY, WHETHER IN CONTRACT, STRICT LIABILITY, OR TORT (INCLUDING NEGLIGENCE), ARISING OUT OF OR RELATED TO THIS AGREEMENT, EVEN IF SUCH PARTY HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGES.

## **Article XI. Termination**

11.1. Termination for Convenience. The Prime Recipient may terminate this Agreement, in whole or in part, for its convenience upon thirty (30) days' prior written notice to the Subrecipient. In the event of such termination, the Subrecipient shall be paid for all Work performed and non-cancelable commitments incurred prior to the effective date of termination, not to exceed the Total Cost.

11.2. Termination for Cause. Either party may terminate this Agreement for cause upon thirty (30) days' prior written notice to the other party if the other party materially breaches any provision of this Agreement and fails to cure such breach within the thirty (30) day notice period.

11.3. Termination for Loss of Funding. The Prime Recipient may terminate this Agreement immediately upon written notice to the Subrecipient if the Prime Award is terminated or if funding under the Prime Award is reduced, suspended, or otherwise becomes unavailable.

11.4. Effect of Termination. Upon the expiration or termination of this Agreement for any reason:

1. The Subrecipient shall promptly deliver to the Prime Recipient all deliverables (whether complete or incomplete) for which the Prime Recipient has paid;
2. The Subrecipient shall promptly submit to the Prime Recipient a final invoice and a final technical report;
3. Each party shall return or destroy all Confidential Information of the other party as provided in Section 8.3; and
4. The Subrecipient shall take all reasonable steps to minimize termination costs.

11.5. Survival. The following provisions shall survive the expiration or termination of this Agreement: Article IV ("Audits and Records"), Article VI ("Intellectual Property"), Article VII ("Confidential Information"), Article IX ("Representations and Warranties"), Article X ("Indemnification and Limitation of Liability"), Section 11.4 ("Effect of Termination"), Section 11.5 ("Survival"), and Article XII ("General Provisions").

## **Article XII. General Provisions**

12.1. Independent Contractors. The relationship between the parties is that of independent contractors. Nothing in this Agreement shall be construed to create a partnership, joint venture, employment, or agency relationship between the parties.

Subrecipient agrees that no act performed or representation made, whether oral or written, by the Subrecipient with respect to third parties shall be binding on the Prime Recipient. The Subrecipient shall, at no time act as an agent for the Prime Recipient.

12.2. Force Majeure. Neither party shall be liable for any failure or delay in performing its obligations under this Agreement if such failure or delay is caused by circumstances beyond its reasonable control, including but not limited to acts of God, natural disasters, war, terrorism, riots, civil disorders, fire, flood, strikes, labor disputes, sabotage, or governmental actions or restrictions.

The party affected by such force majeure event shall promptly notify the other party of the event and shall use reasonable efforts to resume performance as soon as possible. If a force majeure event continues for more than sixty (60) days, either party may terminate this Agreement upon written notice to the other party.

12.3. Notices. All notices, requests, consents, claims, demands, waivers, and other communications under this Agreement shall be in writing and shall be deemed to have been given:

1. When delivered by hand (with written confirmation of receipt);
2. When received by the addressee if sent by a nationally recognized overnight courier (receipt requested); or
3. On the third day after the date mailed, by certified or registered mail, return receipt requested, postage prepaid.

Such communications must be sent to the respective parties at the following addresses:

If to the Prime Recipient:

G.A. Carmichael Family Health Center, Inc.  
c/o Dr. James Coleman, Chief Executive Officer  
1668 West Peace Street  
Canton, Mississippi 39046  
[Jcoleman@gacfhc.org](mailto:Jcoleman@gacfhc.org)

With a copy to:

G.A. Carmichael Family Health Center, Inc.

Attention: Tasha Brown, Director of Population Health  
 1668 West Peace Street  
 Canton, Mississippi 39046  
 Email: tashabrown@gacfhc.org

If to the Subrecipient:

The City of Gluckstadt, MS  
 Attention: Walter C. Morrison IV, Mayor  
 343 Distribution Drive,  
 Madison (Gluckstadt) MS 39110  
 Email: wmorrison@gainsben.com

With copy to:

The City of Gluckstadt, MS  
 Attention: Lindsay Kellum, City Clerk  
 343 Distribution Drive,  
 Madison (Gluckstadt) MS 39110  
 Email: lindsay.kellum@gluckstadt.net

12.4. Assignment. Neither party may assign or otherwise transfer any of its rights or obligations under this Agreement without the prior written consent of the other party; provided, however, that either party may assign this Agreement without such consent to a successor in interest in connection with a merger, acquisition, or sale of all or substantially all of its assets. Any attempted assignment or transfer in violation of this Section shall be null and void.

12.5. Subcontracting. The Subrecipient shall not subcontract any portion of the Work without the prior written consent of the Prime Recipient. The Subrecipient shall remain fully responsible for the performance of any approved subcontractors and shall ensure that all approved subcontractors comply with the terms and conditions of this Agreement.

12.6. Amendment. This Agreement may be amended only by a written instrument signed by both parties.

12.7. Waiver. No waiver by either party of any of the provisions of this Agreement shall be effective unless explicitly set forth in writing and signed by the party so waiving. No waiver by either party shall operate or be construed as a waiver in respect of any failure, breach, or default not expressly identified by such written waiver, whether of a similar or different character, and whether occurring before or after that waiver. No failure to exercise, or delay in exercising, any right, remedy, power, or privilege arising from this Agreement shall operate or be construed as a waiver thereof.

12.8. Severability. If any term or provision of this Agreement is invalid, illegal, or unenforceable in any jurisdiction, such invalidity, illegality, or unenforceability shall not affect any other term or provision of this Agreement or invalidate or render unenforceable such term or provision in any other jurisdiction.

12.9. Governing Law. This Agreement shall be governed by and construed in accordance with the laws of the State of Mississippi without giving effect to any choice or conflict of law provision or rule.

12.10. Dispute Resolution. The parties shall attempt in good faith to resolve any dispute arising out of or relating to this Agreement promptly by negotiation between executives who have the authority to settle the controversy. If the dispute cannot be resolved through negotiation, the parties may agree to submit the dispute to mediation. If the parties cannot agree to mediation, or if mediation does not resolve the dispute, either party may pursue any remedy available at law or in equity.

12.11. Entire Agreement. This Agreement, together with all Attachments and any other documents incorporated herein by reference, constitutes the sole and entire agreement of the parties with respect to the subject matter contained herein, and supersedes all prior and contemporaneous understandings and agreements, both written and oral, with respect to such subject matter.

12.12. Counterparts. This Agreement may be executed in counterparts, each of which shall be deemed an original, but all of which together shall be deemed to be one and the same agreement. A signed copy of this Agreement delivered by facsimile, email, or other means of electronic transmission shall be deemed to have the same legal effect as delivery of an original signed copy of this Agreement.

12.13. Headings. The headings in this Agreement are for reference only and shall not affect the interpretation of this Agreement.

12.14. No Third-Party Beneficiaries. This Agreement is for the sole benefit of the parties hereto and their respective successors and permitted assigns and nothing herein, express or implied, is intended to or shall confer upon any other person or entity any legal or equitable right, benefit, or remedy of any nature whatsoever under or by reason of this Agreement.

12.15. Further Assurances. Each party shall, upon the reasonable request of the other party, execute such documents and perform such acts as may be necessary to give full effect to the terms of this Agreement.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of the Effective Date.

**PRIME RECIPIENT:**

G.A. CARMICHAEL FAMILY HEALTH CENTER, INC.

By: \_\_\_\_\_

Name:

Title:

Date: \_\_\_\_\_

**SUBRECIPIENT:**

THE CITY OF GLUCKSTADT, MS

By: \_\_\_\_\_

Name:

Title:

Date: \_\_\_\_\_

## **ATTACHMENT A: STATEMENT OF WORK**

### **Attachment A: Scope of Work**

Mayors participating in the Jackson Heart Study Community Engagement Center (CEC) Mayoral Health Council Program will be awarded funding to create healthy environments through policy and environmental change which support increased access to physical activity, healthy foods, and reduced exposure to tobacco smoke.

Priority areas include:

1. Conduct health education and awareness activities related to cardiovascular risk factor reduction and management.
2. Adopt policies to promote access to healthy foods, recreation, and reduced exposure to second-hand smoke.
3. Access to recreation through joint use agreements, complete street policies, walking or biking groups, land use policies, rehabilitating blighted areas, sidewalks, and/or improving the built environment.

#### **Objectives:**

1. **Provide strategy and structure for timely, evidence-based general and heart disease risk reduction health information, emphasizing JHS and related CVD research findings.**
2. **Conduct evidence-based health education programming throughout the JHS area, specifically heart disease risk reduction among African Americans.**
3. **Establish strategic partnerships that broaden the JHS reach.**

#### **Activity Period 1: January 1, 2026 – January 31, 2026**

- Identify an individual to serve as an MHC Coordinator and council members.
- The MHC Coordinator will conduct monthly MHC meeting (Begin discussions and planning for the upcoming city forum).
- The MHC, with support from the Community Outreach Specialist, will identify one year-round Policy, Systems, or Environmental (PSE) initiative aligned with the Council's identified community health priority and will carry out ongoing, documented activities throughout the contract period to advance its implementation.

- As an optional activity, the MHC may also conduct a health education or outreach activity in January in recognition of National Blood Donor Month to promote blood donation awareness.
- Actively participate in monthly CQI or TA and submit monthly MHC progress report (i.e., invoice and supporting documentation).

#### **Activity Period 2: February 1, 2026 – February 28, 2026**

- The MHC Coordinator will conduct monthly MHC meetings and activities (Continue planning/discussion on the Annual City Forum).
- Conduct a health activity in February in observance of American Heart Month.
- Actively participate in monthly CQI or TA and submit monthly MHC progress report.

#### **Activity Period 3: March 1, 2026 – March 31, 2026**

- The MHC Coordinator will conduct monthly MHC meetings and activities.
- Conduct Annual City Forum planning meeting.
- Report progress on the MHC's selected year-round Policy, Systems, or Environmental (PSE) Initiative. (Activities may include stakeholder engagement, drafting or reviewing policy recommendations, supporting environmental changes, or coordinating with community partners to advance the initiative).
- Actively participate in monthly CQI or TA and submit monthly MHC progress report.

#### **Activity Period 4: April 1, 2026 – April 30, 2026**

- The MHC Coordinator will conduct monthly MHC meetings and activities.
- In recognition of National Minority Health Month, MHC will conduct a health event to promote awareness of minority health disparities, support access to preventive services, and provide education that empowers communities to achieve better health outcomes.
- Actively participate in monthly CQI or TA and submit monthly MHC progress report.

#### **Activity Period 5: May 1, 2026 – May 31, 2026**

- MHC Coordinator will conduct monthly MHC meetings and activities (Discuss plans to conduct the annual City Forum).
  - Conduct a health event in recognition of Hypertension and Stroke Awareness Month in May (Collaborate with a reputable agency to host a teen summit).
- OR**
- Conduct an activity in May in recognition of “No Menthol Sunday” in support of The Center for Black Health & Equity's annual call to action highlighting tobacco's detrimental impact on Black communities.
- Actively participate in monthly CQI or TA and submit monthly MHC progress report.

**Activity Period 6: June 1, 2026 – June 30, 2026**

- MHC Coordinator will conduct monthly MHC meetings and activities.
- Report progress on the MHC's selected year-round Policy, Systems, or Environmental (PSE) Initiative.
- Conduct a City Forum assisted by CEC's Community Outreach Specialist.
- Actively participate in monthly CQI or TA and submit monthly MHC progress report.

**Activity Period 7: July 1, 2026 – July 31, 2026**

- MHC Coordinator will conduct monthly MHC meetings and activities.
- In recognition of Minority Mental Health Awareness Month, MHC will conduct a community health event to increase awareness of mental health disparities, expand access to supportive resources, and provide education that promotes overall mental well-being.
- Actively participate in monthly CQI or TA and submit monthly MHC progress report.

**Activity Period 8: August 1, 2026 – August 31, 2026**

- MHC Coordinator will conduct monthly MHC meetings and activities.
- Partner with local businesses and community organizations to host a Back-to-School Community Preventive Health Screening event in recognition of Immunization Awareness Month in August.
- Actively participate in monthly CQI or TA and submit monthly MHC progress report.

**Activity Period 9: September 1, 2026 – September 14, 2026**

- MHC Coordinator will conduct monthly MHC meetings and activities.
- Develop a Yearly Community Action Plan using information gathered at the Annual City Forum.
- Submit final progress report on the MHC's selected year-round Policy, Systems, or Environmental (PSE) Initiative.
- Actively participate in monthly CQI or TA and submit monthly MHC progress report.



**ATTACHMENT B: BUDGET**

<b>Attachment B: Budget and Payment Schedule</b>			
<b>Jackson Heart Study Community Engagement Center</b>			
<b>Mayoral Health Council (MHC)</b>			
<b>Project Period: January 1, 2026 - September 14, 2026</b>			
<b>Activity Period 1: January 1, 2026 - January 31, 2026</b>			
<b>Deliverables</b>	<b>Deliverable Documentation</b>	<b>Council</b>	<b>Coordinator</b>
Identify an individual to serve as an MHC coordinator and council members. The coordinator will reach out to potential council members, conduct monthly MHC meetings and activities and attend the 'Working Together for a Healthy City: A Toolkit for MHCs' training as scheduled.	Copy of MHC Training Certificate, Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form per activity.	\$50	\$100
The MHC Coordinator will conduct monthly MHC meeting (Begin discussions and planning for the upcoming city forum).	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form per activity.	\$25	\$50
The MHC, with support from the Community Outreach Specialist, will identify one year-round Policy, Systems, or Environmental (PSE) initiative aligned with the Council's identified community health priority and will carry out ongoing, documented activities throughout the contract period to advance its implementation.  As an optional activity, the MHC may also conduct a health education or outreach activity in January in recognition of National Blood Donor Month to promote blood donation awareness.	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form, other documentation, PSE Research Sheet etc.	\$100	\$100

Actively participate in monthly CQI or TA and submit monthly MHC progress reports (i.e., invoice and supporting documentation - see Monthly Event/Activity Data Collection Schedule).	Sign-In Sheet, Agenda, Event/Activity Data Collection Form per activity.		\$50
	<b>TOTAL</b>		<b>\$475</b>

Activity Period 2: February 1, 2026 - February 28, 2026			
Deliverables	Deliverable Documentation	Council	Coordinator
The MHC Coordinator will conduct monthly MHC meetings and activities (Continue planning/ discussion on the Annual City Forum).	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form per activity.	\$25	\$50
Conduct a health activity in February in observance of American Heart Month.	Sign-In Sheet, Agenda, Event/Activity Data Collection Form per activity.	\$300	\$225
Actively participate in monthly CQI or TA and submit monthly MHC progress report (i.e., invoice and supporting documentation - see Monthly Event/Activity Data Collection Schedule).	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form per activity.		\$50
	<b>TOTAL</b>		<b>\$650</b>

Activity Period 3: March 1, 2026 - March 31, 2026			
Deliverables	Deliverable Documentation	Council	Coordinator
The MHC Coordinator will conduct monthly MHC meetings and activities.	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form per activity.	\$25	\$50
Conduct Annual City Forum planning meeting.	Sign-In Sheet, Agenda, Event/Activity Data Collection Form per activity.	\$50	\$50
Report progress on the MHC's selected year-round Policy, Systems, or Environmental (PSE) Initiative. (Activities may include stakeholder engagement, drafting or reviewing policy recommendations, supporting environmental changes, or coordinating with community partners to advance the initiative).	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form, and PSE Progress Report.	\$100	\$100
Actively participate in monthly CQI or TA and submit monthly MHC progress report (i.e., invoice and supporting documentation - see Monthly Event/Activity Data Collection Schedule).	Sign-In Sheet, Agenda, Event/Activity Data Collection Form per activity.		\$50
	<b>TOTAL</b>		<b>\$425</b>

Activity Period 4: April 1, 2026 - April 30, 2026			
Deliverables	Deliverable Documentation	Council	Coordinator
The MHC Coordinator will conduct monthly MHC meetings and activities.	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form per activity.	\$25	\$50
In recognition of National Minority Health Month, MHC will conduct a health event to promote awareness of minority health disparities, support access to preventive services, and provide education that empowers communities to achieve better health outcomes.	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form, Action Plan.	\$300	\$200
Actively participate in monthly CQI or TA and submit monthly MHC progress report (i.e., invoice and supporting documentation - see Monthly Event/Activity Data Collection Schedule).	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form per activity.		\$50
	<b>TOTAL</b>		<b>\$625.00</b>

Activity Period 5: May 1, 2026 - May 31, 2026			
Deliverables	Deliverable Documentation	Council	Coordinator
MHC Coordinator will conduct monthly MHC meetings and activities. (Discuss plans to conduct the annual City Forum).	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form per activity.	\$25	\$50
Conduct a health event in recognition of Hypertension and Stroke awareness month in May (Collaborate with a reputable agency to host a teen summit). OR Conduct an activity in May in recognition of "No Menthol Sunday" in support of The Center for Black Health & Equity's annual call to action highlighting tobacco's detrimental impact on Black communities.	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form per activity.	\$300	\$250
Actively participate in monthly CQI or TA and submit monthly MHC progress report (i.e. invoice and supporting documentation - see Monthly Event/Activity Data Collection Schedule).	Sign-In Sheet, Agenda, Event/Activity Data Collection Form per activity.		\$50
	<b>TOTAL</b>		<b>\$675</b>

Activity Period 6: June 1, 2026 - June 30, 2026			
Deliverables	Deliverable Documentation	Council	Coordinator
MHC Coordinator will conduct monthly MHC meetings and activities.	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form per activity.	\$25	\$50
Report progress on the MHC's selected year-round Policy, Systems, or Environmental (PSE) Initiative. <i>(Activities may include stakeholder engagement, drafting or reviewing policy recommendations, supporting environmental changes, or coordinating with community partners to advance the initiative).</i>	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form, and PSE Progress Report.	\$100	\$100
Conduct a City Forum assisted by CEC's community Outreach Specialist.	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form per activity.	\$300	\$250
Actively participate in monthly CQI or TA and submit monthly MHC progress report (i.e. invoice and supporting documentation - see Monthly Event/Activity Data Collection Schedule).	Sign-In Sheet, Agenda, Event/Activity Data Collection Form per activity.		\$50
	<b>TOTAL</b>		<b>\$875</b>

Activity Period 7: July 1, 2026 - July 31, 2026			
Deliverables	Deliverable Documentation	Council	Coordinator
MHC Coordinator will conduct monthly MHC meetings and activities.	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form per activity.	\$25	\$50
In recognition of Minority Mental Health Awareness Month, MHC will conduct a community health event to increase awareness of mental health disparities, expand access to supportive resources, and provide education that promotes overall mental well-being.	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form per activity.	\$200	\$250
Actively participate in monthly CQI or TA and submit monthly MHC progress report (i.e. invoice and supporting documentation - see Monthly Event/Activity Data Collection Schedule).	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form per activity.		\$50
	<b>TOTAL</b>		<b>\$575</b>



Activity Period 8: August 1, 2026 - August 31, 2026			
Deliverables	Deliverable Documentation	Council	Coordinator
MHC Coordinator will conduct monthly MHC meetings and activities.	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form per activity.	\$25	\$50
Partner with local businesses and community organizations to host a Back-to-School Community Preventive Health Screening event in recognition of Immunization Awareness Month in August.	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form per activity.	\$500	\$300
Actively participate in monthly CQI or TA and submit monthly MHC progress report (i.e. invoice and supporting documentation - see Monthly Event/Activity Data Collection Schedule).	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form per activity.		\$50
	<b>TOTAL</b>		<b>\$925</b>

Activity Period 9: September 1, 2026 - September 14, 2026			
Deliverables	Deliverable Documentation	Council	Coordinator
MHC Coordinator will conduct monthly MHC meetings and activities.	Sign-In Sheet, Agenda, Minutes, Event/Activity Data Collection Form per activity.	\$25	\$50
Develop a Yearly Community Action Plan using information gathered at the Annual City Forum.	Sign-In Sheet, Agenda, Event/Activity Data Collection Form.	\$50	\$100
Submit final progress report on the MHC's selected year-round Policy, Systems, or Environmental (PSE) Initiative.	Final PSE Progress Report, supporting documentation (Sign-In Sheet, Agenda, etc., only if activities occurred).	\$50	\$100
Actively participate in monthly CQI or TA and submit monthly MHC progress report (i.e. invoice and supporting documentation - see Monthly Event/Activity Data Collection Schedule).	Sign-In Sheet, Agenda, Event/Activity Data Collection Form per activity.		\$50.00
	<b>TOTAL</b>		<b>\$425</b>
Attend all Community Advisory Board (CAB) meetings, as well as any additional meetings required or scheduled by the CEC.	Sign in sheets, flyers, etc.		<b>\$50</b>
Total Supplies & Materials	Invoices, Receipts, etc.	<b>\$300</b>	
	<b>Total Yearly Budget</b>	<b>\$6,000.00</b>	



Dec 22, 2025

Lindsay Kellum  
City of Gluckstadt  
343 Distribution Dr  
Madison, MS 39110-8744

RE: Grant Number **MS250-25-017**

Dear Lindsay,

It is my pleasure to inform you that the Mississippi250 Grant Committee has approved your proposal for *Threads of a Flag: The Story of Gluckstadt* and a budget of \$20,000.00. You must provide matching funds of at least \$10,000.00 in cash and \$10,000.00 in cash or in kind, for a total match of at least \$20,000.00. This award is supported with funds from the State of Mississippi.

The Mississippi Humanities Council and the America250 Mississippi Commission must be specifically and fully credited in any printed materials and in all appropriate news releases and accounts. You must give verbal notice at all programs supported by the Mississippi Humanities Council and the America250 Mississippi Commission and on printed materials for those programs.

You will find requirements and instructions for administering the grant and the required forms pertaining to reporting and accounting procedures on the America250 Mississippi grants page: <https://www.mshumanities.org/grants/america250-mississippi-grants/>. Please read these materials carefully and call our office (601-432-6752) if you have questions. You will also find a Regranting Agreement included in this award packet. Please return one copy, signed by you and the authorizing official for your organization, to our office within 5 days to indicate your acceptance of the award. No funds can be released until we have this form on file. Your project may be subject to a Mississippi Humanities Council desk audit; therefore you are advised to carefully file all supporting documentation (invoices and receipts) relating to project expenditures per Section C 1. b. of the Regranting Agreement. In the event of a desk audit, you will be required to submit copies of this documentation to the Council or its designated representative.

You should send a copy of public announcements or publications to your Congressional representatives and local members of the Legislature. We encourage you to email your thanks to our Congressional delegation, as they provide the funding for the Mississippi Humanities Council which administers your grant. Congratulations on receiving an America250 Mississippi grant! We

look forward to seeing the results of your project.

Sincerely,

Carol Andersen  
Assistant Director



### Grant Budget (MHC-1)

Your awarded budget is detailed below. You will need to refer to this budget when you fill out your grant's final report, so please store it somewhere easily retrievable.

	Award	Cost Share Cash	Cost Share In-Kind	Total
Salaries & Wages				\$0.00
Honoraria	\$10,000.00	\$10,000.00		\$20,000.00
Travel				\$0.00
Supplies				\$0.00
Printing & Duplication	\$1,500.00	\$1,500.00		\$3,000.00
Postage & Telephone				
Equipment Rental	\$3,000.00	\$3,000.00		\$6,000.00
Facilities Rental	\$500.00	\$500.00		\$1,000.00
Advertising	\$3,000.00	\$3,000.00		\$1,000.00
Indirect Costs				\$0.00
Other 1	\$2,000.00	\$2,000.00		\$4,000.00
<b>Total</b>	<b>\$20,000.00</b>	<b>\$20,000.00</b>		<b>\$40,000.00</b>

**Attn: Scott Maugh**  
 City of Gluckstadt  
 343 Distribution Dr  
 Madison, MS 39110-8744

scott.maugh@gluckstadt.net  
 (769) 567-2306

**City of Gluckstadt**  
 EIN: 87-1438222  
 UEI:

## MISSISSIPPI HUMANITIES COUNCIL REGRANTING AGREEMENT

City of Gluckstadt (grantee) hereby signifies its acceptance of a project grant in the amount of \$20,000.00 entitled *Threads of a Flag: The Story of Gluckstadt* Number MS250-25-017 from the Mississippi Humanities Council, (hereinafter called MHC). The grantee agrees to provide at least \$20,000.00 in matching funds, with at least \$10,000.00 in cash and the remainder in kind, for a total project cost of \$40,000.00. The grant period will extend from 12/1/2025 to 12/31/2026.

### **I. INTRODUCTION**

The following provisions are applicable to and binding upon recipients of grants from the Mississippi Humanities Council. The grantee should understand that acceptance of a grant creates a legal duty on the part of the grantee to use the funds in accordance with the terms of the grant and to comply with all provisions and conditions.

It is understood that whenever the MHC finds that the grantee is not complying with the terms and conditions of the grant or has diverted grant funds for purposes other than those for which they were awarded or paid, it shall make no further grants or payments on current grants until the grantee repays or arranges for repayment of the grant funds which have been improperly diverted or expended.

The grantee agrees to administer the project in compliance with the following:

#### **A. Cost Principles**

1. Only those costs set forth in the project budget, as approved by the Mississippi Humanities Council and attached to this agreement, will be charged to this grant.
2. No funds from this grant will be used to pay indirect costs, commonly referred to as overhead.
3. No funds from this grant will be used to pay costs of alcoholic beverages.
4. Necessary travel expenses will be allowed at a rate not to exceed 70 cents per mile or the current state mileage reimbursement rate for privately owned automobiles. Reasonable rental car expenses will be reimbursed. Reasonable costs of meals shall be reimbursed if receipts are submitted. Lodging shall be reimbursed on the rate of a single room, and receipt is necessary for reimbursement. Air travel within the continental U.S. is allowed at economy rate.

#### **B. Cash Requests**

Grant recipients will receive their grant award on an advance basis. Once MHC receives this signed grant agreement, it will send 90% of awarded funds. The final 10% of all grants will be paid upon receipt of all required final reports.

#### **C. Grant Accounting, Records and Reports**

1. a. The grantee agrees to maintain records and accounts consistent with generally accepted accounting principles, and to provide for such fiscal control as is necessary to assure proper disbursing of, and accounting for, project funds.
- b. The grantee certifies that accounts and supporting documentation (invoices and receipts) relating to project expenditures will be adequate to permit an accurate and expeditious audit. An audit may be made by the MHC, or by its designated representative, or by the Department of Finance and Administration or any government entity with authority to do so.
- c. The grantee will maintain records and accounts for this project for a period of not less than three years after the closing of the grant.
2. The grantee agrees to maintain records to demonstrate that cost-sharing contributions are not less than the amount indicated above, or any revision thereof which is approved by the MHC. The grantee further agrees to secure reasonable written proof of the value of these contributions to the project and to maintain such proof in a form that will permit an accurate and expeditious audit.
3. The Budget Form (MHC-1) accompanying this grant agreement is considered a part of the agreement.
4. Within ninety days of the close of the grant period, a final report is to be submitted to the MHC. The report must include:
  - a. The Final Expenditure Report, including Forms MHC-1 and MHC-2.
  - b. The Project Director's Final Report providing a detailed description of the project as it actually occurred.
  - c. Two copies of all audio-visual or literary products resulting from the project.

#### **D. Limitations on the Use of Grant Funds**

1. Grant funds must be obligated during the grant period. Obligations outstanding as of the official termination date shall be spent within thirty days thereafter.
2. Grant funds may be expended only for project purposes and activities as set forth in the proposal and budget originally approved by the MHC, or as subsequently amended and approved in writing by the MHC. Regrantees may transfer funds among direct cost categories, provided the scope or objectives of the project are not changed. Written requests for amendments must be submitted and approved prior to significant revisions of the following:
  - a. Changes of project scope, purpose, activities, dates and times, or principal participants.
  - b. Changes in the project director, fiscal agent or other professional personnel identified in the approved proposal within 30 days of the change.
  - c. Changes in the project budget which introduce or eliminate categories of expenditures.
  - d. Changes in duration of the grant period. Such changes must be requested at least fourteen days prior to the termination of the grant period.
3. Any funds received that remain uncommitted at the termination of the grant period must be returned with the

final financial report by check payable to the Mississippi Humanities Council.

4. All MHC funds, or properties acquired with MHC funds, which are determined after audit and hearing to have been improperly applied, must be returned to the Mississippi Humanities Council.

**E. Programs supported by the MHC must be open to the public without charge.**

**F. Project Income**

1. Revenue resulting from meals, materials, or sources other than the MHC must be applied to the cost of the project and should be reported as "cost-sharing" on the budget form. Any net income earned through project-related activities during the regrant period may be used to cover additional project costs. Income earned from admission or license fees and copyrights after the regrant period may be disposed of by the regrantee in any way it chooses.
2. Recipients are not required to maintain advances in interest-bearing accounts. If a recipient chooses to deposit these funds in an interest-bearing account, it may retain the first \$250 in interest earned each fiscal year. Interest earned in excess of this amount on funds advanced should be forwarded to MHC.

**G. Collection and Use of Information**

1. Two copies of any printed publication or media product funded by the grant must be furnished to the MHC.
2. COPYRIGHT: The Mississippi Humanities Council reserves non-exclusive licenses to use and reproduce, without payment, any publishable matter, including copyrighted matter, arising out of grant activities. This reservation includes any speech, talk, discussion, etc., that is any way a part of the programs covered by this agreement, but does not restrict the originator of such matter from copyrighting, publishing, or otherwise using it, provided that such use is consistent with all other provisions of this agreement.

**H. Acknowledgment of Support**

1. All publicity releases, informational brochures, printed programs, and public reports pertaining to the approved grant must acknowledge support in the following form: "This official America250 project was made possible by a grant from the Mississippi Humanities Council, through support from the State of Mississippi."
2. All films, audio and video recordings produced under a MHC grant must include acknowledgment of the MHC support, using the following wording: "This program is made possible in part by the Mississippi Humanities Council through grants from the State of Mississippi."
3. The grantee hereby agrees to publicize the project thoroughly in accordance with the plan set forth in the proposal and utilizing the suggestions provided by the Mississippi Humanities Council.

**II. Nonprofit Status**

The Mississippi Humanities Council is authorized to make grants to "groups" and defines a "group" as including "any state or other public agency, and any nonprofit society, organization/institution, association, museum, or establishment, whether or not incorporated." By accepting this grant, the recipient warrants itself to be a "group" qualified under the above definition. It is the responsibility of the grantee to notify the Mississippi Humanities Council promptly of any changes from this status.



### **III. Modifications**

No person other than the Executive Director of the MHC is authorized to modify any of the terms of this agreement. The MHC shall not be liable for any costs incurred by the grantee which are not in conformance with the terms of this agreement.

### **IV. Conditions of the Grant**

In making this grant the Mississippi Humanities Council does not assume any liability or responsibility for the actions of the grantee in carrying out the purposes of the grant.

### **V. Noncompliance**

Failure of the grantee to comply promptly with any and all provisions of this grant agreement shall be deemed sufficient cause for it to be terminated. Such termination shall be effective upon receipt by the grantee of written notice from the MHC.

### **VI. Nondiscrimination**

MHC grant recipients must execute projects, productions, workshops, and programs in accordance with the following laws, where applicable:

1. Civil Rights Act of 1964 (Title VI, Section 601)

Acceptance of this agreement signifies full compliance with Title VI of the Civil Rights Act of 1964 to the end that no person, on the grounds of race, color, or national origin, be excluded from participation in, be denied the benefits of or otherwise be subjected to discrimination in any program or activity financially assisted by the Mississippi Humanities Council.

2. Education Amendment of 1972 (Section 901)

No person shall, on the basis of sex, be excluded from participation in, be denied of or be subjected to discrimination under any education program or activity financially assisted by the Mississippi Humanities Council.

3. Rehabilitation Act of 1973 (Section 504)

No otherwise qualified handicapped individual in the United States, as defined in the Rehabilitation Act of 1973, shall, solely by reason of his handicap, be excluded from the participation in, be denied the benefits of or be subjected to discrimination under any program or activity financially assisted by the Mississippi Humanities Council.

4. Age Discrimination Act of 1975

No person shall on the basis of age be excluded from participation in, be denied benefits of, or be subject to discrimination under any program or activity receiving federal financial assistance.

5. The Americans with Disabilities Act of 1990

The ADA prohibits discrimination on the basis of disability in employment, state and local government services, places of public accommodation and commercial facilities.

**MISSISSIPPI HUMANITIES COUNCIL**



Stuart Rockoff  
EXECUTIVE DIRECTOR

12/22/2025  
DATE

**GRANTEE** [Grant Number MS250-25-017]  
**CITY OF GLUCKSTADT**

Section 8, IH)

\_\_\_\_\_  
PROJECT DIRECTOR

\_\_\_\_\_  
DATE

\_\_\_\_\_  
AUTHORIZING OFFICIAL

\_\_\_\_\_  
DATE

\_\_\_\_\_  
TELEPHONE NUMBER

**From:** [Mississippi Humanities Grants](#)  
**To:** [Lindsay Kellum](#)  
**Cc:** [Scott Maugh](#); [Walter Morrison](#)  
**Subject:** MHC Award Decision  
**Date:** Monday, December 22, 2025 9:09:16 AM  
**Attachments:** [Grant MS250\\_25\\_017.pdf](#)

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Dear Lindsay,

We are pleased to inform you that your project, Threads of a Flag: The Story of Gluckstadt, has received funding from the Mississippi Humanities Council in the amount of \$20,000.00.

You will find part of your award packet attached to this email. The attached documents include: award letter, regranting agreement, and awarded budget. The remainder of your packet may be downloaded from our website under "Grant Packet Enclosures" here: <https://www.mshumanities.org/grants/america250-mississippi-grants/>. This webpage also includes instructions on your next steps. Please follow the instructions closely and save all grant documents somewhere easy to locate as you will need to refer to them throughout the duration of your grant.

If you need to provide any updates about your planned project activities before the final report is due, please contact us at 601-432-6752 or [grants@mhc.state.ms.us](mailto:grants@mhc.state.ms.us).

Congratulations on this award! We look forward to working with you.

Sincerely,

Carol Andersen  
Assistant Director

MISSISSIPPI LEGISLATURE

REGULAR SESSION 2025

By: Representatives Felsher, Summers, McLean To: Public Health and Human  
Services; Appropriations A

HOUSE BILL NO. 1063  
(As Sent to Governor)

1 AN ACT TO BE KNOWN AS THE MISSISSIPPI STATE EMPLOYEES PAID  
2 PARENTAL LEAVE ACT; TO PROVIDE FOR SIX WEEKS OF PAID PARENTAL  
3 LEAVE FOR ELIGIBLE STATE EMPLOYEES WHO ARE THE PRIMARY CAREGIVERS  
4 OF A CHILD, TO BE USED TO CARE FOR THE CHILD AFTER THE BIRTH OR  
5 ADOPTION OF THE CHILD; TO DEFINE "ELIGIBLE EMPLOYEE," "PAID  
6 PARENTAL LEAVE" AND "PRIMARY CAREGIVER" FOR THE PURPOSE OF THIS  
7 ACT; TO PROVIDE THAT THE EMPLOYEE SHALL BE COMPENSATED AT 100% OF  
8 THE EMPLOYEE'S REGULAR SALARY WHILE TAKING THE PAID PARENTAL  
9 LEAVE; TO PROVIDE THAT THE PAID PARENTAL LEAVE MUST BE TAKEN  
10 WITHIN TWELVE WEEKS OF THE BIRTH OR ADOPTION OF THE CHILD; TO  
11 PROVIDE THAT PAID PARENTAL LEAVE MAY BE TAKEN ONLY ONCE IN A  
12 PERIOD OF TWELVE MONTHS; TO PROVIDE THAT THE PAID PARENTAL LEAVE  
13 PROVIDED UNDER THIS ACT SHALL BE IN ADDITION TO OTHER LEAVE  
14 BENEFITS AVAILABLE TO STATE EMPLOYEES BY STATE OR FEDERAL LAW AND  
15 SHALL NOT BE COUNTED AGAINST ACCRUED PERSONAL LEAVE OR MAJOR  
16 MEDICAL LEAVE; TO PROVIDE THAT THE PAID PARENTAL LEAVE SHALL RUN  
17 CONCURRENTLY WITH ANY LEAVE PROVIDED TO AN ELIGIBLE EMPLOYEE UNDER  
18 THE FEDERAL FAMILY AND MEDICAL LEAVE ACT (FMLA) WHERE APPLICABLE;  
19 TO PROVIDE THAT THE PAID PARENTAL LEAVE SHALL NOT BE ACCRUED OR  
20 CARRIED OVER OR USED FOR RETIREMENT PURPOSES AND IS NOT PAYABLE  
21 UPON SEPARATION FROM STATE SERVICE; TO REQUIRE AN ELIGIBLE  
22 EMPLOYEE REQUESTING THE PAID PARENTAL LEAVE TO GIVE NOTICE AT  
23 LEAST THIRTY CALENDAR DAYS BEFORE THE ANTICIPATED LEAVE START DATE  
24 WHERE FORESEEABLE; TO PROVIDE THAT IF ADVANCE NOTICE OF THIRTY  
25 DAYS IS NOT POSSIBLE DUE TO EXIGENT CIRCUMSTANCES, THE EMPLOYEE  
26 SHALL PROVIDE NOTICE AT THE EARLIEST AVAILABLE OPPORTUNITY; TO  
27 AMEND SECTION 25-3-93, MISSISSIPPI CODE OF 1972, TO CONFORM TO THE  
28 PRECEDING PROVISIONS; TO AMEND SECTION 25-3-95, MISSISSIPPI CODE  
29 OF 1972, TO CONFORM TO THE PRECEDING PROVISIONS; TO PROVIDE THAT  
30 AFTER USING THE PAID PARENTAL LEAVE AUTHORIZED UNDER THIS ACT, AN  
31 EMPLOYEE MAY USE UP TO SIX WEEKS OF EARNED MAJOR MEDICAL LEAVE FOR  
32 THE BIRTH OF THE EMPLOYEE'S CHILD; TO AUTHORIZE PUBLIC SCHOOL  
33 DISTRICTS AND COMMUNITY AND JUNIOR COLLEGE DISTRICTS TO ADOPT A  
34 POLICY, IN ADDITION TO ANY OTHER LEAVE POLICIES OF THE DISTRICT,



35 TO PROVIDE FOR PAID PARENTAL LEAVE FOR EMPLOYEES OF THE DISTRICT  
36 THAT INCLUDES THE SAME OR SUBSTANTIALLY THE SAME PROVISIONS AS  
37 THOSE OF THIS ACT; AND FOR RELATED PURPOSES.

38 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

39 **SECTION 1.** (1) This section shall be known and may be cited  
40 as the "Mississippi State Employees Paid Parental Leave Act."

41 (2) As used in this section, the following terms shall be  
42 defined as provided in this subsection:

43 (a) "Eligible employee" means a person who has been  
44 employed by the State of Mississippi or any agency, department or  
45 institution of the state for a minimum of twelve (12) consecutive  
46 months in a position for which he or she is compensated on a  
47 full-time permanent basis and who is the primary caregiver of a  
48 child.

49 (b) "Paid parental leave" means the compensated absence  
50 from work provided to an eligible employee for any of the  
51 following qualifying events:

52 (i) The birth of the employee's biological child;  
53 or

54 (ii) Legal adoption of a child under eighteen (18)  
55 years of age.

56 (c) "Primary caregiver" means the parent who has the  
57 primary responsibility for the care of a child following the birth  
58 or adoption of a child.

59 (3) An eligible employee who is the primary caregiver of a  
60 child shall be entitled to receive six (6) weeks (two hundred  
61 forty (240) hours) of paid parental leave compensated at one



hundred percent (100%) of the employee's regular salary, to be used to care for the child after the birth or adoption of the child.

(4) The paid parental leave provided under this section must be taken within twelve (12) weeks of the birth or adoption of the child. Paid parental leave may be taken only once in a period of twelve (12) months.

(5) The paid parental leave provided under this section shall be in addition to other leave benefits available to state employees by state or federal law and shall not be counted against accrued personal leave or major medical leave under Sections 25-3-93 and 25-3-95. The paid parental leave shall run concurrently with any leave provided to an eligible employee under the federal Family and Medical Leave Act (FMLA) where applicable. Legal state and federal holidays shall not be counted against the paid parental leave. The paid parental leave shall not be accrued or carried over or used for retirement purposes and is not payable upon separation from state service.

(6) An eligible employee requesting the paid parental leave under this section shall give notice at least thirty (30) calendar days before the anticipated leave start date, where foreseeable, to the employee's supervisor and human resources manager and shall follow the employer's usual procedures for notification and documentation. If advance notice of thirty (30) days is not possible due to exigent circumstances, the employee shall notify



87 the employee's supervisor and human resources manager at the  
88 earliest available opportunity and shall follow the employer's  
89 usual procedures in doing so. The use of paid parental leave may  
90 be restricted due to public safety concerns, at the discretion of  
91 the employee's agency head.

92       (7) On July 1, 2026, and every July 1 after, each state  
93 agency, department or institution shall submit to the State  
94 Personnel Board a report on the use of the paid parental leave  
95 provided under this section by the eligible employees of the  
96 agency, department or institution for the preceding fiscal year.

97       (8) The State Personnel Board shall develop and implement  
98 policies and procedures necessary to administer the provisions of  
99 this section, including, but not limited to:

100           (a) Establishing processes for leave requests for and  
101 approvals of taking paid parental leave;

102           (b) Defining documentation requirements to substantiate  
103 eligibility for paid parental leave; and

104           (c) Ensuring compliance with applicable state and  
105 federal laws.

106       (9) The board of trustees of any public school district and  
107 the board of trustees of any community or junior college district  
108 is authorized to adopt a policy, in addition to any other leave  
109 policies of the district, to provide for paid parental leave for  
110 employees of the district that includes the same or substantially



the same provisions as those of the Mississippi State Employees  
Paid Parental Leave Act.

**SECTION 2.** Section 25-3-93, Mississippi Code of 1972, is  
amended as follows:

25-3-93. (1) (a) Except as provided in subsection (1)(b),  
all employees and appointed officers of the State of Mississippi,  
who are employees as defined in Section 25-3-91, shall be allowed  
credit for personal leave computed as follows:

Continuous Service	Accrual Rate (Monthly)	Accrual Rate (Annually)
1 month to 3 years	12 hours per month	18 days per year
37 months to 8 years	14 hours per month	21 days per year
97 months to 15 years	16 hours per month	24 days per year
Over 15 years	18 hours per month	27 days per year

However, employees who were hired prior to July 1, 1984, who  
have continuous service of more than five (5) years but not more  
than eight (8) years shall accrue fifteen (15) hours of personal  
leave each month.

(b) Temporary employees who work less than a full  
workweek and part-time employees shall be allowed credit for  
personal leave computed on a pro rata basis. Faculty members  
employed by the eight (8) public universities on a nine-month  
contract, and employees of the public universities who do not  
contribute to the Mississippi Public Employees' Retirement System





or the State Institutions of Higher Learning Optional Retirement Program, shall not be eligible for personal leave.

(2) For the purpose of computing credit for personal leave, each appointed officer or employee shall be considered to work not more than five (5) days each week. Leaves of absence granted by the appointing authority for one (1) year or less shall be permitted without forfeiting previously accumulated continuous service. The provisions of this section shall not apply to military leaves of absence. The time for taking personal leave, except when such leave is taken due to an illness, shall be determined by the appointing authority of which such employees are employed.

(3) For the purpose of Sections 25-3-91 through 25-3-99, the earned personal leave of each employee shall be credited monthly after the completion of each calendar month of service, and the appointing authority shall not increase the amount of personal leave to an employee's credit. It shall be unlawful for an appointing authority to grant personal leave in an amount greater than was earned and accumulated by the officer or employee.

(4) Employees are encouraged to use earned personal leave. Personal leave may be used for vacations and personal business as scheduled by the appointing authority and shall be used for illnesses of the employee requiring absences of one (1) day or less. Accrued personal or compensatory leave shall be used for the first day of an employee's illness requiring his absence of



more than one (1) day. Accrued personal or compensatory leave may also be used for an illness in the employee's immediate family as defined in Section 25-3-95. There shall be no limit to the accumulation of personal leave. Upon termination of employment each employee shall be paid for not more than thirty (30) days of accumulated personal leave. Unused personal leave in excess of thirty (30) days shall be counted as creditable service for the purposes of the retirement system as provided in Sections 25-11-103 and 25-13-5.

(5) Any state law enforcement officer who is injured by wound or accident in the line of duty shall not be required to use earned personal leave during the period of recovery from such injury. As used in this subsection, the term "state law enforcement officer" means a person employed by a state agency who, as a condition of his or her employment, is required by law to complete a course of study at the Law Enforcement Officers Training Academy.

(6) Any employee may donate a portion of his or her earned personal leave to another employee who is suffering from a catastrophic injury or illness, or to another employee who has a member of his or her immediate family who is suffering from a catastrophic injury or illness, in accordance with subsection (8) of Section 25-3-95.

(7) The provisions of this section shall be subject to the provisions of Section 1 of this act. If there is any conflict



between any of the provisions of this section and any of the provisions of Section 1 of this act, the provisions of Section 1 of this act shall control.

**SECTION 3.** Section 25-3-95, Mississippi Code of 1972, is amended as follows:

25-3-95. (1) All employees and appointed officers of the State of Mississippi, except employees of the public universities who do not contribute to the Mississippi Public Employees' Retirement System or the State Institutions of Higher Learning Optional Retirement Program, shall accrue credits for major medical leave as follows:

Continuous Service	Accrual Rate (Monthly)	Accrual Rate (Annually)
1 month to 3 years	8 hours per month	12 days per year
37 months to 8 years	7 hours per month	10.5 days per year
97 months to 15 years	6 hours per month	9 days per year
Over 15 years	5 hours per month	7.5 days per year

Faculty members employed by the eight (8) public universities on a nine-month contract shall accrue credit for major medical leave as follows:

Continuous Service	Accrual Rate (Per Month)	Accrual Rate (Per Academic Year)
1 month to 3 years	13-1/3 hours per month	15 days per academic year
37 months to 8 years	14-1/5 hours per month	16 days per



210		academic year
211	97 months to 15 years 15-2/5 hours per month	17 days per
212		academic year
213	Over 15 years 16 hours per month	18 days per
214		academic year

215       Part-time employees shall accrue major medical leave on a pro  
 216 rata basis. There shall be no maximum limit to major medical  
 217 leave accumulation. All unused major medical leave shall be  
 218 counted as creditable service for the purposes of the retirement  
 219 system as provided in Sections 25-11-103 and 25-13-5.

220       (2) (a) Major medical leave may be used for the illness or  
 221 injury of an employee or member of the employee's immediate family  
 222 as defined in subsection (3) of this section, only after the  
 223 employee has used one (1) day of accrued personal or compensatory  
 224 leave for each absence due to illness, or leave without pay if the  
 225 employee has no accrued personal or compensatory leave; provided  
 226 that faculty members employed by the eight (8) public universities  
 227 on a nine-month basis may use major medical leave for the first  
 228 day of absence due to illness. However, major medical leave may  
 229 be used, without prior use of personal leave, to cover regularly  
 230 scheduled visits to a doctor's office or a hospital for the  
 231 continuing treatment of a chronic disease, as certified in advance  
 232 by a physician. For the purposes of this section, "physician"  
 233 means a doctor of medicine, osteopathy, dental medicine, podiatry  
 234 or chiropractic. For each absence due to illness of thirty-two



235 (32) consecutive working hours (combined personal leave and major  
236 medical leave), major medical leave shall be authorized only when  
237 certified by their attending physician.

238 (b) When an employee's absence is due to a work-related  
239 injury for which the employee is receiving temporary disability  
240 benefits under Section 71-3-17(b) or 71-3-21, the injured employee  
241 shall not use accrued personal and/or medical leave and receive  
242 workers' compensation benefits simultaneously if the combined  
243 receipt of both benefits results in the employee being paid, while  
244 absent due to the work-related injury, a total amount that exceeds  
245 one hundred percent (100%) of his wages earned in state employment  
246 at the time of injury. In such cases, the injured employee may  
247 use only as much of his accrued personal and/or medical leave as  
248 necessary, which may be fewer than eight (8) hours of accrued  
249 personal and/or major medical leave in a day, to constitute the  
250 difference between the amount of temporary disability workers'  
251 compensation benefits received and one hundred percent (100%) of  
252 his wages earned at the time of injury in state employment. It is  
253 the intent of the Legislature that no state employee who is absent  
254 and disabled from work due to a work-related injury shall receive  
255 more than one hundred percent (100%) of his wages earned in state  
256 employment at the time of injury through the use of accrued  
257 personal and/or medical leave combined with temporary disability  
258 benefits under the Workers' Compensation Law. The procedure for  
259 implementing this paragraph (b) shall be as directed by the



applicable appointing authority. The receipt or payment of benefits in compliance with this paragraph (b) shall be considered the employee's exclusive remedy against the employer in accordance with Section 71-3-9.

(3) An employee may use up to three (3) days of earned major medical leave for each occurrence of death in the immediate family requiring the employee's absence from work. No qualifying time or use of personal leave will be required prior to use of major medical leave for this purpose. For the purpose of this subsection (3), the immediate family is defined as spouse, parent, stepparent, sibling, child, stepchild, grandchild, grandparent, son- or daughter-in-law, mother- or father-in-law or brother- or sister-in-law. Child means a biological, adopted or foster child, or a child for whom the individual stands or stood in loco parentis.

(4) Employees and appointed officers of the State of Mississippi having unused, accumulated sick leave or annual leave earned prior to July 1, 1984, shall be credited with major medical leave and personal leave as follows: All unused annual leave shall be credited as personal leave.

Unused sick leave shall be divided between major medical leave and personal leave at rates determined by the employee's sick leave balance on June 30, 1984. The rates of conversion shall be as follows:

Sick Leave	Percentage	Percentage
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285	Balance as of	Converted to	Converted to
286	June 30, 1984	Personal Leave	Major Medical Leave
287	1 - 200 hours	20%	80%
288	201 - 400 hours	25%	75%
289	401 - 600 hours	30%	70%
290	601 or more hours	35%	65%

291       (5) Upon retirement from active employment, each faculty  
292 member of the state-supported public universities who is employed  
293 on a nine-month basis shall receive credit and be paid for not  
294 more than thirty (30) days of unused major medical leave for  
295 service as a state employee. Unused major medical leave in excess  
296 of thirty (30) days shall be counted as creditable service for the  
297 purposes of the retirement system as provided in Sections  
298 25-11-103 and 25-13-5.

299       (6) Any state law enforcement officer who is injured by  
300 wound or accident in the line of duty shall not be required to use  
301 earned major medical leave during the period of recovery from such  
302 injury. As used in this subsection, the term "state law  
303 enforcement officer" means a person employed by a state agency  
304 who, as a condition of his or her employment, is required by law  
305 to complete a course of study at the Law Enforcement Officers  
306 Training Academy.

307       (7) For the purpose of Sections 25-3-91 through 25-3-99, the  
308 earned major medical leave of each employee shall be credited  
309 monthly after the completion of each calendar month, and the



310 appointing authority shall not increase the amount of major  
311 medical leave to an employee's credit. It shall be unlawful for  
312 an appointing authority to grant major medical leave in an amount  
313 greater than was earned and accumulated by the officer or  
314 employee.

315 (8) Any employee may donate a portion of his or her earned  
316 personal leave or major medical leave to another employee who is  
317 suffering from a catastrophic injury or illness, as defined in  
318 Section 25-3-91, or to another employee who has a member of his or  
319 her immediate family who is suffering from a catastrophic injury  
320 or illness, in accordance with the following:

321 (a) The employee donating the leave (the "donor  
322 employee") shall designate the employee who is to receive the  
323 leave (the "recipient employee") and the amount of earned personal  
324 leave and major medical leave that is to be donated, and shall  
325 notify the donor employee's appointing authority or supervisor of  
326 his or her designation. The donor employee's appointing authority  
327 or supervisor then shall notify the recipient employee's  
328 appointing authority or supervisor of the amount of leave that has  
329 been donated by the donor employee to the recipient employee.

330 (b) The maximum amount of earned personal leave that an  
331 employee may donate to any other employee may not exceed a number  
332 of days that would leave the donor employee with fewer than seven  
333 (7) days of personal leave left, and the maximum amount of earned  
334 major medical leave that an employee may donate to any other





employee may not exceed fifty percent (50%) of the earned major medical leave of the donor employee. All donated leave shall be in increments of not less than twenty-four (24) hours.

(c) An employee must have exhausted all of his or her earned personal leave and major medical leave before he or she will be eligible to receive any leave donated by another employee.

(d) Before an employee may receive donated leave, he or she must provide his or her appointing authority or supervisor with a physician's statement that states the beginning date of the catastrophic injury or illness, a description of the injury or illness, and a prognosis for recovery and the anticipated date that the recipient employee will be able to return to work.

(e) If an employee is aggrieved by the decision of his or her appointing authority that the employee is not eligible to receive donated leave because the injury or illness of the employee or member of the employee's immediate family is not, in the appointing authority's determination, a catastrophic injury or illness, the employee may appeal the decision to the employee appeals board.

(f) Beginning on March 25, 2003, the maximum period of time that an employee may use donated leave without resuming work at his or her place of employment is ninety (90) days, which commences on the first day that the recipient employee uses donated leave. Donated leave that is not used because a recipient employee has used the maximum amount of donated leave authorized



under this paragraph shall be returned to the donor employees in the manner provided under paragraph (g) of this subsection.

(g) If the total amount of leave that is donated to any employee is not used by the recipient employee, the donated leave shall be returned to the donor employees on a pro rata basis, based on the ratio of the number of days of leave donated by each donor employee to the total number of days of leave donated by all donor employees.

(h) The failure of any appointing authority or supervisor of any employee to properly deduct an employee's donation of leave to another employee from the donor employee's earned personal leave or major medical leave shall constitute just cause for the dismissal of the appointing authority or supervisor.

(i) No person through the use of coercion, threats or intimidation shall require or attempt to require any employee to donate his or her leave to another employee. Any person who alleges a violation of this paragraph shall report the violation to the executive head of the agency by whom he or she is employed or, if the alleged violator is the executive head of the agency, then the employee shall report the violation to the State Personnel Board. Any person found to have violated this paragraph shall be subject to removal from office or termination of employment.

(j) No employee can donate leave after tendering notice of separation for any reason or after termination.



(k) Recipient employees of agencies with more than five hundred (500) employees as of March 25, 2003, may receive donated leave only from donor employees within the same agency. A recipient employee in an agency with five hundred (500) or fewer employees as of March 25, 2003, may receive donated leave from any donor employee.

(l) In order for an employee to be eligible to receive donated leave, the employee must:

(i) Have been employed for a total of at least twelve (12) months by the employer on the date on which the leave is donated; and

(ii) Have been employed for at least one thousand two hundred fifty (1,250) hours of service with such employer during the previous twelve-month period from the date on which the leave is donated.

(m) Donated leave shall not be used in lieu of disability retirement.

(n) For the purposes of this subsection, "immediate family" means spouse, parent, stepparent, sibling, child or stepchild.

(9) An employee may use up to six (6) weeks of earned major medical leave for the birth of the employee's biological child or for the placement with the employee of a child for adoption or foster care and to care for the newly placed child within one (1) year of placement, after using the paid parental leave authorized



410 under Section 1 of this act for the birth or adoption of the  
411 child.

412 (10) The provisions of this section shall be subject to the  
413 provisions of Section 1 of this act. If there is any conflict  
414 between any of the provisions of this section and any of the  
415 provisions of Section 1 of this act, the provisions of Section 1  
416 of this act shall control.

417 **SECTION 4.** This act shall take effect and be in force from  
418 and after January 1, 2026.



# Employee Handbook

City of Gluckstadt, Mississippi

Adopted by Board of Aldermen: June 13, 2023

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## **I. GENERAL INFORMATION**

This handbook is NOT a contract. No contract of employment with the City of Gluckstadt will be valid unless it is authorized by the governing authority and complies with all legal requirement applicable to public contracts.

The policies and benefit offerings outlined in this handbook are subject to change at any time, without notice. Changes may be made at the sole discretion of the City of Gluckstadt. Any changes thereto supersede any prior written, verbal, or implied policies. This handbook is merely a guide and not intended to address every employment situation that may arise.

### **Purpose**

This handbook outlines the employment policies of the City of Gluckstadt. The policies will inform employees of their benefits and responsibilities of their employment. The City of Gluckstadt has developed these policies for the purpose of promoting fair and consistent practices by managers and employees.

The City of Gluckstadt's employment practices policies will apply equally to all employees, unless exempted by law, contract, or the terms of a policy. Where federal or state laws or regulations supersede the City of Gluckstadt policies, employees will be instructed to observe the requirements of these state and federal laws.

### **Equal Employment Opportunity**

It is the policy of the City of Gluckstadt to provide equal employment opportunity to employees and applicants for employment without regard to race, creed, religion, color, sex, age, national origin, covered disability, military status, or any other classification protected under applicable law. Additionally, it is the City of Gluckstadt's policy to forbid retaliation against employees or applicants for the exercise of rights protected under applicable laws. Employees are required to avoid any behavior, action, decision, or conduct that is inconsistent with this Equal Employment Opportunity Policy.

Equal employment opportunity applies to all terms, conditions and privileges of employment, including hiring, training, promotion, transfer, compensation, benefits and assistance, layoff, employee facilities, discharge, and retirement.

Should any eligible employee wish to request a reasonable accommodation, the employee should use the Reasonable Accommodation Request Form included in the Appendix to this Handbook.

### **Equipment and Property**

Employees are provided tools and equipment to perform their job. It is the responsibility of employees to use them safely and to cooperate in the maintenance of equipment owned by the City of Gluckstadt. Any employee operating a City of Gluckstadt vehicle is required to have an appropriate current state driver's license and provide it upon request. When using a personal vehicle for conducting the City of Gluckstadt business, the employee must provide proof of personal vehicle liability coverage as well as a valid driver's license. The City of Gluckstadt bears no liability for damage to any personal property incurred by employees on official city business.

If an accident occurs involving a City of Gluckstadt vehicle or a personal vehicle while conducting City of Gluckstadt business, the accident must be reported immediately to the appropriate law enforcement agency and to the employee's supervisor.

### **Grievances**

Occasionally, problems may arise that you cannot solve alone. The City of Gluckstadt has a system for handling these problems, complaints, or grievances – although it may exercise its discretion to forgo this system if the circumstances warrant. If you have a problem, complaint or grievance, you should follow this procedure:

1. Discuss the problem through your chain of command. If it is not resolved, arrange a private meeting with your department head to try to resolve the problem.
2. If the problem is not resolved (no agreement reached), you and the department head will arrange a meeting with the Mayor to attempt to resolve the problem.
3. If the problem is not resolved, you may, within 15 days of the meeting with the Mayor, request a meeting with the Mayor and the Board of Aldermen. This request should be made to the City Clerk. The City will aim to place the hearing on the agenda for the next regularly scheduled Board meeting as long as you give notice by noon on the Friday immediately prior to the next Board meeting. All meetings will be informal in nature.

## **II. RECRUITMENT, HIRING, AND EMPLOYMENT**

### **Notice of Vacancies**

The City of Gluckstadt will aim to announce vacancies by posting them on the "Bulletin Board" in City Hall and on the City of Gluckstadt website.

Mailings to local employment agencies may also be used. The employment application solicitation process may also include a recruiting effort which may extend beyond the City of Gluckstadt when deemed necessary to obtain applications from individuals with necessary technical skills or other specialized qualifications.

**Ethics in Employment**

No hiring authority may appoint or vote for or against his/her father, mother, spouse, son, daughter, sister, brother, uncle, aunt, nephew, niece, first cousin, mother-in-law, father-in-law, brother-in-law, sister-in-law, son-in-law, daughter-in-law, previous spouse, stepson, or stepdaughter to any position.

No person will be hired to any position within a department when that individual's father, mother, spouse, son, daughter, sister, brother, uncle, aunt, nephew, niece, first cousin, mother-in-law, father-in-law, brother-in-law, sister-in-law, son-in-law, daughter-in-law, previous spouse, stepson, or stepdaughter is already serving in any position within the same department as an employee of the City of Gluckstadt.

No person will be hired if such hiring would result in a direct or indirect supervision conflict due to a relationship between the prospective employee and a supervisor which falls within any relationships described in the two paragraphs above or otherwise gives rise to a conflict of interest.

**Orientation**

The City will aim to provide an orientation about the City of Gluckstadt and the benefits, if any, associated with employment. Each employee will receive a copy of the Employee Handbook and any applicable workplace rules. It is the responsibility of the employee to read and gain an understanding of the handbook and work rules. The employee will acknowledge receipt of the handbook; periodic updates will also be acknowledged.

In most cases, actual job duty orientation and training will be given within the specific department he or she will work.

**Conflicts of Interest**

Employees may not enter into dealings or financial interests in contracts and services performed by the City of Gluckstadt. This includes deriving any direct or indirect profit resulting from the sale, service, contracting or purchases made on behalf of the City of Gluckstadt.

City of Gluckstadt employees may not accept financial benefits that would reasonably tend to influence decisions or encourage that employee to disclose confidential City of Gluckstadt business. Any offers of money, services, benefits, favors or other possible conflicts should be discussed with supervisors and/or the City of Gluckstadt legal counsel.

Employees are protected from requirements, whether real or implied, to contribute time or money to any person or party. Soliciting political party campaign contributions, promoting fund-raising drives and even encouraging subordinates and colleagues to contribute to community non-profit organizations while on duty are prohibited activities. Violators will be subject to disciplinary procedures.

Employees, with the exception of elected officials, are not allowed to participate in political activities during work hours for the City of Gluckstadt. No public property such as equipment, buildings, or vehicles can be used to display campaign materials and such public property may not be used for any other political activity.

### **Separation From Employment**

Separation usually results from resignation, retirement, layoff, termination, or death. If the reason is resignation, an employee is requested to give notice in writing at least two weeks before the last day of work. For separation due to retirement, more notice is requested. Layoff may occur if a position is eliminated or when there is a lack of funding or work. Termination can occur for any legally permissible reason.

The City will aim to pay an employee separated because of resignation, retirement, layoff, or death on the payday for the pay-period in which the separation occurs. The final check may, at the City's discretion, include accrued PTO up to 30 days if the separation is for a reason other than termination.

## **III. EMPLOYEE CONDUCT**

### **Personal Conduct**

Conduct that interferes with operations, discredits the City of Gluckstadt, or is offensive or dangerous to others in the work place is grounds for discipline, whether such conduct is expressly prohibited by, or in violation of, any applicable rule, policy, or directive. Every employee is required to conduct himself/herself in accordance with that general principle and with all applicable rules, policies, and directives as well as with all other professional standards of conduct which a reasonable person would know is expected of someone in the work place, whether or not such other standards are expressly set forth in any rule, directive, or policy. Any noncompliance or violation is grounds for discipline, up to and including termination.

The following general rules of conduct apply to all employees. This list is not all-inclusive but includes examples of unacceptable conduct which will be grounds for discipline, up to and including termination.

- Failure to perform assigned tasks efficiently and safely and in accord with applicable quality standards and safety requirements.
- Dishonesty, including falsifying or altering any document, record, or report relating to the City of Gluckstadt or relating to employment, such as a time card, employment application, medical report, or expense reimbursement request and including providing false or misleading information and/or failing to provide truthful and complete information in connection with any investigation;
- Failure to observe starting, quitting, and/or break times;
- Horseplay;

- Careless workmanship;
- Violation of any security rule or any health, safety or environmental rule, or violation of any other applicable rule;
- Tobacco use is only allowed in designated areas;
- Working for a contractor, or any third-party service provider, or competing with the interests of the City of Gluckstadt;
- Excessive and/or unexcused absenteeism and/or tardiness;
- Job abandonment, including failure to report for work after an approved absence or leave of absence;
- Theft or attempted theft of, misappropriation of, or willful damage to the property of the City of Gluckstadt or the property of another person or entity at the work place;
- Distribution, transfer, sale, possession, or consumption at the work place or otherwise on the property of the City of Gluckstadt of alcohol, an intoxicant, or a controlled substance which has not been prescribed for the one in possession, the recipient, or the one consuming;
- Reporting for work, being under the influence or intoxicated at work, or being impaired at work due to the use of alcohol, an intoxicant, or a controlled substance;
- Threatening, intimidating, coercing, abusing, or interfering with a supervisor, manager, independent contractor, supplier, visitor, or co-employee, either by words or action;
- Insubordination;
- Fighting or assault;
- Sleeping on the job;
- Unauthorized possession of any firearm, weapon, or explosive at the work place or on property of the City of Gluckstadt or at any function of the City of Gluckstadt;
- Unauthorized disclosure of any confidential information relating to the business of the City of Gluckstadt;
- Violation of any criminal law or any other offense involving moral turpitude;
- Failure to report any accident, misconduct, or rule violation to the appropriate representative of the City of Gluckstadt or failing to cooperate with and/or failing to provide information requested in connection with any investigation; and
- Receiving or soliciting a bribe or other similar improper payment or services.

### **Workplace Harassment**

The City of Gluckstadt policy prohibits any employee acts of discrimination. The use of racial or ethnic jokes or derogatory remarks will not be tolerated, will be investigated, and disciplinary action will be taken, if warranted.

The City of Gluckstadt is committed in all areas to providing a work environment that is free from harassment. Harassment based upon an individual's sex (including pregnancy), race, color, ethnicity, national origin, religion, age, disability, genetic information, or any other legally

protected characteristic will not be tolerated. All employees, including supervisors and other management personnel, are expected and required to abide by this policy.

Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature constitute harassment when (1) submission to or rejection of such conduct is made either explicitly or implicitly a term or condition of an individual's employment; (2) submission to or rejection of such conduct by an individual is used as the basis for decisions about employment, promotion, transfer, selection for training, performance evaluations, benefits, or other terms and conditions of employment; or (3) such conduct has the purpose or effect of creating an intimidating, hostile, or offensive work environment or substantially interferes with an employee's work performance.

If an employee feels that he or she has been harassed on the basis of his or her sex (including pregnancy), race, color, ethnicity, natural origin, religion, age, disability, genetic information, or any other legally protected characteristic they are to immediately report the matter to the City Clerk. If the City Clerk is not available, or if it would be unproductive to report the matter to the City Clerk, the matter is to be reported to the Mayor. Once the matter has been reported it will be promptly investigated and any necessary corrective action will be taken where appropriate. All complaints of unlawful harassment will be handled in as discreet and confidential a manner as is possible under the circumstances.

Furthermore, any type of retaliation for reporting discrimination or filing a harassment claims is prohibited and will be investigated. The City encourages any employee who desires to make an allegation of harassment to use the attached "Complaint Form For Reporting Harassment" to do so.

### **Workplace Violence**

It is the City's policy to promote a safe working environment for our employees and visitors. We are committed to working with employees to maintain a work environment free from violence, intimidation, and other disruptive behavior. Bullying, violence, threats, intimidation, and other disruptive behavior will not be tolerated. Such behavior can include written or oral statements, gestures, or expressions that communicate a direct or indirect threat of physical harm. All reports of such incidents are taken seriously and dealt with appropriately. Individuals who commit such acts may be removed from the premises and may be subject to disciplinary action, up to and including termination.

### **Work Standards**

Every employee must remember that the City of Gluckstadt is a tax-supported entity and the citizens of the City of Gluckstadt paying those taxes should receive the best possible quality and highest standard of service possible. Public employees should act in a professional manner, using good judgment and courtesy at all times, and should avoid any type of behavior that would even

appear illegal or unethical. Employees should carry out their work efficiently, honestly, and with the intention of keeping good relationships with the public.

Individual employees must be responsible to their supervisors. Work directions and results, measurement of performance, and handling grievances are the responsibility of the supervisor. Communication with the public about city issues is the responsibility of the designated official or department director. Any controversial or unusual request or question from the public must be referred to that official.

### **Timeliness**

Employees are to report for work on time and are to be punctual for appointments and meetings. Furthermore, work is to be completed at the time it is due. Frequent tardiness can result in disciplinary action, up to and including termination. All employees are responsible for inputting their own time, although the City may correct mistakes in employees' time.

### **Attendance**

If an employee is going to be absent, he/she must report that absence at least one (1) hour prior to the scheduled start time to the Department Head or City Clerk. Failure to report, other than in an emergency situation, may result in disciplinary action. Unexcused absences can lead to discipline, up to and including termination.

### **Appearance**

Citizens observe employees of the City of Gluckstadt often in the course of their work. As the City of Gluckstadt's representatives, employees are asked to meet high standards both in the quality of their work and in presenting a professional image to the public. While there is not a formal dress code, employees are expected to display a professional disposition to citizens and colleagues. Uniforms may be required for certain City of Gluckstadt jobs. If so, employees will be responsible to keep their uniforms clean and neat.

### **Safety**

Your safety is the constant concern of the City of Gluckstadt. Every precaution has been taken to provide a safe workplace. Common sense and personal interest in safety are still the greatest guarantees of your safety at work, on the road, and at home. We take your safety seriously and any willful or habitual violation of safety rules will be considered cause for dismissal. The City of Gluckstadt is sincerely concerned for the health and well being of each member of the team.

The cooperation of every employee is necessary to make the City of Gluckstadt a safe place in which to work. Help yourself and others by reporting unsafe conditions or hazards immediately to your supervisor. Give earnest consideration to the rules of safety presented to you by poster signs, discussions with your supervisor and posted department rules. Begin right by always thinking of safety as you perform your job, or as you learn a new one.

**Accident reporting:** Any injury at work—no matter how small—must be reported immediately to your supervisor and receive first aid attention. Serious conditions often arise from small injuries if they are not cared for at once.

### **Operation of Motor Vehicles**

Each employee who is driving a City vehicle is expected to observe any and all safety and vehicle operation procedures and regulations. At its discretion, the Mayor and Board of Aldermen may assign to any employee the care of a vehicle or other equipment. Each employee has the responsibility to use reasonable care to insure the security and care of all City property entrusted to his/her use and care.

### **On-The-Job Injuries**

The City of Gluckstadt strives to provide a safe and secure working environment for all employees. However, when a work related injury or illness occurs (i.e. injuries and illnesses that arise out of, or are incurred in the course of, job related activities on behalf of the City of Gluckstadt), the employee will be provided medical care and treatment through the Worker's Compensation program. Employees needing medical attention due to an injury may be subject to an alcohol/drug test.

Employees must immediately report all injuries and work related illnesses, regardless of severity, to their supervisor, who should, in turn, report to the Department Head and City Clerk as soon as practicable to allow filing for worker's compensation claims in the proper manner. The report will be fully investigated.

The City of Gluckstadt has made arrangements with area physicians to provide treatment to employees.

Injured employees are expected to return to work as soon as possible after an injury. In order to facilitate return to work, the City of Gluckstadt, at its discretion, may attempt to identify existing assignments that the injured employee may perform within restrictions identified by the healthcare provider and the City of Gluckstadt. Such temporary assignments are at the sole discretion of the City of Gluckstadt and may be suspended at any time. Work restrictions recommended by the healthcare provider must be in writing and delivered to the employee's supervisor as well as the Department Head. Before returning to regular duties, the employee shall provide a written release from an approved healthcare provider stating the employee is capable of returning to full-duty status.

### **Gifts and Gratuities**

City of Gluckstadt employees and officers are not allowed to receive gifts or gratuities in any personal or professional capacity that could create even the impression that the giver was seeking favor or trying to influence an opinion or a judgment from the employee or official. This does not prohibit minor, incidental gifts such as cookies and cakes during the holiday season.



### **Computer Network and Internet Access Policy**

The City of Gluckstadt provides computer and internet access to assist its employees in obtaining work-related data and information. However, all computer and internet usage by City employees is limited to job-related activities only. Personal use of computers and the internet generally is not authorized.

The equipment, services, and technology provided to access the internet remain at all times the property of the City of Gluckstadt. As such, the City of Gluckstadt reserves the right to monitor computer and internet traffic and to retrieve and read any data composed, sent, or received through the City's online connections or stored in the City's computer systems. All Internet data that is composed, transmitted, and/or received through the City's computer systems is considered to belong to the City and is recognized as part of its official data. It is therefore subject to disclosure for legal reasons or to other appropriate third parties.

Data that is composed, transmitted, and/or received through the City's computer systems, including emails, should not contain content that is deemed to be offensive. This includes, though is not restricted to, the use of vulgar or harassing language/images. Unacceptable use of the internet by employees includes, but is not limited to:

- Sending or posting discriminatory, harassing, or threatening messages or images on the Internet or via the City's email service;
- Using computers to perpetrate any form of fraud, and/or software, film or music piracy;
- Stealing, using, or disclosing someone else's password or personal information without authorization;
- Downloading, copying, or pirating software and electronic files that are copyrighted or without authorization;
- Hacking into unauthorized websites;
- Sending or posting information that is defamatory to the City;
- Introducing malicious software onto the City's network and/or jeopardizing the security of the City's electronic communications systems;
- Sending or posting chain letters, solicitations, or advertisements not related to City business; and
- Passing off personal views as representing those of the City.

If an employee is unsure about what constitutes acceptable Internet usage, then he/she should consult the City Clerk and Mayor for further guidance and clarification.

### **Social Media Policy**

This Social Media Use Policy (the "Policy") is intended to provide employees with guidelines for appropriate online activity. Although this Policy cannot address every instance of inappropriate social media use, it is intended to offer guidelines to employees, thereby helping employees

avoid potentially costly missteps online. The nature of the Internet is such that what you “say” online will be captured forever and can be transmitted endlessly without your consent or knowledge. Employees should remember that any information that is shared online instantly becomes permanent and public.

Employees should be aware that, while certain types of speech may be subject to legal protection, the City may have the right to discipline an employee whose comments may disrupt the efficiency of the public services rendered by the City. Given the position in society public employees occupy, they may express individual or personal views that contravene governmental policies or impair the proper performance of governmental functions. Thus, a balance must be stricken when it comes to employee free speech issues by weighing the interests of the employee, as a citizen, in commenting upon matters of public concern, and the interests of the City, as an employer, in promoting the efficiency of public services it performs through its employees.

### **1. Guidelines**

Ultimately, you are solely responsible for what you post online. Before creating online content, consider some of the risks and rewards that are involved. Keep in mind that any of your conduct that adversely affects your job performance, the performance of fellow associates, or otherwise adversely affects legitimate business interests of the City may result in disciplinary action, up to and including termination.

### **2. Scope**

This Policy applies to all employees’ use of the Internet, including participation in and use of social media, regardless of whether such use occurs in the workplace and regardless of whether such use involves the City’s electronic equipment or other property. Refrain from using social media while on work time or on equipment provided by the City, unless it is work-related as authorized by your supervisor or consistent with the City’s other written policies. Do not use your work email address to register on social networks, blogs, or other online tools utilized for personal use.

### **3. “Social Media” Defined**

The rapid speed at which technology continuously evolves makes it difficult, if not impossible, to identify all types of social media. By way of example, social media includes: (1) social-networking sites (i.e. Facebook, LinkedIn); (2) blogs and micro-blogs (i.e. Twitter, Blogger); (3) content-sharing sites (i.e. Scribd, Slide Share); and (4) image sharing sites (i.e. Flickr, YouTube). This list is for illustrative purposes only, however, and all online activity is governed by this Policy.

### **4. Application of Other Policies**

All of the City’s employment policies apply to conduct that occurs online in the same way that they apply to conduct that occurs in the workplace. For example, employees’ online conduct

must comply with the City's Equal Employment Opportunity, Sexual Harassment, Confidentiality, and Conflict of Interest policies.

## **5. Association With the Organization**

Employees who identify themselves online as being associated with the City must comply with the rules set forth in this section.

When endorsing or promoting his or her employer, an employee must disclose his or her affiliation with (i.e., employment by) the City. Although the City appreciates the loyalty and enthusiasm of its employees, employees must disclose their employment if they endorse the City online. If you, the employee, should choose to disclose your affiliation or relationship with the City, for example in your online profile, you must use an appropriate disclaimer to make clear that you are speaking only on behalf of yourself and not on behalf of or as an agent of the City. An example of an appropriate disclaimer follows:

**The opinions and viewpoints expressed are those of the author and do not necessarily represent the position or opinion of the City.**

To ensure continuity of the City's message, employees may not represent themselves to be speaking on behalf of the City unless expressly authorized to do so.

## **6. Standards of Conduct**

Employees should refrain from engaging in the following in their online activities and posts:

- Disparaging the City's services, clients, executive leadership, employees, or strategy in a way so as to impede the employee's performance of his job duties or otherwise interfere with the public services rendered by the City;
- Promoting or endorsing violence;
- Promoting illegal activity, including the use of illegal drugs;
- Directing any negative comment towards or about any individual or group based on race, religion, gender, disability, sexual orientation, national origin, citizenship, or other characteristics protected by law;
- Disclosing any confidential or proprietary information belonging to the City or obtained by the employee as a result of his/her employment with the City; and
- Posting, uploading, or sharing any recording or images (including audio, pictures, and videos) taken in the workplace or at any City-sponsored event without express advance authorization.

## **7. Duty to Report**

Employees have an ongoing duty to report any violations of this Policy by any other employees.

The City considers the duty to report to be a critical component of its efforts to ensure the safety of its employees and to preserve the City's reputation and goodwill in the community. Therefore, any employee who fails to report any conduct that reasonably appears to be in violation of this Policy may be subject to discipline for such failure.

## **8. Media Contacts**

Employees should not speak to the media on the City's behalf. All media inquiries should be directed to the City.

## **9. Questions About This Policy**

Social media changes rapidly and there will likely be events or issues that are not addressed in this Policy. If, at any time, you are uncertain about the application of this Policy or if a question relating to the appropriate use of social media arises that is not fully addressed by this Policy, you should seek the guidance of the appropriate person *before* posting or otherwise engaging online. When in doubt, employees should always ask for guidance first because, once the information is online, it can never be deleted.

### **Media Contact**

Media contacts concerning issues regarding criminal activities in the City of Gluckstadt should be referred to the Police Chief or his designee. Media contacts concerning all other issues related to the City of Gluckstadt should be referred to the Mayor or his designee.

### **Tobacco Use**

The City of Gluckstadt is committed to providing a safe and healthy work place and prohibits tobacco use within 25 feet of the City of Gluckstadt facilities and in vehicles.

### **Outside Employment**

City of Gluckstadt employees are permitted to engage in outside employment as long as it does not in any manner compete with their City of Gluckstadt employment and is not a conflict of interest. The City of Gluckstadt property, resources, supplies, equipment, vehicles, uniforms, etc. may not be used in the course of outside employment.

## **IV. COMPENSATION POLICIES**

### **Establishment of Pay System**

The City of Gluckstadt compensates employees in accordance with decisions by the Board of Aldermen as budgets are set. Pay for any given position is subject to the annual budgetary process and, as such, may be subject to increase, reduction, or status quo maintenance for any time period. The supervising elected official or administrator may make suggestions about salary compensation and other pay system concerns but the final decision regarding compensation levels rests with the Board of Aldermen.

### **Pay Schedule**

Employees are paid on a bi-weekly basis throughout the year. Paychecks are issued by the office of the City Clerk. Paychecks compensate employees for work performed in the pay period ending on Sunday at 11:59 P.M. preceding the day that payment is issued. Direct Deposit may be utilized.

### **Payroll Deductions**

No payroll deduction will be made from employee pay unless authorized by the employee or required by law. Employees are required to report changes in family status, address, or other information that could affect amount of deductions withheld. These may include Social Security and income taxes, retirement system contributions, court-ordered child support, and any other deductions required or allowed by law. Additionally, deductions may be authorized for employee contributions to health and dental insurance, supplemental insurance, and deferred compensation plans requested by the employee.

### **Reporting Hours Worked**

It is the responsibility of those employees who are required to account for their time worked to accurately "clock in" upon beginning work each day and to accurately "clock out" once no longer working. This policy applies to "clocking out" for breaks and "clocking back in" following breaks.

### **Work Periods**

The work week for all hourly paid employees who are required to account for their time will begin at 12:00 midnight on Monday of each week and conclude at 11:59 p.m. of the succeeding Sunday. For employees other than Law Enforcement, if hours actually worked exceed 40 in a workweek, overtime compensation will be paid to non-exempt employees. Overtime will be allowed only when authorized by the Department Head or when absolutely necessary in an emergency.

Sworn Police Officers, who are non-exempt, shall be paid on an 86-hour, two-week, pay period as per guidelines defined by the Fair Labor Standards Act.

### **Bad Weather Policy**

The City of Gluckstadt's policy is to remain open during periods of bad weather in order to provide services to the citizens of the City during such times. During periods of bad weather, the following procedures shall apply:

- A. Only the Mayor is authorized to close the City and its operations during periods of bad weather.
- B. Absent an order from the Mayor closing the City, all employees will be expected to report for work.
- C. If the employee feels that he/she cannot safely report to work because of the conditions associated with the bad weather, he/she should notify his/her supervisor. Absent an order from the Mayor closing the City, the employee will be expected to report to work as soon conditions allow.
- D. In the event an employee cannot report to work and the Mayor has not issued an order closing the City, the employee may request use of any available leave time.

### **Overtime Compensation**

Employees other than Police Officers who are not exempt from the provisions of the Fair Labor Standards Act ("FLSA") and who work overtime will be paid overtime wages. No employee may work any overtime without first obtaining the approval of his/her Department Head. Overtime shall be defined as all work performed in excess of the hours permitted under the FLSA workweek.

If you believe that an improper deduction has been made to your salary, you should immediately report this information to the City Clerk and Mayor. Reports of improper deductions will be promptly investigated. If it is determined that an improper deduction has occurred, you will be reimbursed for such improper deductions.

### **Expense Reimbursement**

An employee will be reimbursed for pre-approved expenses incurred in completing his/her work-related assignment in accord with the policies established by the City of Gluckstadt. Each employee is responsible for providing verified receipts for any expense for which reimbursement is requested.

### **Promotions, Lateral Job Changes, and Demotions**

Jobs are posted internally, allowing, when practical, current employees up to five days to apply for promotions or lateral transfers (changing to another job in the same pay class). Promotions

are those job changes that result in advancement to higher positions with greater responsibility. Salary increases are subject to approval by the City, in accordance with approved budget limits.

Lateral job moves are changes to positions with the same level of pay. An employee taking a lateral transfer, whether by the employee's request or the City's requirement, will retain the same amount of accrued leave and seniority. If the employee's current salary is in the approved salary range, they will not receive any reduction in pay as a result of a lateral move.

Demotions require an employee to change to a lower paid position with a lower level of job responsibility. The demotion may be the result of a disciplinary action, a job reclassification, or unsatisfactory work performance.

The City of Gluckstadt reserves the right to make decisions regarding job changes at its discretion.

## **V. EMPLOYEE BENEFITS**

### **Health, Dental, Vision and Life Insurance**

Employees who regularly work at least 30 hours per week will be eligible to participate in the health, dental, vision, and life plans offered by the City of Gluckstadt. Part-time employees may be eligible for a prorated coverage program.

### **Social Security**

The City of Gluckstadt employees are covered by Social Security. The City contributes to the Social Security Program on behalf of employees.

### **Public Employees Retirement System (PERS)**

All employees who may work more than twenty (20) hours per week or an average of eighty (80) hours per month and who may work for more than four and a half (4½) months for the City must participate in the Public Employees Retirement System ("PERS"). Temporary employees not scheduled to work more than four and a half (4½) months per year are excluded from participation in the PERS system. The Retirement System provides for retirement benefits when a member meets the plan requirements. Both the City and covered employees make contributions to PERS. Contributions to the retirement system are mandatory for eligible positions and are deducted from the member's salary each payroll period.

If a member terminates service without meeting the conditions for benefit payment, accumulated employee contributions may be refunded subject to the PERS conditions or applicable regulations. Annual benefit statements are provided by the PERS to participating members. Employees may request an estimate of benefits from the retirement system at any time to obtain an approximate projected retirement benefit figure.

Enrollment and benefits forms are available through Human Resources. It is the employee's individual responsibility to keep on file up-to-date information related to their retirement account as to name, address and beneficiary(ies).

Employees who plan to retire from the PERS are encouraged to contact their department director and/or Human Resources at least ninety (90) days in advance of the anticipated retirement date to secure estimate of benefits information, to finalize the retirement date, and to complete all necessary paperwork.

If you have questions about PERS, you may go to the PERS website at [www.pers.ms.gov](http://www.pers.ms.gov). Nothing contained in this handbook alters the rules of PERS, including contributions or eligibility for benefits.

### **Workers' Compensation**

Employees are covered under the workers' compensation program, and the City of Gluckstadt pays the premium for that program. Workers' compensation pays medical coverage and partial wage replacement for employees injured on the job pursuant to guidelines set forth by the Mississippi Workers Compensation Commission.

### **Unemployment Compensation**

Employees of the City of Gluckstadt, except for elected officials, are paid unemployment compensation benefits under the state program when the employee meets the requirements for unemployment compensation. The City pays the cost of this benefit.

### **Education and Training**

When the City of Gluckstadt requires employees to participate in training programs, all training costs are paid or reimbursed by the City. Authorization to attend professional seminars and certification courses are decided on a case-by-case basis by the City within the constraints of the training and education budget.

## **VI. LEAVE TIME**

### **Work Leave Time**

Leave time refers to normal working hours not worked by employees. It may be paid time or unpaid. The City must approve all leave time prior to use. Department Heads should keep copies of leave slips for time requested. Leave time is entered on each employee's time sheet for that period. When requesting leave under any policy, employees should use the Leave Request Form in the Appendix of this Handbook.



Unauthorized absence time is time away from work not authorized by the City. Employees will not be paid for this type of absence; unauthorized absences may result in disciplinary action, up to and including termination.

### **Paid Time Off**

#### **A. Holidays**

The City of Gluckstadt pays a certain number of days each year, by policy. Holidays and paid leave days normally consist of:

1. New Year's Day;
2. Martin Luther King Day; Robert E. Lee's Birthday
3. President's Day;
4. Good Friday; \*replaced Confederate Memorial Day, revision 6.13.23 by BOA\*
5. Memorial Day; Jefferson Davis' Birthday
6. Independence Day;
7. Labor Day;
8. Veteran's Day;
9. Thanksgiving
10. The day after Thanksgiving Day \*by issuance of Governor proclamation\*
11. Christmas Day.

\*all subject to change by issuance of Governor proclamation\*

These Holidays, or the dates when they are observed, may change by proclamation of the Governor or the City's governing authority or federal, state, or local law and such change(s) govern and override the listings contained in this Handbook. Holidays are observed from 12:00 a.m. (midnight) the eve of the holiday to 12:00 a.m. (midnight) the day of the holiday. Holiday pay will be granted to all eligible employees, including public safety employees, whose work schedule would have included the day on which the holiday occurs or is observed. Such employees will receive pay for the holiday at straight time. Employees who actually physically work on the holiday will receive pay at two (2) times the hourly rate, FOR THE HOURS WORKED. Employees paid on a salary basis will receive their regular pay for any pay period in which the holiday occurs.

Unless otherwise declared by the governing authority or by state law or local ordinance, in the event a holiday falls upon a Sunday, the following Monday shall be deemed to be the legal holiday and in the event the legal holiday falls on a Saturday, the preceding Friday shall be deemed to be the legal holiday.

When a holiday falls within an eligible employee's approved PTO, the holiday shall not be counted as a leave day in computing the amount of leave debited. An employee who is away from work and not in a paid leave status the day immediately preceding or following a holiday will not be eligible for holiday pay. When a holiday falls on a Saturday or

Sunday, shift employees shall be paid holiday pay based upon the actual holiday and not the observed holiday (i.e., not a Friday or a Monday).

#### **B. Vacation Leave**

Employees are entitled to paid time off for vacation each year. After six months of employment, the City of Gluckstadt employees may take their accumulated leave time off. During an employee's initial six months of employment, time off will be charged against his/her pay. Vacation leave is paid according to hours accumulated per pay period. During the first five years of employment, regular full time employees earn 3.077 hours per fully worked pay period (80 hours of vacation time per year). After the fifth year anniversary date, vacation leave will increase by 1 day per year not to exceed four weeks of vacation leave per year.

Employees are encouraged to take vacations annually but can carry over accumulated vacation leave. There is no limit to the amount of paid leave employees can expend for Family and Medical Leave Act. Otherwise, employees can use no more than 160 hours in one calendar year. At the time of an employee's separation, no more than 30 days of unused vacation leave shall be paid at the current rate of salary. Any unused vacation not paid at termination or retirement may be certified to PERS for leave conversion if it meets qualifying conditions.

#### **C. Sick Leave**

Sick leave may be used, when it has accrued, if the employee misses work for personal illness, health care appointments or treatments, to care for members of his/her immediate family during illness, or for health care appointments for family members.

Sick leave accrues at 3.69 hours per pay period (one day per pay month). An employee may use sick leave as it is accumulated even during the initial six month period of employment.

Employees, when using sick leave for health care appointments, are required to notify their managers at least a day in advance of the requested sick leave day.

Employees shall furnish a medical leave slip from their health care provider when sick leave extends beyond three consecutive regularly scheduled days. The medical leave slip should be provided to the City Clerk unless otherwise directed. No more than 6 consecutive weeks of sick leave may be taken without Board approval.

Employees may accumulate up to 1040 hours of sick leave. Annually on September 30<sup>th</sup> employees are allowed to transfer 20 percent of unused sick leave earned during the current October 1<sup>st</sup> thru September 30<sup>th</sup> to vacation. Employees leaving the City of Gluckstadt employment are not compensated for any accrued sick leave. Therefore, it will be certified to PERS for leave conversion if eligibility requirements are satisfied.

Time spent recuperating from an illness that strikes an employee while on vacation leave can be taken as sick leave. As soon as possible, the employee's vacation timesheet should be changed to reflect the hours claimed as sick leave.

#### **D. Emergency or Bereavement Leave**

In the case of a serious illness or death of an immediate family member, an employee is eligible for up to three days of leave with pay (per calendar year). For purposes of this type of leave, immediate family consists of the employee's spouse, children, stepchildren, parents, stepparents, siblings, siblings-in-law, parents-in-law, grandparents, step-grandparents, grandchildren, or step-grandchildren.

### **Unpaid Time Off**

#### **E. Military Leave, Voting, and Jury Duty**

Military leave will be granted to employees who are absent from work because of service in the U.S. uniformed services in accordance with the Uniformed Services Employment and Reemployment Rights Act (USERRA) and applicable state law. Advance notice of military service is required unless military necessity prevents such notice. An employee participating in ordered military functions shall provide a copy of their military orders to their department director as soon as possible. Employees with orders for deployment greater than thirty (30) days may be required to return all issued equipment and property of the City of Gluckstadt until the employee's return from military duty.

Employees who are a member of the reserve components of the Armed Forces of the United States, or former members of the service of the United States discharged or released therefrom under conditions other than dishonorable, will receive full time pay for the hourly equivalent of the first 15 days for which they are ordered to duty to participate in training at encampments, field exercises, maneuvers, outdoor target practice, or for other exercises, provided they were previously scheduled to work on such days. Such employees should provide a copy of any military orders, including annual drill schedules, to their department director as soon as possible.

Continuation of health insurance benefits is available as stipulated by USERRA and state law based on the length of the leave and subject to the terms, conditions, and limitations of the applicable plans for which the employee is eligible.

Vacation, sick leave, and holiday benefits will continue to accrue during a military leave of absence.

A reasonable amount of time will be given employees to vote in public elections. Permission from the immediate supervisor should be requested before using time to vote. Employees are also eligible for leave with pay if previously approved by their supervisor, subject to certain restrictions, if called for jury duty or to serve as a witness in court proceedings.

## **F. Family and Medical Leave Act (FMLA)**

### **1. Summary**

Pursuant to the requirements of the Family and Medical Leave Act of 1993 ("FMLA"), eligible employees are entitled to unpaid leave in certain circumstances. This policy provides a summary of the leave provided under the FMLA as well as the City's procedures for requesting and approving leave. This policy does not confer any rights beyond those provided by the FMLA. Indeed, nothing about the inclusion of this policy, nor utilization of this policy, shall prevent the City from relying on the FMLA's eligibility limitations, including but not limited to the requirement that an employer have at least 50 employees.

When requesting leave under the FMLA, employees are encouraged to use the "Family and Medical Leave Act (FMLA) Request Form" included in the Appendix to this Handbook.

### **A. Eligibility**

Eligible employees are those who have been employed by the city for at least 12 months and for at least 1,250 hours during the previous 12 month period.

The Appendix to this Handbook provides a Notice of Eligibility & Rights and Responsibilities under the Family and Medical Leave Act (Form WH-381) for eligible employee who submit a request for leave under the FMLA. The form is intended to inform the employee of his or her eligibility for FMLA leave or at least one reason why the employee is not eligible.

### **B. Grounds for Leave**

The circumstances in which FMLA leave is available are governed solely by the FMLA and the regulations thereunder. The city's FMLA Policy does not confer any additional entitlement to leave. Eligible employees are entitled up to 12 weeks of leave during any 12 month period for one or more of the reasons listed in this section. Generally, spouses who are both employed by the City are entitled to a total of 12 weeks of combined leave. An employee may take FMLA leave:

1. Because of the birth of a son or daughter of the employee and in order to care for such son or daughter;
2. Because of the placement of a son or daughter with the employee for adoption or foster care;
3. In order to care for the spouse, son, daughter, or parent of the employee, if such spouse, son, daughter, or parent has a serious health condition;
4. Because of a serious health condition that makes the employee unable to perform the functions of the position of such employee. A "serious health condition" is defined in

accordance with FMLA regulations. Generally, this means a physical or mental condition that involves inpatient care (including any subsequent period of incapacity and any follow-up treatment) or continuing treatment by a health care provider. The City reserves the right to require the employee to provide certification of a serious health condition; or

5. For certain qualifying exigencies arising out of the fact that a covered employee's spouse, son, daughter or parent is on active duty or has been notified of an impending call or order to active duty in the National Guard or Reserves. A "qualifying exigency" is defined in accordance with FMLA regulations as (i) a short-notice deployment, (ii) military events and related activities, (iii) childcare and school activities, (iv) financial and legal arrangements, (v) counseling, (vi) rest and recuperation, or (vii) post-deployment activities.

After considering whether an eligible employee's request for leave is covered under the FMLA, the City will provide a Designation Notice (Form WH-382), an example of which is included in the Appendix. This form informs the employee whether the FMLA leave request is approved. If approved, this form also informs the employee of the amount of leave that is designated and counted against the employee's FMLA entitlement. The City may also use this form to inform the employee that the certification is incomplete or insufficient and additional information is needed.

### **C. Military Caregiver Leave**

In addition to the grounds set forth in Section I.B above, an eligible employee who is the spouse, son, daughter, parent, or next of kin of a covered military service member shall be entitled to a maximum of 26 weeks of leave during any single 12 month period to care for that service member. This type of leave is known as "military caregiver leave." The single 12-month period for military caregiver leave begins on the first day the employee takes leave for this reason and ends 12 months later.

An eligible employee is entitled to up to 26 weeks of leave during any twelve month period to care for a covered military service member. A "covered service member" is defined in accordance with FMLA regulations as a service member who has a serious injury or illness incurred in the line of duty, while on active duty, for which he or she is undergoing medical treatment, recuperation, or therapy, or otherwise in outpatient status. This does not include former service members or service members on the permanent disability retired list.

This 26 week military caregiver leave period represents the maximum total amount of leave available to a covered employee during any rolling twelve month period. It may not be taken in addition to any other leave authorized under the FMLA or any other leave policy. In addition, military caregiver leave is a onetime event. It may not be taken more than once to care for a given injury or illness to a given service member.

For purposes of military caregiver leave under this section, a service member's "next of kin" is defined in accordance with FMLA regulations as his or her nearest blood relative, other than his or her spouse, parent, son, or daughter. The City reserves the right to confirm next of kin status.

For the purposes of military caregiver leave under this section, a “serious illness or injury” is defined in accordance with FMLA regulations as an illness or injury that renders the service member medically unfit to perform the duties of his or her office, grade, rank or rating. All other terms used in this section are defined in accordance with FMLA regulations and relevant statutes.

## **2. Use of Paid Leave**

To the extent that the employee is eligible for paid leave, any paid leave must be taken concurrently at the start of any family and medical leave of absence. This includes any form of leave time in which any form of compensation is paid, including vacation time, sick leave, and absences covered by workers’ compensation. Therefore, the employee will be compensated at his or her regular rate for any leave taken using paid leave. The remainder, if any, of the family leave will not be compensated.

## **3. Intermittent or Reduce-Schedule Leave**

In general, any employee wishing to utilize this benefit must do so on a continuous basis. On the other hand, if able to do so, the city must consider reduced-schedule leave—that is, leave that reduces the staffer’s regularly scheduled number of days per work week or hour per workday—if it is in the best interest of the City and the employee.

4. If medically necessary for a serious health condition of the employee or his/her spouse, child, or parent, leave may be taken on an intermittent basis. That is, leave may be taken periodically for short periods to respond to the medical condition or other covered circumstance. If leave is requested on this basis, however, the city may require the employee to transfer to an alternative position that will be more suitable for recurring periods of absence and/or a part-time schedule.

## **5. Certification**

The City may require medical certification to support a leave request for an employee’s own serious health condition. The certification must include a statement that the employee is unable to perform the functions of his/her position. At its discretion, the city may require a second medical opinion and periodic recertification at its expense. If the first and second opinions differ, the city may, at its own expense, require the opinion of a third health care provider, which will be final.

The City also may require medical certification to support leave to care for a seriously ill child, spouse, or parent. For this leave request, the certification must include an estimate of the amount of time the employee will be needed to provide care.

Medical certification forms referenced above are included in the Appendix: Certification of Health Care Provider for Family Member’s Serious Health Condition under the FMLA (Form WH-380F) and Certification of Health Care Provider for Employee’s Serious Health Condition under the FMLA (Form WH-380E).

## **6. Return to Work**

The city will reinstate a returning employee to the job he held when he left or to an equivalent position with equivalent employment benefits, pay, and other terms and conditions of employment. If an employee fails, however, to return to work upon exhaustion of the 12 weeks of family/medical leave or 26 weeks of service member family leave, the employee will be considered to have voluntarily resigned. The city reserves the right to require an employee to provide a certification of fitness for duty before returning to work.

## **7. Notification and Reporting Requirements**

Under the FMLA, employees are responsible for giving 30 days' notice to their employers. If circumstances require that a leave begin in less than 30 days, employees must give the city as much notice as practicable. Examples of when 30 days' notice may not be required include a premature birth, a serious accident to a family member, or serious medical condition requiring immediate surgery.

## **8. Benefit Status**

Any employee who is granted a leave of absence under the FMLA is entitled to continuity of his or her insurance coverage, provided that the employee either arranges in advance to pay his/her share of the premiums or pays the premiums as they come due. An employee on paid leave will be subject to regular withholdings and should only arrange for payment for a period of unpaid leave. If the employee does not timely pay premiums, coverage will be cancelled but will be reinstated when the employee returns to work. If the employee does not return COBRA will be offered based on the employee's termination date.

# **VII. EMPLOYEE PERSONNEL RECORDS**

## **Personnel Files**

In each employee's files, records regarding his/her position, pay, and other employee status actions will be retained. Other items that may be contained in the file are written notes of explanation, grievances filed, employee forms for taxes, and any retirement application. The file may also contain disciplinary actions, awards received, training records, and performance reviews. Access to the file is by appointment with the Human Resource Officer. Employee medical records will be kept in a separate, confidential file in accordance with the Health Information Portability and Accountability Act. Employees shall be responsible for providing Human Resources with any change of personal information.

## **Leave Records**

Records of leave accrual and leave taken are kept with payroll information in employee records. These records are updated with payroll information.

**ACKNOWLEDGMENT OF RECEIPT OF EMPLOYEE HANDBOOK**

I acknowledge that I received a copy of the City of Gluckstadt, Mississippi's Employee Handbook ("Handbook"), and that I read it, understood it, and agree to comply with it. I understand that I am responsible for familiarizing myself with the policies in this Handbook and agree to comply with all rules applicable to me.

I specifically understand and agree that the employment relationship between the City and me is at will and can be terminated by the City or me at any time, with or without cause or notice. Nothing in this Handbook is intended to modify the City's policy of at-will employment.

I understand and agree that the policies described in the Handbook are intended as a guide only and do not constitute a contract of employment. I understand that the City reserves the right to make changes to its policies, procedures, or benefits at any time at its sole and complete discretion. I further understand that the City reserves the right to interpret its policies or to vary its procedures as it deems necessary or appropriate. I further understand that any delay or failure by the City to enforce any rule or procedure contained in the Handbook does not constitute a waiver of the City's right to do so in the future.

I have received the City's Employee Handbook. I have read it, understand it, and agree to abide by the policies and procedures contained in the Handbook.

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

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Employee's Printed Name



**APPENDIX**

- A. Complaint Form for Reporting Harassment
- B. Employee Grievance Form
- C. Leave Request Form
- D. Reasonable Accommodation Request Form
- E. Family and Medical Leave Act (FMLA) Request Form
- F. Notice of Eligibility & Rights and Responsibilities under the Family and Medical Leave Act (Form WH-381)
- G. Designation Notice (Form WH-382)
- H. Certification of Health Care Provider for Family Member's Serious Health Condition under the FMLA (Form WH-380F)
- I. Certification of Health Care Provider for Employee's Serious Health Condition under the FMLA (Form WH-380E)

**COMPLAINT FORM FOR REPORTING HARASSMENT****City of Gluckstadt, Mississippi**

If you believe that you have been subjected to harassment, you are encouraged to complete this form and submit a copy of it to both your direct supervisor and to the City of Gluckstadt's Human Resources Director. If due to specific circumstances it is not appropriate to submit your form to your direct supervisor or to the Human Resources Director, submit your form to the City. Once you submit this form, your claim of harassment will be investigated. If you are more comfortable reporting your claim of harassment verbally or in another manner, your claim will still be investigated.

**Complainant Information**

Name:  
Home Address:  
Work Address:  
Home Phone:  
Work Phone:  
Job Title:  
Email:

**Supervisor's Information**

Name of Immediate Supervisor:  
Title of Immediate Supervisor:  
Work Phone of Immediate Supervisor:  
Work Address of Immediate Supervisor:

**Claim of Harassment**

1. Your complaint of harassment is made against:  
Name:  
Title:  
Work Phone:  
Work Address:  
Work Relationship to You (i.e., supervisor, subordinate, co-worker):

2. Please describe the conduct or incident(s) that is the basis of this complaint and your reasons for concluding that the conduct is harassment. Please use additional sheets of paper if necessary and attach any relevant documents or evidence.
  
  
  
  
  
  
  
  
  
  
3. Please state the date the harassment occurred and whether or not it is continuing.
  
  
  
  
  
  
  
  
  
  
4. Please list the name and contact information of any witnesses or individuals that may have information related to your complaint.
  
  
  
  
  
  
  
  
  
  
5. The following question is optional, but may help facilitate the investigation of your claim. Have you previously complained or provided information (written or verbal) about harassment while employed by the City? If so, when did you do so and to whom did you complain or provide information?

*I request that the City investigate this complaint of harassment in a timely and confidential manner as outlined below, and advise me of the results of the investigation.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## **EMPLOYEE GRIEVANCE FORM**

### **City of Gluckstadt, Mississippi**

The City of Gluckstadt Employee Handbook sets forth a grievance procedure for employees to use in the event of workplace problems. Step 1 instructs employees to utilize the chain of command, including a private meeting with his or her department head. If the grievance is not resolved at Step 1, employees should use this grievance form to proceed through the remaining steps of the grievance procedure.

More specifically, employees should complete this grievance form in advance of a Step 2 meeting with the Mayor. The completed grievance form should be provided to the Mayor by the employee at the time the employee requests a meeting with the Mayor and the department head. If the grievance is not resolved at Step 2, such that the employee requests a meeting with the Mayor and Board of Aldermen as set forth in Step 3, the Mayor should provide a copy of the employee's completed grievance to the Board of Aldermen in advance of the scheduled meeting between the employee, the Mayor, and the Board of Aldermen.

**Employee Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Job Title:** \_\_\_\_\_ **Date of Hire:** \_\_\_\_\_

**Date, Time, and Place of Event Leading to Grievance:**

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**Detailed Account of Incident (include names of persons involved, if any):**

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**Policies, Procedures, or Guidelines You Feel Have Been Violated, if any:**

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**Proposed Solution to Grievance:**

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*The grievant should retain a copy of this form for his/her records. The signature below indicates that you are filing a grievance and that the information you put on this form is truthful.*

**Employee Signature:** \_\_\_\_\_**Received By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Leave Request Form

City of Gluckstadt, Mississippi

Date of request: \_\_\_\_\_ Employee name: \_\_\_\_\_

Department: \_\_\_\_\_ Job title: \_\_\_\_\_

**Paid Time Off** (vacation/sick leave):

Start date: \_\_\_\_\_ End date: \_\_\_\_\_ Total hours: \_\_\_\_\_

**Bereavement Leave** (up to three days of paid leave due to a death in the immediate family is available):

Start date: \_\_\_\_\_ End date: \_\_\_\_\_ Total hours: \_\_\_\_\_

**Jury Duty Leave** (up to five days of paid leave for jury service is available):

Start date: \_\_\_\_\_ End date: \_\_\_\_\_ Total hours: \_\_\_\_\_

**Other:**

Policy name (e.g., military leave, voting, etc.)

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Start date: \_\_\_\_\_ End date: \_\_\_\_\_ Total hours: \_\_\_\_\_

*This form should not be used to request leave under the Family and Medical Leave Act (FMLA) or to request leave as an accommodation under the Americans with Disabilities Act (ADA). Employees should consult the handbook to request leave under the FMLA or ADA.*

\_\_\_\_\_  
Employee signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Head signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
City Clerk signature

\_\_\_\_\_  
Date

File original in the employee's leave records and provide a copy to the employee and the employee's department head.

**ADA Reasonable Accommodation Request Form**  
**City of Gluckstadt, Mississippi**

Date: \_\_\_\_\_

Employee's Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Job title: \_\_\_\_\_ Department: \_\_\_\_\_

Supervisor's name: \_\_\_\_\_

Describe the nature, extent and duration of your disability:

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Describe the accommodations you believe are needed to enable you to perform the essential functions of this job:

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Provide the name, address, telephone and fax numbers of your health care provider. The provider may receive a request from us for information regarding your impairment/disability and recommendations for accommodations.

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Attach any supporting documentation that may be helpful in evaluating this request for accommodation.

I authorize the release of information regarding my disability to the City's Human Resource Office as deemed necessary by the Office to facilitate this request for accommodation.

**Employee signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

# Family and Medical Leave Act (FMLA) Request Form

City of Gluckstadt, Mississippi

*To be completed by employee*

Employee's Name	Department	Phone Number	
Job Title			Employee ID
<input type="checkbox"/> Initial Application	Home Phone:	Cell Phone:	
<b>Reason for Leave of Absence:</b> <input type="checkbox"/> Own illness (not work related) <input type="checkbox"/> Pregnancy disability <input type="checkbox"/> Care for ill parent/spouse/child <input type="checkbox"/> Care for newborn / adopted child (add date of birth or placement) <input type="checkbox"/> Other (specify)		<b>Answer All:</b> Yes   No                      Yes   No Do you have county medical insurance? <input type="checkbox"/> <input type="checkbox"/> Are you current on another leave? <input type="checkbox"/> <input type="checkbox"/> Do you have county dental Insurance? <input type="checkbox"/> <input type="checkbox"/> Disability insurance claim? <input type="checkbox"/> <input type="checkbox"/>	
Requested start date:	Anticipated end date:	Requested intermittent or reduced work schedules:	
<i>An FMLA leave of absence is a leave without pay. Paid leave (using accrued sick time or vacation hours) shall be substituted for the unpaid leave in accordance with the FMLA Policy)</i>			
I understand that I am required to use accrued paid time off until leave concludes or accrued balance is depleted. Below is an estimate of paid time off available in my account.		Date Begins (mm/dd/yy)	Date Ends (mm/dd/yy)
Hours:	Accrued Sick Leave:		



	Accrued Vacation Leave:		
Employee's Signature		Date	

I understand that I am required to complete a FMLA Leave Certification of Health Care Provider form and submit the form to Human Resources before my leave commences. I understand that if my leave is approved, my time away from work will be charged against my twelve (12) weeks of leave available under the FMLA. Upon approval of this requested leave, I am required to utilize all paid time available to me prior to going into an unpaid leave status. In the event that I go into an unpaid status while on leave, I understand that I must contact Human Resources to make arrangements to pay my portion of health insurance premiums.

I request the following forms for my FMLA leave of absence:

1. Certification of Health Care Provider: This form is to be completed by either my health care provider (if this leave is for my own serious health condition) or by my family member's health care provider (If this leave is for the serious health condition of a spouse, parent, or child). My physician must complete this entire form. **Failure to complete this form may delay or prevent my leave approval.**
2. Continuation of Benefits While on FMLA Leave: This is an agreement between my employer and myself to continue my benefits while on FMLA leave and a financial arrangement for my portion of health care premiums.
3. Notification of FMLA Status (Approval/Denial): This is to notify me that my employer is designating the leave as FMLA leave and to inform me in writing of the specific expectations and obligations required by my employer under FMLA.
4. Request to Return from FMLA Leave: I should fill out the top portion of the form, notifying Human Resources of the date of my return. For my own serious health condition, the bottom portion of the form (fitness-for-duty certification) should be filled out by my Health Care Provider and returned to Human Resources on the day I return to work from FMLA leave.

I understand that the Certification of Health Care Provider form should be returned to Human Resources within fifteen (15) days. If I am not able to return the form within the allowed timeframe, I will contact Human Resources for assistance.

If this information is not received in the required timeframe, my leave will be considered unauthorized.

\_\_\_\_\_  
Employee Printed Name

\_\_\_\_\_  
Employee Signature

Notice of Eligibility & Rights and Responsibilities  
under the Family and Medical Leave Act

U.S. Department of Labor  
Wage and Hour Division



DO NOT SEND TO THE DEPARTMENT OF LABOR.  
PROVIDE TO EMPLOYEE.

OMB Control Number: 1235-0003

Expires: 6/30/2023

In general, to be eligible to take leave under the Family and Medical Leave Act (FMLA), an employee must have worked for an employer for at least 12 months, meet the hours of service requirement in the 12 months preceding the leave, and work at a site with at least 50 employees within 75 miles. While use of this form is optional, a fully completed Form WH-381 provides employees with the information required by 29 C.F.R. §§ 825.300(b), (c) which must be provided within five business days of the employee notifying the employer of the need for FMLA leave. Information about the FMLA may be found on the WHD website at [www.dol.gov/agencies/whd/fmla](http://www.dol.gov/agencies/whd/fmla).

Date: \_\_\_\_\_ (mm/dd/yyyy)

From: \_\_\_\_\_ (Employer) To: \_\_\_\_\_ (Employee)

On \_\_\_\_\_ (mm/dd/yyyy), we learned that you need leave (beginning on) \_\_\_\_\_ (mm/dd/yyyy)  
for one of the following reasons: (Select as appropriate)

- ☐ The birth of a child, or placement of a child with you for adoption or foster care, and to bond with the newborn or newly-placed child
- ☐ Your own serious health condition
- ☐ You are needed to care for your family member due to a serious health condition. Your family member is your:
  - ☐ Spouse                      ☐ Parent                      ☐ Child under age 18                      ☐ Child 18 years or older and incapable of self-care because of a mental or physical disability
- ☐ A qualifying exigency arising out of the fact that your family member is on covered active duty or has been notified of an impending call or order to covered active duty status. Your family member on covered active duty is your:
  - ☐ Spouse                      ☐ Parent                      ☐ Child of any age
- ☐ You are needed to care for your family member who is a covered servicemember with a serious injury or illness. You are the servicemember's:
  - ☐ Spouse                      ☐ Parent                      ☐ Child                      ☐ Next of kin

Spouse means a husband or wife as defined or recognized in the state where the individual was married, including in a common law marriage or same-sex marriage. The terms "child" and "parent" include *in loco parentis* relationships in which a person assumes the obligations of a parent to a child. An employee may take FMLA leave to care for an individual who assumed the obligations of a parent to the employee when the employee was a child. An employee may also take FMLA leave to care for a child for whom the employee has assumed the obligations of a parent. No legal or biological relationship is necessary.

**SECTION I – NOTICE OF ELIGIBILITY**

**This Notice is to inform you that you are:**

- ☐ **Eligible** for FMLA leave. (See Section II for any Additional Information Needed and Section III for information on your Rights and Responsibilities.)
- ☐ **Not eligible** for FMLA leave because: (Only one reason need be checked)
  - ☐ You have not met the FMLA's 12-month length of service requirement. As of the first date of requested leave, you will have worked approximately: \_\_\_\_\_ towards this requirement.  
(months)
  - ☐ You have not met the FMLA's 1,250 hours of service requirement. As of the first date of requested leave, you will have worked approximately: \_\_\_\_\_ towards this requirement.  
(hours of service)

- ☐ You are an airline flight crew employee and you have not met the special hours of service eligibility requirements for airline flight crew employees as of the first date of requested leave (i.e., worked or been paid for at least 60% of your applicable monthly guarantee, and worked or been paid for at least 504 duty hours.)
- ☐ You do not work at and/or report to a site with 50 or more employees within 75-miles as of the date of your request.

If you have any questions, please contact: \_\_\_\_\_ (Name of employer representative)  
at \_\_\_\_\_ (Contact information).

## SECTION II – ADDITIONAL INFORMATION NEEDED

As explained in Section I, you meet the eligibility requirements for taking FMLA leave. Please review the information below to determine if additional information is needed in order for us to determine whether your absence qualifies as FMLA leave. Once we obtain any additional information specified below we will inform you, **within 5 business days**, whether your leave will be designated as FMLA leave and count towards the FMLA leave you have available. **If complete and sufficient information is not provided in a timely manner, your leave may be denied.**

(Select as appropriate)

- ☐ No additional information requested. If no additional information requested, go to Section III.
- ☐ We request that the leave be supported by a certification, as identified below.
  - ☐ Health Care Provider for the Employee
  - ☐ Health Care Provider for the Employee's Family Member
  - ☐ Qualifying Exigency
  - ☐ Serious Illness or Injury (Military Caregiver Leave)

Selected certification form is ☐ attached / ☐ not attached.

If requested, medical certification must be returned by \_\_\_\_\_ (mm/dd/yyyy) (Must allow at least 15 calendar days from the date the employer requested the employee to provide certification, unless it is not feasible despite the employee's diligent, good faith efforts.)

- ☐ We request that you provide reasonable documentation or a statement to establish the relationship between you and your family member, including *in loco parentis* relationships (as explained on page one). The information requested must be returned to us by \_\_\_\_\_ (mm/dd/yyyy). You may choose to provide a simple statement of the relationship or provide documentation such as a child's birth certificate, a court document, or documents regarding foster care or adoption-related activities. Official documents submitted for this purpose will be returned to you after examination.
- ☐ Other information needed (e.g. documentation for military family leave): \_\_\_\_\_  
The information requested must be returned to us by \_\_\_\_\_ (mm/dd/yyyy).

If you have any questions, please contact: \_\_\_\_\_ (Name of employer representative)  
at \_\_\_\_\_ (Contact information).

## SECTION III – NOTICE OF RIGHTS AND RESPONSIBILITIES

### Part A: FMLA Leave Entitlement

You have a right under the FMLA to take unpaid, job-protected FMLA leave in a 12-month period for certain family and medical reasons, including up to **12 weeks** of unpaid leave in a 12-month period for the birth of a child or placement of a child for adoption or foster care, for leave related to your own or a family member's serious health condition, or for certain qualifying exigencies related to the deployment of a military member to covered active duty. You also have a right

Employee Name: \_\_\_\_\_

Section 8, II)

under the FMLA to take up to **26 weeks** of unpaid, job-protected FMLA leave in a single 12-month period to care for a covered servicemember with a serious injury or illness (*Military Caregiver Leave*).

The 12-month period for FMLA leave is calculated as: *(Select as appropriate)*

- ☐ The calendar year (January 1<sup>st</sup> - December 31<sup>st</sup>)
- ☐ A fixed leave year based on \_\_\_\_\_  
*(e.g., a fiscal year beginning on July 1 and ending on June 30)*
- ☐ The 12-month period measured forward from the date of your first FMLA leave usage.
- ☐ A "rolling" 12-month period measured backward from the date of any FMLA leave usage. *(Each time an employee takes FMLA leave, the remaining leave is the balance of the 12 weeks not used during the 12 months immediately before the FMLA leave is to start.)*

If applicable, the single 12-month period for *Military Caregiver Leave* started on \_\_\_\_\_ *(mm/dd/yyyy)*.

You ☐ *are* / ☐ *are not* **considered a key employee** as defined under the FMLA. Your FMLA leave cannot be denied for this reason; however, we may not restore you to employment following FMLA leave if such restoration will cause substantial and grievous economic injury to us.

We ☐ *have* / ☐ *have not* determined that restoring you to employment at the conclusion of FMLA leave will cause substantial and grievous economic harm to us. Additional information will be provided separately concerning your status as key employee and restoration.

#### **Part B: Substitution of Paid Leave – When Paid Leave is Used at the Same Time as FMLA Leave**

You have a right under the FMLA to request that your accrued paid leave be substituted for your FMLA leave. This means that you can request that your accrued paid leave run concurrently with some or all of your unpaid FMLA leave, provided you meet any applicable requirements of our leave policy. Concurrent leave use means the absence will count against both the designated paid leave and unpaid FMLA leave at the same time. If you do not meet the requirements for taking paid leave, you remain entitled to take available unpaid FMLA leave in the applicable 12-month period. Even if you do not request it, the FMLA allows us to require you to use your available sick, vacation, or other paid leave during your FMLA absence.

*(Check all that apply)*

- ☐ **Some or all of your FMLA leave will not be paid.** Any unpaid FMLA leave taken will be designated as FMLA leave and counted against the amount of FMLA leave you have available to use in the applicable 12-month period.
- ☐ **You have requested to use some or all of your available paid leave** *(e.g., sick, vacation, PTO)* during your FMLA leave. Any paid leave taken for this reason will also be designated as FMLA leave and counted against the amount of FMLA leave you have available to use in the applicable 12-month period.
- ☐ **We are requiring you to use some or all of your available paid leave** *(e.g., sick, vacation, PTO)* during your FMLA leave. Any paid leave taken for this reason will also be designated as FMLA leave and counted against the amount of FMLA leave you have available to use in the applicable 12-month period.
- ☐ **Other:** *(e.g., short- or long-term disability, workers' compensation, state medical leave law, etc.)* \_\_\_\_\_  
Any time taken for this reason will also be designated as FMLA leave and counted against the amount of FMLA leave you have available to use in the applicable 12-month period.

The applicable conditions for use of paid leave include: \_\_\_\_\_.

For more information about conditions applicable to sick/vacation/other paid leave usage please refer to \_\_\_\_\_  
\_\_\_\_\_ available at: \_\_\_\_\_.

Employee Name: \_\_\_\_\_

Section 8, II)

### **Part C: Maintain Health Benefits**

Your health benefits must be maintained during any period of FMLA leave under the same conditions as if you continued to work. During any paid portion of FMLA leave, your share of any premiums will be paid by the method normally used during any paid leave. During any unpaid portion of FMLA leave, you must continue to make any normal contributions to the cost of the health insurance premiums. To make arrangements to continue to make your share of the premium payments on your health insurance while you are on any unpaid FMLA leave, contact \_\_\_\_\_ at \_\_\_\_\_.

You have a minimum grace period of (☐ 30-days or ☐ \_\_\_\_\_ *indicate longer period, if applicable*) in which to make premium payments. If payment is not made timely, your group health insurance may be cancelled, provided we notify you in writing at least 15 days before the date that your health coverage will lapse, or, at our option, we may pay your share of the premiums during FMLA leave, and recover these payments from you upon your return to work.

You may be required to reimburse us for our share of health insurance premiums paid on your behalf during your FMLA leave if you do not return to work following **unpaid** FMLA leave for a reason other than: the continuation, recurrence, or onset of your or your family member's serious health condition which would entitle you to FMLA leave; or the continuation, recurrence, or onset of a covered servicemember's serious injury or illness which would entitle you to FMLA leave; or other circumstances beyond your control.

### **Part D: Other Employee Benefits**

Upon your return from FMLA leave, your other employee benefits, such as pensions or life insurance, must be resumed in the same manner and at the same levels as provided when your FMLA leave began. To make arrangements to continue your employee benefits while you are on FMLA leave, contact \_\_\_\_\_ at \_\_\_\_\_.

### **Part E: Return-to-Work Requirements**

You must be reinstated to the same or an equivalent job with the same pay, benefits, and terms and conditions of employment on your return from FMLA-protected leave. An equivalent position is one that is virtually identical to your former position in terms of pay, benefits, and working conditions. At the end of your FMLA leave, all benefits must also be resumed in the same manner and at the same level provided when the leave began. You do not have return-to-work rights under the FMLA if you need leave beyond the amount of FMLA leave you have available to use.

### **Part F: Other Requirements While on FMLA Leave**

While on leave you (☐ will be / ☐ will not be) required to furnish us with periodic reports of your status and intent to return to work every \_\_\_\_\_.

*(Indicate interval of periodic reports, as appropriate for the FMLA leave situation).*

**If the circumstances of your leave change and you are able to return to work earlier than expected, you will be required to notify us at least two workdays prior to the date you intend to report for work.**

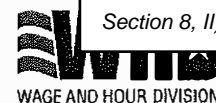
### **PAPERWORK REDUCTION ACT NOTICE AND PUBLIC BURDEN STATEMENT**

It is mandatory for employers to provide employees with notice of their eligibility for FMLA protection and their rights and responsibilities. 29 U.S.C. § 2617; 29 C.F.R. § 825.300(b), (c). It is mandatory for employers to retain a copy of this disclosure in their records for three years. 29 U.S.C. § 2616; 29 C.F.R. § 825.500. Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. The Department of Labor estimates that it will take an average of 10 minutes for respondents to complete this collection of information, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding this burden estimate or any other aspect of this collection information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S-3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

**DO NOT SEND THE COMPLETED FORM TO THE DEPARTMENT OF LABOR. EMPLOYEE INFORMATION.**

**Designation Notice  
under the Family and Medical Leave Act**

**U.S. Department of Labor  
Wage and Hour Division**



**DO NOT SEND TO THE DEPARTMENT OF LABOR.  
PROVIDE TO EMPLOYEE.**

OMB Control Number: 1235-0003

Expires: 6/30/2023

Leave covered under the Family and Medical Leave Act (FMLA) must be designated as FMLA-protected and the employer must inform the employee of the amount of leave that will be counted against the employee's FMLA leave entitlement. In order to determine whether leave is covered under the FMLA, the employer may request that the leave be supported by a certification. If the certification is incomplete or insufficient, the employer must state in writing what additional information is necessary to make the certification complete and sufficient. While use of this form is optional, a fully completed Form WH-382 provides employees with the information required by 29 C.F.R. §§ 825.300(d), 825.301, and 825.305(c), which must be provided within five business days of the employer having enough information to determine whether the leave is for an FMLA-qualifying reason. Information about the FMLA may be found on the WHD website at [www.dol.gov/agencies/whd/fmla](http://www.dol.gov/agencies/whd/fmla).

**SECTION I - EMPLOYER**

The employer is responsible in **all** circumstances for designating leave as FMLA-qualifying and giving notice to the employee. Once an eligible employee communicates a need to take leave for an FMLA-qualifying reason, an employer may not delay designating such leave as FMLA leave, and neither the employee nor the employer may decline FMLA protection for that leave.

Date: \_\_\_\_\_ (mm/dd/yyyy)

From: \_\_\_\_\_ (Employer) To: \_\_\_\_\_ (Employee)

On \_\_\_\_\_ (mm/dd/yyyy) we received your most recent information to support your need for leave due to:  
(Select as appropriate)

- ☐ The birth of a child, or placement of a child with you for adoption or foster care, and to bond with the newborn or newly-placed child
- ☐ Your own serious health condition
- ☐ The serious health condition of your spouse, child, or parent
- ☐ A qualifying exigency arising out of the fact that your spouse, child, or parent is on covered active duty or has been notified of an impending call or order to covered active duty with the Armed Forces
- ☐ A serious injury or illness of a covered servicemember where you are the servicemember's spouse, child, parent, or next of kin (Military Caregiver Leave)

**We have reviewed information related to your need for leave under the FMLA along with any supporting documentation provided and decided that your FMLA leave request is:** (Select as appropriate)

- ☐ **Approved.** All leave taken for this reason will be designated as FMLA leave. Go to Section III for more information.
- ☐ **Not Approved:** (Select as appropriate)
  - ☐ The FMLA does not apply to your leave request.
  - ☐ As of the date the leave is to start, you do not have any FMLA leave available to use.
  - ☐ Other \_\_\_\_\_
- ☐ **Additional information** is needed to determine if your leave request qualifies as FMLA leave. (Go to Section II for the specific information needed. If your FMLA leave request is approved and no additional information is needed, go to Section III.)

**SECTION II - ADDITIONAL INFORMATION NEEDED**

We need additional information to determine whether your leave request qualifies under the FMLA. Once we obtain the additional information requested, we will inform you **within 5 business days** if your leave will or will not be designated as FMLA leave and count towards the amount of FMLA leave you have available. **Failure to provide the additional information as requested may result in a denial of your FMLA leave request.**

If you have any questions, please contact: \_\_\_\_\_ at \_\_\_\_\_  
(Name of employer FMLA representative) (Contact information)

**Incomplete or Insufficient Certification**

The certification you have provided is incomplete and/or insufficient to determine whether the FMLA applies to your leave request. (Select as applicable)

- ☐ The certification provided is incomplete and we are unable to determine whether the FMLA applies to your leave request. "Incomplete" means one or more of the applicable entries on the certification have not been completed.

- ☐ The certification provided is insufficient to determine whether the FMLA applies to your leave request. *"Insufficient" means the information provided is vague, unclear, ambiguous or non-responsive.*

*Specify the information needed to make the certification complete and/or sufficient:* \_\_\_\_\_

You must provide the requested information no later than (provide at least 7 calendar days) \_\_\_\_\_ (mm/dd/yyyy), unless it is not practicable under the particular circumstances despite your diligent good faith efforts, or your leave may be denied.

### **Second and Third Opinions**

- ☐ We request that you obtain a (☐ second / ☐ third opinion) medical certification at our expense, and we will provide further details at a later time. *Note: The employee or the employee's family member may be requested to authorize the health care provider to release information pertaining only to the serious health condition at issue.*

## **SECTION III – FMLA LEAVE APPROVED**

As explained in Section I, your FMLA leave request is approved. All leave taken for this reason will be designated as FMLA leave and will count against the amount of FMLA leave you have available to use in the applicable 12-month period. The FMLA requires that you notify us as soon as practicable if the dates of scheduled leave change, are extended, or were initially unknown. Based on the information you have provided to date, we are providing the following information about the amount of time that will be counted against the total amount of FMLA leave you have available to use in the applicable 12-month period: *(Select as appropriate)*

- ☐ Provided there is no change from your **anticipated FMLA leave schedule**, the following number of hours, days, or weeks will be counted against your leave entitlement: \_\_\_\_\_.
- ☐ Because the leave you will need will be **unscheduled**, it is not possible to provide the hours, days, or weeks that will be counted against your FMLA entitlement at this time. You have the right to request this information once in a 30-day period (if leave was taken in the 30-day period).

Please be advised: *(check all that apply)*

- ☐ **Some or all of your FMLA leave will not be paid.** Any unpaid FMLA leave taken will be designated as FMLA leave and counted against the amount of FMLA leave you have available to use in the applicable 12-month period.
- ☐ **Based on your request, some or all of your available paid leave (e.g., sick, vacation, PTO) will be used during your FMLA leave.** Any paid leave taken for this reason will also be designated as FMLA leave and counted against the amount of FMLA leave you have available to use in the applicable 12-month period.
- ☐ **We are requiring you to use some or all of your available paid leave (e.g., sick, vacation, PTO) during your FMLA leave.** Any paid leave taken for this reason will also be designated as FMLA leave and counted against the amount of FMLA leave you have available to use in the applicable 12-month period.
- ☐ **Other:** \_\_\_\_\_  
*(e.g., Short- or long-term disability, workers' compensation, state medical leave law, etc.) Any time taken for this reason will also be designated as FMLA leave and counted against the amount of FMLA leave you have available to use in the applicable 12-month period.*

**Return-to-work requirements.** To be restored to work after taking FMLA leave, you (☐ will be / ☐ will not be) required to provide a certification from your health care provider (fitness-for-duty certification) that you are able to resume work. This request for a fitness-for-duty certification is *only* with regard to the particular serious health condition that caused your need for FMLA leave. **If such certification is not timely received, your return to work may be delayed until the certification is provided.**

A list of the essential functions of your position (☐ is / ☐ is not) attached. If attached, the fitness-for-duty certification must address your ability to perform the essential job functions.

### **PAPERWORK REDUCTION ACT NOTICE AND PUBLIC BURDEN STATEMENT**

It is mandatory for employers to inform employees in writing whether leave requested under the FMLA has been determined to be covered under the FMLA. 29 U.S.C. § 2617; 29 C.F.R. § 825.300(d), (e). It is mandatory for employers to retain a copy of this disclosure in their records for three years. 29 U.S.C. § 2616; 29 C.F.R. § 825.500. Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. The Department of Labor estimates that it will take an average of 10 minutes for respondents to complete this collection of information, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding this burden estimate or any other aspect of this collection information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S-3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

**DO NOT SEND THE COMPLETED FORM TO THE DEPARTMENT OF LABOR. EMPLOYEE INFORMATION.**

**Certification of Health Care Provider for  
Family Member's Serious Health Condition  
under the Family and Medical Leave Act**

**U.S. Department of Labor  
Wage Hour Division**



**DO NOT SEND COMPLETED FORM TO THE DEPARTMENT OF LABOR.  
RETURN TO THE PATIENT.**

OMB Control Number: 1235-0003  
Expires: 6/30/2023

The Family and Medical Leave Act (FMLA) provides that an employer may require an employee seeking FMLA leave to care for a family member with a serious health condition to submit a medical certification issued by the family member's health care provider. 29 U.S.C. §§ 2613, 2614(c)(3); 29 C.F.R. § 825.305. The employer must give the employee **at least 15 calendar days** to provide the certification. If the employee fails to provide complete and sufficient medical certification, his or her FMLA leave request may be denied. 29 C.F.R. § 825.313. Information about the FMLA may be found on the WHD website at [www.dol.gov/agencies/whd/fmla](http://www.dol.gov/agencies/whd/fmla).

**SECTION I - EMPLOYER**

Either the employee or the employer may complete Section I. While use of this form is optional, this form asks the health care provider for the information necessary for a complete and sufficient medical certification, which is set out at 29 C.F.R. § 825.306. **You may not ask the employee to provide more information than allowed under the FMLA regulations, 29 C.F.R. §§ 825.306-825.308.** Additionally, you may not request a certification for FMLA leave to bond with a healthy newborn child or a child placed for adoption or foster care.

Employers must generally maintain records and documents relating to medical information, medical certifications, recertifications, or medical histories of employees or employees' family members created for FMLA purposes as confidential medical records in separate files/records from the usual personnel files and in accordance with 29 C.F.R. § 1630.14(c)(1), if the Americans with Disabilities Act applies, and in accordance with 29 C.F.R. § 1635.9, if the Genetic Information Nondiscrimination Act applies.

- (1) Employee name: \_\_\_\_\_  
*First Middle Last*
- (2) Employer name: \_\_\_\_\_ Date: \_\_\_\_\_ (mm/dd/yyyy)  
(List date certification requested)
- (3) The medical certification must be returned by \_\_\_\_\_ (mm/dd/yyyy)  
(Must allow at least 15 calendar days from the date requested, unless it is not feasible despite the employee's diligent, good faith efforts.)

**SECTION II - EMPLOYEE**

Please complete and sign Section II before providing this form to your family member or your family member's health care provider. The FMLA allows an employer to require that you submit a timely, complete, and sufficient medical certification to support a request for FMLA leave due to the serious health condition of your family member. If requested by your employer, your response is required to obtain or retain the benefit of the FMLA protections. 29 U.S.C. §§ 2613, 2614(c)(3). **You are responsible for making sure the medical certification is provided to your employer within the time frame requested, which must be at least 15 calendar days.** 29 C.F.R. §§ 825.305-825.306. Failure to provide a complete and sufficient medical certification may result in a denial of your FMLA leave request. 29 C.F.R. § 825.313.

- (1) Name of the family member for whom you will provide care: \_\_\_\_\_
- (2) Select the relationship of the family member to you. The family member is your:
- ☐ Spouse ☐ Parent ☐ Child, under age 18  
☐ Child, age 18 or older and incapable of self-care because of a mental or physical disability

Spouse means a husband or wife as defined or recognized in the state where the individual was married, including in a common law marriage or same-sex marriage. The terms "child" and "parent" include *in loco parentis* relationships in which a person assumes the obligations of a parent to a child. An employee may take FMLA leave to care for an individual who assumed the obligations of a parent to the employee when the employee was a child. An employee may also take FMLA leave to care for a child for whom the employee has assumed the obligations of a parent. No legal or biological relationship is necessary.



Employee Name: \_\_\_\_\_

Section 8, II)

(3) Briefly describe the care you will provide to your family member: *(Check all that apply)*

☐ Assistance with basic medical, hygienic, nutritional, or safety needs

☐ Transportation

☐ Physical Care

☐ Psychological Comfort

☐ Other: \_\_\_\_\_

(4) Give your **best estimate** of the amount of leave needed to provide the care described: \_\_\_\_\_

(5) If a **reduced work schedule** is necessary to provide the care described, give your **best estimate** of the reduced schedule you are able to work. From \_\_\_\_\_ (mm/dd/yyyy) to \_\_\_\_\_ (mm/dd/yyyy), I am able to work \_\_\_\_\_ (hours per day) \_\_\_\_\_ (days per week).

Employee

Signature \_\_\_\_\_ Date \_\_\_\_\_ (mm/dd/yyyy)

### SECTION III - HEALTH CARE PROVIDER

Please provide your contact information, complete all relevant parts of this Section, and sign the form below. A family member of your patient has requested leave under the FMLA to care for your patient. The FMLA allows an employer to require that the employee submit a timely, complete, and sufficient medical certification to support a request for FMLA leave to care for a family member with a serious health condition. For FMLA purposes, a "serious health condition" means an illness, injury, impairment, or physical or mental condition that *involves inpatient care or continuing treatment by a health care provider*. For more information about the definitions of a serious health condition under the FMLA, see the chart at the end of the form.

You also may, but are **not required** to, provide other appropriate medical facts including symptoms, diagnosis, or any regimen of continuing treatment such as the use of specialized equipment. Please note that some state or local laws may not allow disclosure of private medical information about the patient's serious health condition, such as providing the diagnosis and/or course of treatment.

Health Care Provider's name: *(Print)* \_\_\_\_\_

Health Care Provider's business address: \_\_\_\_\_

Type of practice / Medical specialty: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

#### **PART A: Medical Information**

Limit your response to the medical condition for which the employee is seeking FMLA leave. Your answers should be your **best estimate** based upon your medical knowledge, experience, and examination of the patient. **After completing Part A, complete Part B to provide information about the amount of leave needed.** Note: For FMLA purposes, "incapacity" means the inability to work, attend school, or perform regular daily activities due to the condition, treatment of the condition, or recovery from the condition. Do not provide information about genetic tests, as defined in 29 C.F.R. § 1635.3(f), genetic services, as defined in 29 C.F.R. § 1635.3(e), or the manifestation of disease or disorder in the employee's family members, 29 C.F.R. § 1635.3(b).

(1) Patient's Name: \_\_\_\_\_

(2) State the approximate date the condition started or will start: \_\_\_\_\_ (mm/dd/yyyy)

(3) Provide your **best estimate** of how long the condition lasted or will last: \_\_\_\_\_

(4) For FMLA to apply, care of the patient must be medically necessary. Briefly describe the type of care needed by the patient (e.g., assistance with basic medical, hygienic, nutritional, safety, transportation needs, physical care, or psychological comfort).  
\_\_\_\_\_  
\_\_\_\_\_

- (5) Check the box(es) for the questions below, as applicable. For all box(es) checked, the amount of leave needed must be provided in Part B.
- ☐ **Inpatient Care:** The patient (☐ has been / ☐ is expected to be) admitted for an overnight stay in a hospital, hospice, or residential medical care facility on the following date(s): \_\_\_\_\_
  - ☐ **Incapacity plus Treatment:** (e.g. outpatient surgery, strep throat)  
 Due to the condition, the patient (☐ has been / ☐ is expected to be) incapacitated for *more than* three consecutive, full calendar days from \_\_\_\_\_ (mm/dd/yyyy) to \_\_\_\_\_ (mm/dd/yyyy).  
 The patient (☐ was / ☐ will be) seen on the following date(s): \_\_\_\_\_  
 \_\_\_\_\_  
 The condition (☐ has / ☐ has not) also resulted in a course of continuing treatment under the supervision of a health care provider (e.g. prescription medication (other than over-the-counter) or therapy requiring special equipment)
  - ☐ **Pregnancy:** The condition is pregnancy. List the expected delivery date: \_\_\_\_\_ (mm/dd/yyyy).
  - ☐ **Chronic Conditions:** (e.g. asthma, migraine headaches) Due to the condition, it is medically necessary for the patient to have treatment visits at least twice per year.
  - ☐ **Permanent or Long Term Conditions:** (e.g. Alzheimer's, terminal stages of cancer) Due to the condition, incapacity is permanent or long term and requires the continuing supervision of a health care provider (even if active treatment is not being provided).
  - ☐ **Conditions requiring Multiple Treatments:** (e.g. chemotherapy treatments, restorative surgery) Due to the condition, it is medically necessary for the patient to receive multiple treatments.
  - ☐ **None of the above:** If none of the above condition(s) were checked, (i.e., inpatient care, pregnancy) no additional information is needed. Go to page 4 to sign and date the form.
- (6) If needed, briefly describe other appropriate medical facts related to the condition(s) for which the employee seeks FMLA leave. (e.g., use of nebulizer, dialysis) \_\_\_\_\_  
 \_\_\_\_\_

**PART B: Amount of Leave Needed**

- For the medical condition(s) checked in Part A, complete all that apply. Several questions seek a response as to the frequency or duration of a condition, treatment, etc. Your answer should be your **best estimate** based upon your medical knowledge, experience, and examination of the patient. Be as specific as you can; terms such as "lifetime," "unknown," or "indeterminate" may not be sufficient to determine if the benefits and protections of the FMLA apply.
- (7) Due to the condition, the patient (☐ had / ☐ will have) **planned medical treatment(s)** (scheduled medical visits) (e.g. psychotherapy, prenatal appointments) on the following date(s): \_\_\_\_\_  
 \_\_\_\_\_
- (8) Due to the condition, the patient (☐ was / ☐ will be) **referred to other health care provider(s)** for evaluation or treatment(s).  
 State the nature of such treatments: (e.g. cardiologist, physical therapy) \_\_\_\_\_  
 Provide your **best estimate** of the beginning date \_\_\_\_\_ (mm/dd/yyyy) and end date \_\_\_\_\_ (mm/dd/yyyy) for the treatment(s).  
 Provide your **best estimate** of the duration of the treatment(s), including any period(s) of recovery \_\_\_\_\_ (e.g. 3 days/week)

Employee Name: \_\_\_\_\_

Section 8, II)

- (9) Due to the condition, the patient (☐ was / ☐ will be) **incapacitated for a continuous period of time**, including any time for treatment(s) and/or recovery.

Provide your **best estimate** of the beginning date: \_\_\_\_\_ (mm/dd/yyyy) and end date \_\_\_\_\_ (mm/dd/yyyy) for the period of incapacity.

- (10) Due to the condition it, (☐ was / ☐ is / ☐ will be) medically necessary for the employee to be absent from work to provide care for the patient on an **intermittent basis** (periodically), including for any episodes of incapacity i.e., episodic flare-ups. Provide your **best estimate** of how often (frequency) and how long (duration) the episodes of incapacity will likely last.

Over the next 6 months, episodes of incapacity are estimated to occur \_\_\_\_\_ times per (☐ day / ☐ week / ☐ month) and are likely to last approximately \_\_\_\_\_ (☐ hours / ☐ days) per episode.

Signature of

Health Care Provider \_\_\_\_\_ Date \_\_\_\_\_ (mm/dd/yyyy)

**Definitions of a Serious Health Condition (See 29 C.F.R. §§ 825.113-.115)**

**Inpatient Care**

- An overnight stay in a hospital, hospice, or residential medical care facility.
- Inpatient care includes any period of incapacity or any subsequent treatment in connection with the overnight stay.

**Continuing Treatment by a Health Care Provider (any one or more of the following)**

**Incapacity Plus Treatment:** A period of incapacity of more than three consecutive, full calendar days, and any subsequent treatment or period of incapacity relating to the same condition, that also involves either:

- Two or more in-person visits to a health care provider for treatment within 30 days of the first day of incapacity unless extenuating circumstances exist. The first visit must be within seven days of the first day of incapacity; or,
- At least one in-person visit to a health care provider for treatment within seven days of the first day of incapacity, which results in a regimen of continuing treatment under the supervision of the health care provider. For example, the health provider might prescribe a course of prescription medication or therapy requiring special equipment.

**Pregnancy:** Any period of incapacity due to pregnancy or for prenatal care.

**Chronic Conditions:** Any period of incapacity due to or treatment for a chronic serious health condition, such as diabetes, asthma, migraine headaches. A chronic serious health condition is one which requires visits to a health care provider (or nurse supervised by the provider) at least twice a year and recurs over an extended period of time. A chronic condition may cause episodic rather than a continuing period of incapacity.

**Permanent or Long-term Conditions:** A period of incapacity which is permanent or long-term due to a condition for which treatment may not be effective, but which requires the continuing supervision of a health care provider, such as Alzheimer's disease or the terminal stages of cancer.

**Conditions Requiring Multiple Treatments:** Restorative surgery after an accident or other injury; or, a condition that would likely result in a period of incapacity of more than three consecutive, full calendar days if the patient did not receive the treatment.

**PAPERWORK REDUCTION ACT NOTICE AND PUBLIC BURDEN STATEMENT**

If submitted, it is mandatory for employers to retain a copy of this disclosure in their records for three years. 29 U.S.C. § 2616; 29 C.F.R. § 825.500. Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. The Department of Labor estimates that it will take an average of 15 minutes for respondents to complete this collection of information, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding this burden estimate or any other aspect of this collection information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S-3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

**DO NOT SEND COMPLETED FORM TO THE DEPARTMENT OF LABOR. RETURN TO THE PATIENT.**

**Certification of Health Care Provider for  
Employee's Serious Health Condition  
under the Family and Medical Leave Act**

**U.S. Department of Labor  
Wage and Hour Division**



**DO NOT SEND COMPLETED FORM TO THE DEPARTMENT OF LABOR.  
RETURN TO THE PATIENT.**

OMB Control Number: 1235-0003  
Expires: 6/30/2023

The Family and Medical Leave Act (FMLA) provides that an employer may require an employee seeking FMLA protections because of a need for leave due to a serious health condition to submit a medical certification issued by the employee's health care provider. 29 U.S.C. §§ 2613, 2614(c)(3); 29 C.F.R. § 825.305. The employer must give the employee **at least 15 calendar days** to provide the certification. If the employee fails to provide complete and sufficient medical certification, his or her FMLA leave request may be denied. 29 C.F.R. § 825.313. Information about the FMLA may be found on the WHD website at [www.dol.gov/agencies/whd/fmla](http://www.dol.gov/agencies/whd/fmla).

**SECTION I – EMPLOYER**

Either the employee or the employer may complete Section I. While use of this form is optional, this form asks the health care provider for the information necessary for a complete and sufficient medical certification, which is set out at 29 C.F.R. § 825.306. **You may not ask the employee to provide more information than allowed under the FMLA regulations, 29 C.F.R. §§ 825.306-825.308.** Additionally, you **may not** request a certification for FMLA leave to bond with a healthy newborn child or a child placed for adoption or foster care.

Employers must generally maintain records and documents relating to medical information, medical certifications, recertifications, or medical histories of employees created for FMLA purposes as confidential medical records in separate files/records from the usual personnel files and in accordance with 29 C.F.R. § 1630.14(c)(1), if the Americans with Disabilities Act applies, and in accordance with 29 C.F.R. § 1635.9, if the Genetic Information Nondiscrimination Act applies.

- (1) Employee name: \_\_\_\_\_  
First Middle Last
- (2) Employer name: \_\_\_\_\_ Date: \_\_\_\_\_ (mm/dd/yyyy)  
(List date certification requested)
- (3) The medical certification must be returned by \_\_\_\_\_ (mm/dd/yyyy)  
(Must allow at least 15 calendar days from the date requested, unless it is not feasible despite the employee's diligent, good faith efforts.)
- (4) Employee's job title: \_\_\_\_\_ Job description (☐ is / ☐ is not) attached.  
Employee's regular work schedule: \_\_\_\_\_  
Statement of the employee's essential job functions: \_\_\_\_\_

*(The essential functions of the employee's position are determined with reference to the position the employee held at the time the employee notified the employer of the need for leave or the leave started, whichever is earlier.)*

**SECTION II - HEALTH CARE PROVIDER**

Please provide your contact information, complete all relevant parts of this Section, and sign the form. Your patient has requested leave under the FMLA. The FMLA allows an employer to require that the employee submit a timely, complete, and sufficient medical certification to support a request for FMLA leave due to the serious health condition of the employee. For FMLA purposes, a "serious health condition" means an illness, injury, impairment, or physical or mental condition that involves *inpatient care* or *continuing treatment by a health care provider*. For more information about the definitions of a serious health condition under the FMLA, see the chart on page 4.

You may, but are **not required** to, provide other appropriate medical facts including symptoms, diagnosis, or any regimen of continuing treatment such as the use of specialized equipment. Please note that some state or local laws may not allow disclosure of private medical information about the patient's serious health condition, such as providing the diagnosis and/or course of treatment.

Employee Name: \_\_\_\_\_

Section 8, II)

Health Care Provider's name: (Print) \_\_\_\_\_

Health Care Provider's business address: \_\_\_\_\_

Type of practice / Medical specialty: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

### **PART A: Medical Information**

Limit your response to the medical condition(s) for which the employee is seeking FMLA leave. Your answers should be your **best estimate** based upon your medical knowledge, experience, and examination of the patient. **After completing Part A, complete Part B to provide information about the amount of leave needed.** Note: For FMLA purposes, "incapacity" means the inability to work, attend school, or perform regular daily activities due to the condition, treatment of the condition, or recovery from the condition. Do not provide information about genetic tests, as defined in 29 C.F.R. § 1635.3(f), genetic services, as defined in 29 C.F.R. § 1635.3(e), or the manifestation of disease or disorder in the employee's family members, 29 C.F.R. § 1635.3(b).

(1) State the approximate date the condition started or will start: \_\_\_\_\_ (mm/dd/yyyy)

(2) Provide your **best estimate** of how long the condition lasted or will last: \_\_\_\_\_

(3) Check the box(es) for the questions below, as applicable. For all box(es) checked, the amount of leave needed must be provided in Part B.

☐ **Inpatient Care:** The patient (☐ has been / ☐ is expected to be) admitted for an overnight stay in a hospital, hospice, or residential medical care facility on the following date(s): \_\_\_\_\_

☐ **Incapacity plus Treatment:** (e.g. outpatient surgery, strep throat)

Due to the condition, the patient (☐ has been / ☐ is expected to be) incapacitated for *more than* three consecutive, full calendar days from \_\_\_\_\_ (mm/dd/yyyy) to \_\_\_\_\_ (mm/dd/yyyy).

The patient (☐ was / ☐ will be) seen on the following date(s): \_\_\_\_\_

The condition (☐ has / ☐ has not) also resulted in a course of continuing treatment under the supervision of a health care provider (e.g. prescription medication (other than over-the-counter) or therapy requiring special equipment)

☐ **Pregnancy:** The condition is pregnancy. List the expected delivery date: \_\_\_\_\_ (mm/dd/yyyy).

☐ **Chronic Conditions:** (e.g. asthma, migraine headaches) Due to the condition, it is medically necessary for the patient to have treatment visits at least twice per year.

☐ **Permanent or Long Term Conditions:** (e.g. Alzheimer's, terminal stages of cancer) Due to the condition, incapacity is permanent or long term and requires the continuing supervision of a health care provider (even if active treatment is not being provided).

☐ **Conditions requiring Multiple Treatments:** (e.g. chemotherapy treatments, restorative surgery) Due to the condition, it is medically necessary for the patient to receive multiple treatments.

☐ **None of the above:** If none of the above condition(s) were checked, (i.e., inpatient care, pregnancy) no additional information is needed. Go to page 4 to sign and date the form.

- (4) If needed, briefly describe other appropriate medical facts related to the condition(s) for which the employee seeks FMLA leave. (e.g., use of nebulizer, dialysis) \_\_\_\_\_

**PART B: Amount of Leave Needed**

For the medical condition(s) checked in Part A, complete all that apply. Several questions seek a response as to the frequency or duration of a condition, treatment, etc. Your answer should be your **best estimate** based upon your medical knowledge, experience, and examination of the patient. Be as specific as you can; terms such as “lifetime,” “unknown,” or “indeterminate” may not be sufficient to determine FMLA coverage.

- (5) Due to the condition, the patient (☐ had / ☐ will have) **planned medical treatment(s)** (scheduled medical visits) (e.g. psychotherapy, prenatal appointments) on the following date(s): \_\_\_\_\_

- (6) Due to the condition, the patient (☐ was / ☐ will be) **referred to other health care provider(s)** for evaluation or treatment(s).

State the nature of such treatments: (e.g. cardiologist, physical therapy) \_\_\_\_\_

Provide your **best estimate** of the beginning date \_\_\_\_\_ (mm/dd/yyyy) and end date \_\_\_\_\_ (mm/dd/yyyy) for the treatment(s).

Provide your **best estimate** of the duration of the treatment(s), including any period(s) of recovery (e.g. 3 days/week)

- (7) Due to the condition, it is medically necessary for the employee to work a **reduced schedule**.

Provide your **best estimate** of the reduced schedule the employee is able to work. From \_\_\_\_\_ (mm/dd/yyyy) to \_\_\_\_\_ (mm/dd/yyyy) the employee is able to work: (e.g., 5 hours/day, up to 25 hours a week)

- (8) Due to the condition, the patient (☐ was / ☐ will be) **incapacitated for a continuous period of time**, including any time for treatment(s) and/or recovery.

Provide your **best estimate** of the beginning date \_\_\_\_\_ (mm/dd/yyyy) and end date \_\_\_\_\_ (mm/dd/yyyy) for the period of incapacity.

- (9) Due to the condition, it (☐ was / ☐ is / ☐ will be) medically necessary for the employee to be absent from work on an **intermittent basis** (periodically), including for any episodes of incapacity i.e., episodic flare-ups. Provide your **best estimate** of how often (frequency) and how long (duration) the episodes of incapacity will likely last.

Over the next 6 months, episodes of incapacity are estimated to occur \_\_\_\_\_ times per (☐ day / ☐ week / ☐ month) and are likely to last approximately \_\_\_\_\_ (☐ hours / ☐ days) per episode.

Employee Name: \_\_\_\_\_

Section 8, II)

### **PART C: Essential Job Functions**

If provided, the information in Section I question #4 may be used to answer this question. If the employer fails to provide a statement of the employee's essential functions or a job description, answer these questions based upon the employee's own description of the essential job functions. An employee who must be absent from work to receive medical treatment(s), such as scheduled medical visits, for a serious health condition is considered to be *not able* to perform the essential job functions of the position during the absence for treatment(s).

- (10) Due to the condition, the employee (☐ was not able / ☐ is not able / ☐ will not be able) to perform *one or more* of the essential job function(s). Identify at least one essential job function the employee is not able to perform:

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Signature of

Health Care Provider \_\_\_\_\_ Date \_\_\_\_\_ (mm/dd/yyyy)

#### **Definitions of a Serious Health Condition (See 29 C.F.R. §§ 825.113-.115)**

##### **Inpatient Care**

- An overnight stay in a hospital, hospice, or residential medical care facility.
- Inpatient care includes any period of incapacity or any subsequent treatment in connection with the overnight stay.

##### **Continuing Treatment by a Health Care Provider (any one or more of the following)**

**Incapacity Plus Treatment:** A period of incapacity of more than three consecutive, full calendar days, and any subsequent treatment or period of incapacity relating to the same condition, that also involves either:

- Two or more in-person visits to a health care provider for treatment within 30 days of the first day of incapacity unless extenuating circumstances exist. The first visit must be within seven days of the first day of incapacity; or,
- At least one in-person visit to a health care provider for treatment within seven days of the first day of incapacity, which results in a regimen of continuing treatment under the supervision of the health care provider. For example, the health provider might prescribe a course of prescription medication or therapy requiring special equipment.

**Pregnancy:** Any period of incapacity due to pregnancy or for prenatal care.

**Chronic Conditions:** Any period of incapacity due to or treatment for a chronic serious health condition, such as diabetes, asthma, migraine headaches. A chronic serious health condition is one which requires visits to a health care provider (or nurse supervised by the provider) at least twice a year and recurs over an extended period of time. A chronic condition may cause episodic rather than a continuing period of incapacity.

**Permanent or Long-term Conditions:** A period of incapacity which is permanent or long-term due to a condition for which treatment may not be effective, but which requires the continuing supervision of a health care provider, such as Alzheimer's disease or the terminal stages of cancer.

**Conditions Requiring Multiple Treatments:** Restorative surgery after an accident or other injury; or, a condition that would likely result in a period of incapacity of more than three consecutive, full calendar days if the patient did not receive the treatment.

#### **PAPERWORK REDUCTION ACT NOTICE AND PUBLIC BURDEN STATEMENT**

If submitted, it is mandatory for employers to retain a copy of this disclosure in their records for three years. 29 U.S.C. § 2616; 29 C.F.R. § 825.500. Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. The Department of Labor estimates that it will take an average of 15 minutes for respondents to complete this collection of information, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding this burden estimate or any other aspect of this collection information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S-3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

**DO NOT SEND COMPLETED FORM TO THE DEPARTMENT OF LABOR. RETURN TO THE PATIENT.**



## CITY OF GLUCKSTADT

MISSISSIPPI

PLANNING AND ZONING ADMINISTRATOR

### MEMORANDUM

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**TO:** Mayor & Board of Aldermen

**FROM:** Caine Dearman, Planning and Zoning Administrator

**DATE:** 1/13/2026

**SUBJECT:** Planning and Zoning Administrator

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The Planning and Zoning Commission did meet on December 23, 2025, and the following items were considered. A sign variance for Mitchell Signs requesting a larger square footage of signage (30.19 SF) where the maximum allowed is 30 SF at 264 Calhoun Station Parkway. With all members present voting AYE, the board recommended approval of the variance. Next came Roman Mora requesting a conditional use permit for food truck at 547 Church Rd. With all members present the board all voted AYE to recommend approval of the conditional use permit. Our next meeting is January 27, 2026, at 6:00 in the City Hall Boardroom.

The Building Department issued 17 permits with total fees in the amount of \$42,776 for the month of December 2026. I have also attached a copy of the permit log for your information.

Process is ongoing with the development of architectural standards for the city. The Architectural Review Board will meet on 1/6/26 to further develop the architectural review standards.



**MINUTES OF THE REGULAR MEETING  
OF THE PLANNING AND ZONING COMMISSION  
OF THE CITY OF GLUCKSTADT, MISSISSIPPI**

A regular meeting of the Planning and Zoning Commission of the City of Gluckstadt, Mississippi (“the Board”), was duly called, held, and conducted on Tuesday, December 23, 2025, at 6:00 p.m. at Gluckstadt City Hall, 343 Distribution Drive, Gluckstadt, Madison County, Mississippi.

The following members were present, to-wit:

Melanie Greer  
Lauren Bishop  
Patrick Beasley  
Andrew Duggar  
Phillips King  
Kayce Saik

Absent:

Katrina B. Myricks

Also present:

Zachary L. Giddy, Attorney  
Mike McCollum and Chris Buckner, City of Gluckstadt

Chairman Melanie Greer called the meeting to order. Roll was called and it was announced that a majority of the voting members of the Board were present, and that said number constituted a quorum.

Vice Chairman Kayce Saik opened the meeting with prayer and Melanie Greer led the Pledge of Allegiance.

All members of the Board present acknowledged receipt of the agenda and the agenda was as follows:

- 1. Call to Order**
- 2. Opening Prayer and Pledge of Allegiance**
- 3. Request for Rezoning**

A) Roman Mora Conditional Use Public Hearing

**4. Request for Rezoning**

A) Sign Regulations Dimensional Variance Request for Mitchell Sign Bank of Commerce Calhoun Station Parkway

**5. New Business**

**6. Next Meeting**

**7. Adjourn**

**Public Hearing for Application for  
Conditional Use Permit for Roman Mora**

Chairman Melanie Greer opened the Public Hearing on the Petition and Application for Conditional Use Permit by Roman Mora for property located at 547 Church Road in the City of Gluckstadt and identified by Tax Parcel Number 082E-15-001/04.02. S & D Realty, LLC is the current owner of the subject property. The subject property is presently zoned C-2 Highway Commercial District. Mike McCollum confirmed notice was accomplished and advised the Board that physical posting and publication requirements were met establishing jurisdiction. Mr. McCollum advised the Board that the Applicant is seeking a condition use to allow a food truck on the subject property in the C-2 zoning district. The proposed food truck will be located in the rear parking lot occupying three (3) parking spaces and have a generator for power. Applicant was not present.

Opposition was given an opportunity to respond, but there was no opposition present and no additional support present.

Chairman Melanie Greer closed the Public Hearing and called for a vote on the Application. On motion by Commissioner Phillips King and seconded by Commissioner Katrina Myricks, the Board present voted unanimously to recommend to the Mayor and Board of Aldermen that they approve a conditional use for Applicant to allow a food truck on the subject property located in the C-2 zoning district with the condition that the food truck is only allowed to be located in the rear parking lot behind the building. The Chairman declared the motion carried.

**Application by Mitchell Signs, Inc. for  
Sign Variance for Bank of Commerce**

First came on for consideration an Application for Variance from the Sign Regulations by Mitchell Signs, Inc. Bank of Commerce for property located at 264 Calhoun Station Parkway in

the City of Gluckstadt. Mike McCollum discussed the application. Patrick Jacobs with Bank of Commerce appeared and spoke in favor of the requested sign variance. Mr. Jacobs advised that the sign was originally measured incorrectly at 28 sq. ft. but is actually 20 sq. ft. The original sign was 41.24 sq. ft. but can only be 30 sq. ft. Petitioner is requesting the sign variance to allow the 30.19 sq. ft. sign.

After discussion, Chairman Melanie Greer called for a vote on the Application. On motion by Commissioner Phillips King and seconded by Commissioner Kayce Saik, the Board present voted unanimously to recommend to the Mayor and Board of Aldermen that they approve the requested variance for Applicant to allow the 30.19 sq. ft. Bank of Commerce sign on the subject property. The Chairman declared the motion carried.

### **NEW BUSINESS**

Mike McCollum advised the Board of the hiring of Cain Dearman as Zoning Director beginning in January.

Mr. McCollum advised that the next meeting of the Planning & Zoning Commission will be January 27, 2026.

### **OLD BUSINESS**

None.

There was no further business to be presented.

### **ADJOURN**

Commissioner Kayce Saik moved that the meeting be adjourned. The motion was seconded by Commissioner Phillips King and approved unanimously by all present Commissioners. The Chairman declared the Motion carried.

**WITNESS OUR HANDS**, this the \_\_\_\_\_ day of \_\_\_\_\_, 2025.

\_\_\_\_\_  
MELANIE GREER, Chairman

\_\_\_\_\_  
KAYCE SAIK, Vice Chairman/Secretary

Type	Street Number	Street Name	Applicant	Applicant Email	Contractor	Applied Date	Fees
New Building Commercial	1	KAYO DR	WEST OF FIFTY FIVE		JLS CONSTRUCTION	12/29/2025	4582
Addition Commercial	1054	GLUCKSTADT ROAD	BEDI INVESTMENTS		BEDI CONSTRUCTION	12/23/2025	112
Sign	166	ORCHARD LANE	MENDROP ENGINEERING RESOURCE	BMENDROP@MENDROP.NE		12/18/2025	90
Addition Commercial	102	LEXINGTON DR	BAPTIST GLUCKSTADT PRIMARY CAR		SHANE ORMAN	12/15/2025	5837
New Building Commercial	133	THOMAS JOHNSON RD	STORAGE CITY		SHANE ORMAN	12/12/2025	21844
Accessory Commercial	140	GLUCKSTADT WAY	MUNCHIES N MORE			12/11/2025	50
New Building Commercial	1	KAYO DR	JAM ATHLETICS		JLS CONSTRUCTION	12/9/2025	7827
Addition Commercial	160	WEISENBERGER RD	LA FLOR		BRUFF CONSTRUCTION, LLC	12/9/2025	123
Addition Residential	131	SUNRISE COVE	BRANDI DAUSMAN		ESTHERHOUSE CONSTRUCTION	12/5/2025	1752
Accessory Commercial	140	GLUCKSTADT WAY	GRUB 2 GO KITCHEN LLC			12/5/2025	50
Sign	264	CALHOUN STATION PKWY	HOTWORX			12/5/2025	40
Accessory Commercial	140	GLUCKSTADT WAY	COURTNEY HANNON			12/4/2025	50
Accessory Commercial	140	GLUCKSTADT WAY	VIDAL KITCHEN			12/3/2025	50
Accessory Residential	183	CHURCH ROAD	WILLIAM OVERSTREET		J-MISSISSIPPI METAL CARPORTS	12/2/2025	189
Sign	111	DEES DRIVE	REST RECOVERY WELLNESS MADISON		A PLUS SIGNS AND CREATIVE INC	12/1/2025	90
Sign	160	WEISENBERGER RD	ELITE CLEANERS GLUCKSTADT, LLC	SARAH DANTONE9@GMAIL.		12/1/2025	40
Accessory Commercial	140	GLUCKSTADT WAY	BEACH BABE BEIGNETS			12/1/2025	50
Addition Commercial	1716	HWY 51 STE. C.	TEX MEX SMOKEHOUSE BBQ	KZAPATA20149@GMAIL.CO	CEDAR RIDGE CONSTRUCTION, LLC	11/24/2025	442
Sign	1029	GLUCKSTADT ROAD	TAKE 5 OIL CHANGE		RAINBOW SIGNS	11/24/2025	150
Accessory Commercial	409	CALHOUN STATION PKWY	CHILL WAY KITCHEN			11/21/2025	50
Accessory Commercial	409	CALHOUN STATION PKWY	GOOD GUYS MOBILE KITCHEN			11/21/2025	50
Accessory Commercial	409	CALHOUN STATION PKWY	LUCY'S LEMONADE			11/21/2025	50
Accessory Commercial	409	CALHOUN STATION PKWY	SOUL FOODIN GOOD LLC			11/21/2025	50
Accessory Commercial	409	CALHOUN STATION PKWY	BROTHERS ALMANZA			11/21/2025	50
Accessory Commercial	300	YANDELL RD	BROTHERS ALMANZA			11/21/2025	50
Accessory Commercial	300	YANDELL RD	FROSTY FREEZE, THE			11/21/2025	50
Sign	300	YANDELL RD	MADISON CROSSING ELEM SCHOOL			11/20/2025	10
Accessory Commercial	409	CALHOUN STATION PKWY	COURTNEY HANNON			11/20/2025	50
New Building Commercial	210	N INDUSTRIAL DR	WESTLAKE CHEMCIAL		SMITH HOME & CONSTRUCTION	11/19/2025	1212
New Building Commercial		CALHOUN STATION PKWY	CITIZENS NATIONAL BANK		KEELEY CONSTRUCTION GROUP INC	11/19/2025	9603

Sign	396	BUSINESS PARK DR.	FLOORING EXPERTS AND SUPPLY	ECPMEDICAL@YAHOO.COM		11/19/2025	10
Accessory Commercial	300	YANDELL RD	BEACH BABE BEIGNETS			11/18/2025	50
Addition Commercial	158	AMERICAN WAY	ARC INDUSTRIAL FUND I LLC		LAWS CONSTRUCTION LLC	11/18/2025	1337
Accessory Commercial	409	CALHOUN STATION PKWY	KONA ICE OF THE SOUTH			11/17/2025	50
Sign	1716	HWY 51 STE. C.	TEX MEX SMOKEHOUSE BBQ	KZAPATA20149@GMAIL.CO	ASH SIGNS dba BUDGET SIGNS	11/13/2025	90
Gas Commercial	1091	GLUCKSTADT ROAD	A T & T		B. T. PLUMBING	11/12/2025	85
CONDITIONAL USE	729	GLUCKSTADT ROAD	MT. PLEASANT CHURCH			11/12/2025	250
Accessory Commercial	208	WEISENENBERGER RD	ALL EVENTS			11/12/2025	50
Addition Commercial	111	DEES DRIVE	REST RECOVERY WELLNESS MADISON		EOZ Build and Design, LLC	11/10/2025	398
CONDITIONAL USE	547	CHURCH ROAD	ROMAN MORA			11/10/2025	250
Electical Commercial	208	WEISENENBERGER RD	ALL EVENTS		TWINER SERVICES, LLC	11/7/2025	85
Sign	264	CALHOUN STATION PKWY	LITTLE CAESARS			11/7/2025	20
Sign	2173	HWY 51	BIG RIVER RENTALS			11/5/2025	40
Gas Residential	183	BRADFIELD RD	SHALONDA NEAL		YOUNG BROTHERS PLUMBING	11/3/2025	85
Mechanical Commercial	1198	GLUCKSTADT RD	WARREN AND COMPANY		WARREN AND COMPANY	11/3/2025	112
Sign		547 CHURCH RD	MAGNOLIA COMMONS		RAINBOW SIGNS	10/31/2025	90
Sign	264	CALHOUN STATION PKWY	HOTWORX		RAINBOW SIGNS	10/31/2025	90
Re-Roof	200	BRADFIELD RD	LASHONE REDMOND		STRENGTH ROOFING & SIDING	10/30/2025	46
Sign	311	CALHOUN STATION PKWY	HOTSPOT MARKET	WILLIAMSKANKISTA@YAHOO		10/23/2025	10
Site Plan Review		CHURCH RD	CEDARSTONE CONSTRUCTION			10/23/2025	100
Accessory Residential	123	MUNICH DR	JOHN C NEWTON			10/21/2025	595
Sign	264	CALHOUN STATION PKWY	LITTLE CAESARS			10/15/2025	30
Sign	264	CALHOUN STATION PKWY	BANK OF COMMERCE		MITCHELL SIGNS	10/15/2025	90
Addition Commercial	264	CALHOUN STATION PKWY	BANK OF COMMERCE		TYE GARNER	10/15/2025	847
Electrical Residential	184	OLD JACKSON RD	DELORES SMOTHERS		MARCUS WARNER	10/9/2025	85
CONDITIONAL USE	135	W SOWELL RD	S & K HOLDINGS/CAPCHLOR			10/7/2025	250
Site Plan Review	135	W SOWELL RD	S & K HOLDINGS/CAPCHLOR			10/7/2025	100
Sign	1265	GLUCKSTADT ROAD	HOMEWELL CARE SERVICES	CRAMSEY@HOMEWELLCAP		10/7/2025	40
Site Plan Review	1	ENTERPRISE DR	BS PROPERTIES, LLC			10/1/2025	100
Site Plan Review	1	TITAN LANE	TTIAN LANE, LLC			10/1/2025	100
Sign	1021	GLUCKSTADT RD	TINDLE FAMILY DENTISTRY	TINDLEFAMILYDENTISTRY@		9/30/2025	10
Site Plan Review	247	INDUSTRIAL DRIVE N.	HEDERMAN BROTHERS		VENTURE SOUTH CONSTRUCTION	9/23/2025	100
Site Plan Review		547 CHURCH RD	MAGNOLIA COMMONS			9/17/2025	100



Sign		547 CHURCH RD	MAGNOLIA COMMONS			9/16/2025	10
Addition Commercial	210	INDUSTRIAL DRIVE N	WESTLAKE CHEMCIAL		SMITH HOME & CONSTRUCTION	9/15/2025	4667
Accessory Commercial	137	YANDELL RD	BROTHERS ALMANZA			9/15/2025	1000
Re-Roof	110	SADDLE COVE	CHRIS BROSSETTE		U DREAM RENOVATIONS	9/15/2025	112
Electical Commercial	110	LEXINGTON DR	CMS HUINTING BREAK		D.M. ELECTRIC, INC	9/11/2025	85
Addition Commercial	135	INDUSTRIAL DR	D B SCHENKER		MCI CONSTRUCTION	9/11/2025	3027
Re-Roof	106	SADDLE COVE	BARRY DICKINSON		WATKINS CONSTRUCTION	9/10/2025	189
Accessory Residential	120	BRACEY RD	PATRICIA BENFIELD		STAR BUILDING & CARPORTS	9/10/2025	112
Sign	1198	GLUCKSTADT RD	1788 CHICKEN LLC dba Zaxby's		LANG SIGNS	9/4/2025	460
Accessory Commercial	1054	GLUCKSTADT ROAD	PICKLES SNOBALLS			9/3/2025	1000
Addition Commercial	211	INDUSTRIAL DRIVE N.	BARNHART CRANE & RIGGING, LLC	MKILLEBREW@BARNHARTC	HASKELL COMPANY, THE	9/3/2025	1532
CONDITIONAL USE	111	DEES DRIVE	REST RECOVERY WELLNESS MADISON			9/2/2025	250
Sign	1054	GLUCKSTADT ROAD	BASKIN ROBBINS		ASH SIGNS dba BUDGET SIGNS	9/2/2025	90
Site Plan Review	210	N INDUSTRIAL DR	WESTLAKE CHEMCIAL		SMITH HOME & CONSTRUCTION	8/29/2025	100
Sign	112	DEES DRIVE	THE RANGE OF MISSISSIPPI LLC	JPRIMOS@RANGEBYJP.COM		8/28/2025	10
Addition Residential	127	COLONY PLACE	DAIGRE LIPOMA			8/27/2025	233
Re-Roof	129	RIDGEFIELD DR	KEITH TATUM		J E STEVENS CONSTRUCTION GROU	8/23/2025	222
Site Plan Review	1	KAYO DR	SAHLER BROTHERS, LLC		JLS CONSTRUCTION	8/22/2025	100
New Building Commercial	342	OLD JACKSON RD	GLUCKSTADT OFFICE PARK, LLC		MURRAY BUILDERS, LLC	8/21/2025	1665
Pool	106	COLONY PLACE	ROCHELLE OWENS		DYNAMIC POOLS & SPA	8/20/2025	856
Generator	144	JORN CIR	RICHARD AGOSTINELLI		ENVIRONMENT MASTERS	8/19/2025	178
Addition Commercial	264	CALHOUN STATION PKWY	HOTWORX		ROB THORNTON	8/15/2025	1612
Accessory Residential	208	DEERWOOD CROSSING	MARC HEARST			8/15/2025	156
Electical Commercial	2161	HIGHWAY 51	FERROUS PROCESSING & TRADING		ROBERTSON CONSTRUCTION	8/7/2025	85
CONDITIONAL USE	346	CHURCH RD	TRAN QUYNH			8/4/2025	250
Site Plan Review	381	DISTRIBUTION DRIVE	PUCKETT MACHINERY COMPANY			8/4/2025	100
Accessory Residential	148	OLD ORCHARD RD	JEFF & JENNIFER KNIGHT			7/24/2025	35
New Building Commercial	1198	GLUCKSTADT RD	1788 CHICKEN LLC dba Zaxby's		DIMENSION CONSTRUCTION, INC	7/18/2025	8985
Sign	264	CALHOUN STATION PKWY	LITTLE CAESARS			7/17/2025	90
Accessory Residential	165	CHURCH ROAD	WILLIAM LOWTHER			7/15/2025	288
Accessory Residential	130	RIDGEFIELD DR	TED CRAWLEY			7/15/2025	68
Addition Commercial	1265	GLUCKSTADT RD	HOMEWELL CARE SERVICES		SOUTHERN HERITAGE	7/9/2025	5837
Sign	1021	GLUCKSTADT RD	TINDLE FAMILY DENTISTRY	TINDLEFAMILYDENTISTRY@		7/8/2025	10

Sign	1021	GLUCKSTADT RD	TINDLE FAMILY DENTISTRY	TINDLEFAMILYDENTISTRY@		7/8/2025	10
Sign	311	CALHOUN STATION PKWY	HOTSPOT MARKET	WILLIAMSKANKISTA@YAH		7/7/2025	10
Sign	101	LEXINGTON DRIVE	TRUSTCARE			7/7/2025	40
Re-Roof	139	BRADSHAW CROSSING	SETH WINCHESTER		HALO ROOFING & RESTORATION	7/7/2025	435
Site Plan Review	418	BUSINESS PARK DR	WELLSPRING METHODIST CHURCH			7/7/2025	100
Construction Trailers	319	DISTRIBUTION DRIVE	VIDAL KITCHEN			7/2/2025	50
CONDITIONAL USE		547 CHURCH RD	B & B COSMETICS MS, LLC			7/2/2025	250
CONDITIONAL USE	102	LONE WOLF DR	TODD CARTER			7/2/2025	250
Site Plan Review	102	LONE WOLF DR	TODD CARTER			7/2/2025	100
Sign	1085	GLUCKSTADT ROAD	601 STUDIOS			7/1/2025	10
Electical Commercial	211	INDUSTRIAL DR	BARNHART CONSTRUCTION			7/1/2025	85
Sign	326	DISTRIBUTION DRIVE	CASEY CAN HOME SERVICES			6/24/2025	60
Sign	264	CALHOUN STATION PKWY	BLUME		A PLUS SIGNS AND CREATIVE INC	6/23/2025	90
Sign	1085	GLUCKSTADT ROAD	601 STUDIOS		A PLUS SIGNS AND CREATIVE INC	6/23/2025	60
Sign	311	CALHOUN STATION PKWY	HOTSPOT MARKET	WILLIAMSKANKISTA@YAH		6/23/2025	10
Plumbing Commercial	124	ENTERPRISE DRIVE	THE MANE ATTRACTION	LASHAYGREENWOOD@GM		6/19/2025	101
Addition Commercial	439	CALHOUN STATION PKWY	MADISON COUNTY SCHOOL DISTRICT		MID STATE CONSTRUCTION, INC	6/18/2025	0
Re-Roof	117	MARSHAS WAY	JOSH GADDIS			6/17/2025	112
Sign	264	CALHOUN STATION PKWY	BODY & SOUL PILATES			6/16/2025	10
Re-Roof	1240	GLUCKSTADT ROAD	CARDINAL HEALTH	JNANA.LEWIS@CARDINALH	NATIONS ROOF SOUTH, LLC	6/12/2025	310
Electical Commercial	429	BUSINESS PARK DR	JOHN WOOD			6/11/2025	85
Addition Commercial	102	DEES DR.	JESSIE CAMPBELL		JLS CONSTRUCTION	6/11/2025	631
New Building Residential		139 LAKESHIRE CIR	MARY & LAWRENCE JONES		RED LASER TECHNOLOGY INC	6/6/2025	2887
Sign	124	ENTERPRISE DR	THE MANE ATTRACTION	LASHAYGREENWOOD@GM	PIP MARKETING SIGNS & PRINT	6/5/2025	60
Addition Commercial	311	CALHOUN STATION PKWY	SHIVAM DHUNNA			6/3/2025	343
Addition Commercial	119	ENTERPRISE DR	BRANDON BROWN		R. L. BROWN CONSTRUCTION, LLC	6/3/2025	145
Addition Residential	168	MINNINGER BLVD	KERRY MINNINGER			6/2/2025	189
VARIANCE	1743	HIGHWAY 51	SUN OIL, LLC			5/30/2025	250
Sign	264	CALHOUN STATION PKWY	SOLES NAILS BAR & BROW			5/20/2025	10
Sign	203	CALHOUN STATION PKWY	KIDSTRONG		PRO SIGNS, LLC	5/16/2025	100
New Building Commercial		GLUCKSTADT RD	TAKE 5 OIL CHANGE		ALLIANT CONSTRUCTION	5/14/2025	6954
Addition Residential	176	CATLETT RD	PENNY COULON		SOUTHERN EAGLE CONSTRUCTION	5/13/2025	721
Sign	103	TRUSTMARK DR	TRUSTMARK NATIONAL BANK	BCOLLIER@TRUSTMARK.CO		5/12/2025	20

New Building Residential	208	DEERWOOD CROSSING	MARC HEARST		VERNON HEARST	5/9/2025	1152
New Building Residential	208	DEERWOOD CROSSING	MARC HEARST		VERNON HEARST	5/9/2025	4332
Sign	264	CALHOUN STATION PKWY	BODY & SOUL PILATES		A PLUS SIGNS AND CREATIVE INC	5/7/2025	90
New Building Commercial	654	CALHOUN STATION PKWY	CPOR REI, LLC	JRPHILLI7669@GMAIL.COM	MILLS CONTRACTING LLC	5/7/2025	13302
Addition Commercial	311	CALHOUN STATION PKWY	SHIVAM DHUNNA		SOUTHERN EAGLE CONSTRUCTION	5/6/2025	5359
Sign	203	CALHOUN STATION PKWY	POKE STOP, LLC		A PLUS SIGNS AND CREATIVE INC	5/5/2025	90
Addition Residential	100	FIRST CHOICE DR	Rachel Sargent	rachel.sargent@tylertech.co		5/2/2025	0
Sign	140	ENTERPRISE DR	EAGLES MANAGEMENT AND ASSOCIA	EAGLESMANAGEMENTAND/		5/2/2025	60
Generator	167	LAKESHIE CIRCLE	JW & ANGEL STOWERS		MISSISSIPPI ENERGY SERVICES	5/1/2025	178
Re-Roof	104	FAIRCHILD COVE	CHRIS BOOKER			4/29/2025	321
Sign	115	AULENBROCK DR., 200	WSP USA INC.	NONIE.MCKNIGHT@WSP.C		4/29/2025	120
Site Plan Review	336	OLD JACKSON RD	GLUCKSTADT OFFICE PARK, LLC			4/29/2025	100
Sign	264	CALHOUN STATION PKWY	BODY & SOUL PILATES	BODYSOULPILATESMS@GM		4/28/2025	10
Addition Commercial	342	OLD JACKSON RD	Tyler Goosby		JOE PENTON	4/24/2025	623
Addition Commercial	342	OLD JACKSON RD	Tyler Goosby		JOE PENTON	4/24/2025	178
Re-Roof	329		LAURA PRICE		PRO-SHIELD ROOFING AND CONST.	4/24/2025	134
Addition Commercial	109	ENTERPRISE DRIVE	OPEN AND SHUT HARDWARE			4/23/2025	757
Sign	2173	HWY 51	DEVINEY EQUIPMENT			4/23/2025	10
Sign	113	DEES DRIVE, STE. A.	MISSISSIPPI LIFT RESOURCE & RE			4/23/2025	60
Gas Commercial	195	INDUSTRIAL BLVD	SANHUA INTERNATIONAL, INC.	GREG.SIMPSON@SANHUA	BUFORD PLUMBING CO. INC	4/22/2025	50
Re-Roof	105		WILLIAM BOBBS		TURNKEY RESTORATION	4/21/2025	376
Re-Roof	208	STONE CREEK DR	JASON RICHARDS			4/16/2025	365
Sign	1048	GLUCKSTADT ROAD	STORAGE DEPOT			4/15/2025	10
Sign	109	HAZELTON COVE	BEST ATHLETICS	INFO@BESTATHLETICS.US		4/14/2025	40
Sign	311	CALHOUN STATION PKWY	HOTSPOT MARKET	WILLIAMSKANKISTA@YAH		4/14/2025	10
Accessory Commercial	346	CHURCH RD	COCK OF THE WALK			4/14/2025	50
Addition Commercial	109	DEES DRIVE	GLUCKSTADT FITNESS		BLACK FORREST, LLC	4/10/2025	559
Pool	148		GRANT MONTGOMERY			4/9/2025	227
Generator	1240	GLUCKSTADT ROAD	CARDINAL HEALTH			4/8/2025	1782
Sign	102	LEXINGTON DRIVE	STA-HOME HEALTH AGENCY OF JACK	DSCHWARTZ@ACCENTCAR		4/8/2025	60
Sign	412	BUSINESS PARK DR	SIP OUTDOORS	SIPOUTDOORS24@GMAIL.C		4/7/2025	10
Sign	1019	GLUCKSTADT ROAD	DEAR-LEA SOCIAL			4/7/2025	90
Sign	346	CHURCH RD	VANITY SALON		A PLUS SIGNS AND CREATIVE INC	4/7/2025	90



Sign	167	ORCHARD LANE	HEADWATERS		A PLUS SIGNS AND CREATIVE INC	4/2/2025	90
REZONING		STOUT RD	THIRD FLOOR INVESTMENTS, LLC			4/2/2025	250
Gas Commercial	203	CALHOUN STATION PKWY	LOCAL NAIL SALON		CERTIFIED CONSTRUCTION	4/1/2025	85
Site Plan Review	1265	GLUCKSTADT RD	GLUCKSTADT MANAGEMENT, LLC			4/1/2025	100
Addition Residential	153	BEAR CREEK CIR	LAKEYSHA FLEMING			4/1/2025	101
Sign	113	DEES DR	BOB'S POOL SERVICE			3/27/2025	10
Sign	115	AULENBROCK DR	BEAU & BELLE DOG GROOMING LLC		IT'S VINYL Y'ALL	3/26/2025	60
VARIANCE	1198	GLUCKSTADT RD	1788 CHICKEN LLC dba Zaxby's			3/26/2025	250
Re-Roof	102	FAIRCHILD COVE	MARY ROPELEWSKI		COPPER MASTERS ROOFING, LLC	3/25/2025	431
New Building Commercial	586	CHURCH RD	BEAR CREEK WATER ASSOCIATION		MID STATE CONSTRUCTION, INC	3/24/2025	18489
Sign	134	WEISENBERGER ROAD	BAYOU BUGS		JONES SIGN COMPANY	3/21/2025	90
VARIANCE	330	OLD JACKSON RD	CHRISTY, JOHN & ANGELA STANLEY			3/21/2025	250
VARIANCE	330	OLD JACKSON RD	CHRISTY, JOHN & ANGELA STANLEY			3/21/2025	250
VARIANCE	336	OLD JACKSON RD	CHRISTY, JOHN & ANGELA STANLEY			3/21/2025	250
Addition Commercial	264	CALHOUN STATION PKWY	BODY & SOUL PILATES		TYE GARNER	3/18/2025	1082
Addition Commercial		547 CHURCH RD	MAGNOLIA COMMONS		BRUFF CONSTRUCTION, LLC	3/14/2025	2157
Addition Commercial	525	CHURCH ROAD	LOST PROPERTIES, LLC		PEOPLES CONSTRUCTION CORP	3/13/2025	6894
Sign	264	CALHOUN STATION PKWY	FLO AND GLO IV WELLNESS		A PLUS SIGNS AND CREATIVE INC	2/27/2025	90
Electical Commercial	120	LONE WOLF DRIVE	KEITH THURMOND		H & H ELCTRIC	2/26/2025	85
Sign	203	CALHOUN STATION PKWY	KIDSTRONG			2/25/2025	10
Sign	109	HAZELTON COVE	BEST ATHLETICS	INFO@BESTATHLETICS.US		2/25/2025	70
Sign	264	CALHOUN STATION PKWY	SOLES NAILS BAR & BROW		A PLUS SIGNS AND CREATIVE INC	2/21/2025	195
Addition Commercial	203	CALHOUN STATION PKWY	KIDSTRONG		CERTIFIED CONSTRUCTION	2/20/2025	2532
Addition Residential	127	BEAR CREEK CIRCLE	TEKA DAY			2/14/2025	112
Addition Residential	111	GERMANTOWN LANE	JEFFREY JAMISON			2/13/2025	178
Sign	102	HAZELTON COVE	FARRIS LAW GROUP	RON@FARRISLAWGROUP.N		2/11/2025	50
Sign	1265	GLUCKSTADT RD	GLUCKSTADT MANAGEMENT, LLC			2/10/2025	100
Site Plan Review	1198	GLUCKSTADT RD	1788 CHICKEN, LLC dba ZAXBY'S			2/5/2025	100
Sign	111	DEES DRIVE	GATHER AND GRUB		A PLUS SIGNS & CREATIVE	2/4/2025	60
Fence	182	CHURCH RD	HAZEL WHITING			1/31/2025	50
Addition Commercial	140	ENTERPRISE DR	CARLOS AGUILAR			1/31/2025	250
Site Plan Review		CALHOUN STATION PKWY	CITIZENS NATIONAL BANK			1/29/2025	100
New Building Residential	273	STOUT RD	CHRIS & VICTORI HEMPHILL			1/28/2025	2277

New Building Residential	279	STOUT RD	CHARLES & RENEE LINEBARGER			1/24/2025	2777
Addition Commercial	264	CALHOUN STATION PKWY	FLO AND GLO IV WELLNESS		JLS CONSTRUCTION	1/22/2025	1311
Hood Suppression	134	WEISENBERGER RD ST B	BAYOU BUGS			1/21/2025	288
Addition Commercial	102	DEES DR	SOUTHERN MAGNOLIA HEMP COMPA		MARK HUNT	1/21/2025	50
Sign	281	OLD JACKSON ROAD	UNITED RENTALS			1/21/2025	130
Sign	264	CALHOUN STATION PKWY	BLUME			1/17/2025	10
Re-Roof	131	FAIRCHILD COVE	ED WONG			1/16/2025	277
Gas Residential	109	BRADSHAW CROSSING	MARY SWEENEY			1/15/2025	85
Gas Commercial	644	CHURCH RD	ROBERT WILSON			1/15/2025	85
Addition Commercial	264	CALHOUN STATION PKWY	LITTLE CAESARS		JLS CONSTRUCTION	1/13/2025	577
New Building Commercial	1054	GLUCKSTADT ROAD	BEDI INVESTMENTS			1/13/2025	250
Site Plan Review	1	GLUCKSTADT RD	D & I INVESTMENT GROUP, LLC			1/7/2025	100
Gas Commercial	141	W SOWELL RD	BRANDON SERVICE COMPANY, INC.	JREED@BRANDONSERVICE		1/7/2025	85
New Building Commercial	120	AUTOBAHN LOOP	D & I INVESTMENT GROUP, LLC			1/3/2025	250
Site Plan Review	1054	GLUCKSTADT ROAD	BEDI INVESTMENTS			1/3/2025	100
New Building Commercial	1054	GLUCKSTADT ROAD	BEDI INVESTMENTS			1/3/2025	250
New Building Commercial	1054	GLUCKSTADT ROAD	BEDI INVESTMENTS			1/3/2025	250
Sign	346	CHURCH RD	EL RANCHITO III, LLC		A PLUS SIGNS AND CREATIVE INC	12/31/2024	90
Sign	412	BUSINESS PARK DR.	SIP OUTDOORS	SIPOUTDOORS24@GMAIL.C		12/30/2024	10
Accessory Residential	128	SAMUEL DR	ROGER SCOTT			12/26/2024	101
New Building Commercial	150	AUTOBAHN LOOP	MAC HAIK CANTON		PEOPLES CONSTRUCTION CORP	12/23/2024	12501
Sign	272	OLD JACKSON RD	FORVIA		A PLUS SIGNS & CREATIVE	12/20/2024	240
Accessory Commercial	110	ASHBY RIDGE DR	BROTHER'S TACOS	ISIS182@HOTMAIL.COM		12/20/2024	250
Addition Commercial	111	DEES DRIVE	GATHER AND GRUB			12/20/2024	50
Sign	111	DEES DRIVE	GATHER AND GRUB			12/20/2024	10
New Building Commercial	342	OLD JACKSON RD	MARTIN LAW FIRM, THE			12/19/2024	250
New Building Commercial	342	OLD JACKSON RD	MARTIN LAW FIRM, THE			12/19/2024	250
Electical Commercial	190	DEERWOOD CROSSING	NATHAN EVANS			12/19/2024	46
Addition Commercial	167	ORCHARD LANE	HEADWATERS			12/19/2024	2972
Addition Commercial	264	CALHOUN STATION PKWY	BLUME		JLS CONSTRUCTION	12/17/2024	442
Accessory Residential	101	JORN CIRCLE	BABU Vp			12/17/2024	35
Re-Roof	1645	HIGHWAY 51	JOE & LISA GILBERT			12/11/2024	321
Addition Commercial	203	CALHOUN STATION PKWY	TRACE CLEANERS, THE		CERTIFIED CONSTRUCTION	12/11/2024	757

Sign	203	CALHOUN STATION PKWY	TRACE CLEANERS, THE		A PLUS SIGNS AND CREATIVE INC	12/9/2024	90
Sign	525	CHURCH RD	HARTLEY EQUIPMENT COMPANY, INC	AMY@HARTLEYEQUIPMENT	RAINBOW SIGNS	12/9/2024	190
Sign	1021	GLUCKSTADT RD	TINDLE FAMILY DENTISTRY	TINDLEFAMILYDENTISTRY@		12/9/2024	10
Sign	124	KIMBALL DR	THE TOWN SQUARE PLAY CAFE	BRITTANYJONA@YAHOO.CO	A PLUS SIGNS AND CREATIVE INC	12/5/2024	10
Addition Commercial	264	CALHOUN STATION PKWY	SOLES NAILS BAR & BROW			11/20/2024	1382
Sign	203	CALHOUN STATION PKWY	BOLEWARE VASSAR ORTHODONTICS			11/14/2024	10
Sign	418	BUSINESS PARK DR	WELLSPRING METHODIST CHURCH			11/13/2024	60
Re-Roof	120	HUNTERS ROW	JULIET HUAM			11/12/2024	145
Electical Commercial	208	WEISENENBERGER RD	ALL EVENTS			11/12/2024	85
Sign	1265	GLUCKSTADT RD	HOMEWELL CARE SERVICES	CRAMSEY@HOMEWELLCAP		11/5/2024	60
New Building Commercial	381	DISTRIBUTION DRIVE	PUCKETT RENTS	AMANDA.MAY@PUCKETTMA		11/4/2024	250
New Building Commercial	1	CATLETT RD	RANDS LLC			10/31/2024	250
Re-Roof	128	JORN CIRCLE	KEVIN UKELE			10/23/2024	277
Gas Commercial	210	N INDUSTRIAL DR	WESTLAKE CHEMCIAL			10/22/2024	85
Addition Commercial	131	CATLETT RD	VERIZON WIRELESS			10/22/2024	676
Sign	124	KIMBALL DR	CHEROKEE BRICK AND TILE CO.	ASHLEY.WALKER@CHEROK		10/21/2024	60
Sign	203	CALHOUN STATION PKWY	BOLEWARE VASSAR ORTHODONTICS		A PLUS SIGNS AND CREATIVE INC	10/21/2024	90
Addition Commercial	122	YANDELL RD	EXTRA SPACE STORAGE		RAINBOW SIGNS	10/17/2024	57
Accessory Commercial	138	W. SOWELL ROAD	GLUCKSTADT INVESTMENTS			10/16/2024	332
Sign	103	TRUSTMARK DR	TRUSTMARK NATIONAL BANK	BCOLLIER@TRUSTMARK.CO		10/11/2024	10
Re-Roof	249	LAKESHIRE PKWY	TRISHA PERKINS			10/9/2024	112
Re-Roof	103	BEAR CREEK CT	CRAIG ESPLIN			10/7/2024	277
Addition Commercial	316	OLD JACKSON RD	SWEET & SAVI CAKES BY KRISTA		JLS CONSTRUCTION	10/4/2024	343
Sign	148	WEISENBERGER RD	LAVENDER CHIROPRACTIC & WELL	LAVCW24@GMAIL.COM	RAINBOW SIGNS	10/4/2024	60
Site Plan Review	150	AUTOBAHN LOOP	CANTON MAC HAIK CDJR LTD	DARREN@MACHAIK.NET		10/2/2024	100
Sign	1025	GLUCKSTADT RD	TINDLE FAMILY DENTISTRY	TINDLEFAMILYDENTISTRY@		10/1/2024	10
Re-Roof	102	JORN CIRCLE	BECKY VALENTINE			10/1/2024	244
Generator	208	STONE CREEK DR	JASON RICHARDS		AIRSOUTH COOLINNG AND HEATING	9/30/2024	244
Sign	346	CHURCH RD	ACE BOLT & SCREW CO. INC.	KAYLA@ACEBOLT.NET	A PLUS SIGNS AND CREATIVE INC	9/30/2024	90
Site Plan Review	586	CHURCH RD	BEAR CREEK WATER ASSOCIATION			9/30/2024	100
Site Plan Review	109	AULENBROCK DR	MADISON MAC HAIK CHEVROLET			9/30/2024	100
Re-Roof	211	CRESCENT RIDGE DR	THOMAS DOUGLAS		DTX CONSTRUCTION & ROOFING	9/24/2024	211
Re-Roof	111	BRADSHAW CROSSING	CURTIS AUGUSTINE			9/23/2024	277



Re-Roof	132	RIDGEFIELD DR	MOHAMMED JALALUDDIN			9/23/2024	222
Accessory Residential	154	CHURCH RD	NOAH TOLES			9/20/2024	178
Accessory Commercial	120	LONE WOLF DRIVE	KEITH THURMOND			9/19/2024	134
Addition Commercial	396	BUSINESS PARK DR.	MARCELLE CONSTRUCTION LLC	MARCELLECONSTRUCTION		9/19/2024	1027
Addition Commercial	113	DEES DRIVE	JOSHUA LORENZ			9/19/2024	431
Re-Roof	148	WEISENBERGER ROAD	Sam & Kelly Jo Riden		WATKINS CONSTRUCTION	9/17/2024	1342
Re-Roof	144	OLD ORCHARD RD	HERMAN WASHINGTON			9/17/2024	266
Re-Roof		140 JORN CIRCLE	TRACY BOONE		WATKINS CONSTRUCTION	9/13/2024	299
Addition Commercial	134	WEISENBERGER RD ST B	HAYLEX PROPERTIES LLC		JEFF RHEA CONSTRUCTION	9/9/2024	1857
Sign	1082	GLUCKSTADT ROAD	CALEB COLEMAN REALTY, LLC	CALEB@CALEBCOLEMANR		9/9/2024	180
Sign	203	CALHOUN STATION PKWY	MS EXPRESS HEALTH			9/9/2024	10
New Building Commercial	620	CHURCH RD	BLURTON HOLDINGS, LLC			9/6/2024	2652
Accessory Residential	182	CHURCH RD	KEVIN CAMPBELL		WHITTINGTON HEATING & COOLING	8/28/2024	46
Sign	272	CALHOUN STATION PKWY	FIIZ DRINKS			8/28/2024	100
Accessory Residential	115	MINNINGER BLVD	ANDREW & KALLIE SESTI			8/23/2024	101
Addition Residential	115	JORN CIRCLE	TREY MCCLELLAN			8/19/2024	50
Accessory Commercial	137	YANDELL RD	BROTHERS TACOS			8/16/2024	1000
Re-Roof	121	STONE CREEK DR	DANIEL BENNETT		RIVER OAKS ROOFING & CONST.	8/16/2024	321
Addition Commercial	346	CHURCH RD	VANITY SALON		BARLOW CONSTRUCTION	8/16/2024	847
Sign	412	BUSINESS PARK DR.	SIP OUTDOORS	SIPOUTDOORS24@GMAIL.C		8/14/2024	60
Plumbing Commercial	1042	GLUCKSTADT RD., D.	UPTOWN PHARMACY			8/9/2024	267
Addition Commercial	272	CALHOUN STATION PKWY	L HEART ENTERPRISE, LLC		BBH CONSTRUCTION INC	8/6/2024	577
Pool	148	OLD ORCHARD RD	JEFF & JENNIFER KNIGHT		CPS POOLS AND SPA	8/6/2024	883
New Building Commercial		082E-15-037/00.00	MMC MATERIALS			8/1/2024	250
Site Plan Review		CALHOUN STATION PKWY	CPOR REI, LLC	JRPHILLI7669@GMAIL.COM		8/1/2024	100
New Building Commercial	418	BUSINESS PARK DR	WELLSPRING METHODIST CHURCH			7/30/2024	250
Fence	263	STOUT RD	DAN DEAR CUSTOM HOMES			7/29/2024	50
New Building Commercial	586	CHURCH RD	BEAR CREEK WATER ASSOCIATION			7/25/2024	250
New Building Commercial	690	CALHOUN STATION PKWY	MILLS CONTRACTING LLC		MILLS CONTRACTING LLC	7/22/2024	6627
Addition Commercial	102	LEXINGTON DR	ACCENT HEALTH		SHANE ORMAN	7/22/2024	1777
Re-Roof		852 GLUCKSTADT RD	KENNY MARTIN		JOSH NEIL ROOFING & RESTORATIO	7/17/2024	387
Addition Commercial	1054	GLUCKSTADT ROAD	BASKIN ROBBINS		BEDI CONSTRUCTION	7/12/2024	1102
New Building Commercial	2210	HIGHWAY 51	SOWELL ROAD SHELL LLC			7/12/2024	250

Sign	203	CALHOUN STATION PKWY	MS EXPRESS HEALTH		A PLUS SIGNS & CREATIVE	7/10/2024	90
Addition Commercial	203	CALHOUN STATION PKWY	POKE STOP, LLC		CERTIFIED CONSTRUCTION	7/8/2024	2467
Re-Roof	140	BEAR CREEK CIRCLE	ANDY DILLON		WATKINS CONSTRUCTION	7/8/2024	299
Re-Roof	103	PERRY COVE	EMMITT BRACEY		WATKINS CONSTRUCTION	7/8/2024	315
Re-Roof	109	PLANTERS ROW	DON STEVENS		WATKINS CONSTRUCTION	7/8/2024	245
Addition Commercial	396	BUSINESS PARK DRIVE	MARCELLE CONSTRUCTION		MARCELLE CONSTRUCTION	7/1/2024	69
Re-Roof	111	COLONY PLACE	WESLEY PHILLIPS		JOSH NEIL ROOFING & RESTORATIO	7/1/2024	561
Addition Commercial	203	CALHOUN STATION PKWY	JASON VASSAR		TYE GARNER	6/24/2024	2027
Accessory Residential	168	DEERWOOD CROSSING	KIMBERLY WHITTINGTON			6/21/2024	255
Sign	1021	GLUCKSTADT RD	TINDLE FAMILY DENTISTRY	TINDLEFAMILYDENTISTRY@		6/21/2024	10
Sign	203	CALHOUN STATION PKWY	MS HEALTH EXPRESS			6/21/2024	10
Addition Commercial	124	KIMBALL DR	TATE HOMES, LLC		MICHAEL TATE	6/20/2024	387
New Building Commercial	525	CHURCH RD	HARTLEY EQUIPMENT COMPANY INC		MID STATE CONSTRUCTION, INC	6/20/2024	9858
Sign	111	DEES DRIVE, STE. E.	SOCIAL THE DRESS EDITION		A PLUS SIGNS AND CREATIVE INC	6/18/2024	90
Sign	114	DEES DR.	DUB'S CLUBS CUSTOM GOLF SHOP		A PLUS SIGNS AND CREATIVE INC	6/18/2024	150
Addition Commercial	124	KIMBALL DR	TATE HOMES, LLC		MICHAEL TATE	6/17/2024	387
New Building Commercial	217	WEISENBERGER RD	K & S WARREN PROPERTIES, LLC			6/14/2024	250
New Building Commercial	2221	HIGHWAY 51	SHELL CONVENIENCE STATION		BEDI CONSTRUCTION	6/14/2024	9627
Addition Residential	182	CHURCH RD	KEVIN CAMPBELL		BERRY CONSTRUCTION	6/13/2024	757
Sign	203	CALHOUN STATION PKWY	PUPPY LODGE BOARDING & DAY SPA			6/10/2024	20
New Building Commercial		GLUCKSTADT RD	PREET PROPERTIES LLC		COMMERCIAL CONSTRUCTION & M	6/10/2024	18747
Accessory Residential	121	LAKESHIRE CIRCLE	J B BROWN			6/7/2024	676
Accessory Commercial	130B	AMERICAN WAY	A T & T			6/6/2024	586
Accessory Commercial	130Z	AMERICAN WAY	TILLMAN INFRASTRUCTURE			6/6/2024	1797
Sign	112	DEES DRIVE	RANGE, THE			6/5/2024	10
Sign	316	OLD JACKSON RD	SWEET N SAVI		A PLUS SIGNS AND CREATIVE INC	6/4/2024	90
New Building Commercial	690	CALHOUN STATION PKWY	MILLS CONTRACTING LLC			6/4/2024	100
Plumbing Commercial	148	WEISENBERGER ROAD	Sam & Kelly Jo Riden			6/3/2024	24
New Building Commercial	259	YANDELL RD	TIM HILLHOUSE		WHITE OAK CONSTRUCTION	6/3/2024	5077
New Building Commercial	608	CHURCH ROAD	PUCKETT MACHINERY COMPANY		FOUNTAIN CONSTRUCTION COMPA	6/3/2024	8907
New Building Commercial		CALHOUN STATION PKWY	CPOR REI, LLC	JRPHILLI7669@GMAIL.COM		6/3/2024	250
New Building Commercial		547 CHURCH RD	DANNY BOLANOS		MARCELLE CONSTRUCTION	5/22/2024	5232
Sign	1085	GLUCKSTADT ROAD	RENEW AUDIOLOGY HEARING AID		HEDERMAN BROTHERS	5/22/2024	120

Re-Roof	105	GREER CT	MILTON BOOKER		WATKINS CONSTRUCTION	5/22/2024	244
Accessory Residential	231	FARMERS ROW	KATHY WALL			5/21/2024	35
Addition Commercial	346	CHURCH ROAD	EL RANCHITO III, LLC		CARRAWAY CONSTRUCTION	5/21/2024	5077
Addition Commercial	203	CALHOUN STATION PKWY	EXPRESS HEALTH		PAUL GRAHAM HOMES LLC	5/17/2024	1552
Fence	102	LONE WOLF DRIVE	TINO'S PET GROOMING			5/15/2024	39
Sign	576	CHURCH RD	STEEL TECHNOLOGIES			5/15/2024	10
Addition Residential	102	JORN CIRCLE	STEVE CRAWFORD		AAA FOUNDATION REPAIR	5/14/2024	63
Sign	1076	GLUCKSTADT RD	AUTOZONE			5/14/2024	10
Re-Roof	109	STONE CREEK DR	JAN DYKES			5/10/2024	277
Sign	154	CALHOUN STATION PKWY	PEDIATRIC DENTISTRY OF GLUCKST		A PLUS SIGNS AND CREATIVE INC	5/6/2024	180
Remodel Residential	159	BEAR CREEK CIRCLE	CARL MCKINLEY		TRI COUNTY RESTORATION	5/6/2024	112
Re-Roof	192	BRADFIELD DR	LAMONT BRADFIELD		POLLARD CONSTRUCTION	5/3/2024	57
Addition Commercial	412	BUSINESS PARK DR	SIP MISSISSIPPI		JLS CONSTRUCTION	5/1/2024	4552
Sign	112	DEES DRIVE	RANGE, THE			5/1/2024	10
Addition Commercial	418	BUSINESS PARK DR	EASTSIDE PLAZA LLC			4/29/2024	2532
Addition Commercial	111	DEES DRIVE	ELITE PHYSICAL THERAPY		STH ASSOCIATES	4/29/2024	1657
Sign	166	CALHOUN STATION PKWY	TWISTED TURNIP	ACCOUNTING@EATTWISTE		4/29/2024	10
Fence	184	AMERICAN WAY	STEPHANIE MCCORMICK			4/26/2024	79
Sign	119	ENTERPRISE DR	SAFELITE		RAINBOW SIGNS	4/26/2024	120
Re-Roof	100	HAYFIELD PLACE	VAL BUGGS		RENOVA CONSTRUCTION, LLC	4/23/2024	189
Addition Commercial	342	OLD JACKSON RD	RANDY & TONYA TUCKER	TUCKERCA11@GMAIL.COM		4/22/2024	250
Addition Commercial	346	CHURCH RD	ACE BOLT & SCREW			4/18/2024	1527
Sign	109	LONE WOLF DR	MAVERICK SERVICES LLC			4/18/2024	60
Sign	203	CALHOUN STATION PKWY	LOCAL NAIL SALON		CERTIFIED CONSTRUCTION	4/17/2024	90
Sign	203	CALHOUN STATION PKWY	PUPPY LODGE BOARDING & DAY SPA		CERTIFIED CONSTRUCTION	4/17/2024	90
Re-Roof	132	FAIRCHILD COVE	DAVID RUSHING		JOSH NEIL ROOFING & RESTORATIO	4/17/2024	244
Addition Commercial	154	CALHOUN STATION PKWY	PEDIATRIC DENTISTRY OF GLUCKST		TYE GARNER	4/12/2024	1782
Re-Roof	155	BRADFIELD RD	ANGEL STENMARK		JEFF RHEA CONSTRUCTION	4/12/2024	233
Sign	102	LONE WOLF DR	TENCARVA	BBURGESS@TENCARVA.CO	RAINBOW SIGNS	4/11/2024	60
Sign	178	CALHOUN STATION PKWY	CHEVRON			4/9/2024	10
Addition Residential	146	S TAYLOR LANE	MARCUS HUNTER		MARCUS HUNTER	4/4/2024	156
Sign	346	CHURCH RD	HAYZIE ROOS	HMCCARRA@GMAIL.COM	A PLUS SIGNS AND CREATIVE INC	4/2/2024	90
Sign	346	CHURCH RD	LOCAL MIXER, THE	HMCCARRA@GMAIL.COM	A PLUS SIGNS AND CREATIVE INC	4/2/2024	90

Sign	1716	HWY 51	BARRE BY ERIN, THE	ERINTATE.BARRE@GMAIL.C	A PLUS SIGNS AND CREATIVE INC	4/2/2024	60
Addition Commercial	384	CHURCH RD	HUTCHINSON OFFICE PROPERTIES			4/1/2024	250
Addition Commercial	119	ENTERPRISE DR	SAFELITE		MANAGEMENT RESOURCE SYSTEMS	3/28/2024	2962
Sign	1716	HWY 51	BARRE BY ERIN, THE	ERINTATE.BARRE@GMAIL.C		3/26/2024	10
Sign	238	WEISENBERGER RD	SEASONS	HALLOWEEN@BELLSOUTH.		3/22/2024	590
Sign	346	CHURCH RD	BLUE FUJI SUSHI GRILL		A PLUS SIGNS AND CREATIVE INC	3/20/2024	90
Sign	124	KIMBALL DR., STE. F.	SOUTHERN MOTORCARZ	MIKE@SOUTHERNMOTORC		3/20/2024	60
Sign	1021	GLUCKSTADT RD	TINDLE FAMILY DENTISTRY	TINDLEFAMILYDENTISTRY@		3/19/2024	10
New Building Residential	113	ARRINGTON DR	KENNETH/SHARON PROSPER		JMH BUILDERS	3/19/2024	2777
Sign	1091	GLUCKSTADT RD	DOMINO'S	GLENN.DAVIS@RPMPIZZA.C		3/18/2024	10
New Building Commercial	203	CALHOUN STATION PKWY	CERTIFIED CONSTRUCTION LLC		CERTIFIED CONSTRUCTION	3/18/2024	0
New Building Commercial	203	CALHOUN STATION PKWY	CERTIFIED CONSTRUCTION LLC		CERTIFIED CONSTRUCTION	3/18/2024	0
Accessory Residential	112	GERMANTOWN RD	STEVE HOPPER			3/13/2024	532
New Building Commercial		STOUT RD	MEADOWS AT STOUT FARMS, PART 4			3/8/2024	100
New Building Commercial	150	AUTOBAHN LOOP	CANTON MAC HAIK CDJR LTD	DARREN@MACHAIK.NET	PEOPLES CONSTRUCTION CORP	3/7/2024	250
New Building Commercial	150	AUTOBAHN LOOP	MAC HAIK CANTON		PEOPLES CONSTRUCTION CORP	3/7/2024	100
Addition Commercial	109	LONE WOLF DR	MAVERICK SERVICES LLC			3/6/2024	250
Sign	111	DEES DRIVE	ELITE PHYSICAL THERAPY		A PLUS SIGNS AND CREATIVE INC	3/5/2024	90
New Building Commercial		CHURCH RD	BENSON BUILDERS AND PROPERTIES			3/4/2024	100
Re-Roof		118 JORN CIRCLE	BOB LUCROY		ANYTIME ROOFING & CONSTRUCTIO	3/4/2024	310
Accessory Commercial	1743	HIGHWAY 51	MARLO'S EATERY			3/1/2024	1000
Addition Commercial	108	DEES DR	JORDAN DOTTLEY		JLS CONSTRUCTION	2/28/2024	1277
Gas Commercial	178	CALHOUN STATION PKWY	CHEVRON		CERTIFIED CONSTRUCTION	2/27/2024	50
Sign	160	WEISENBERGER ROAD	KEBAB & CURRY			2/21/2024	40
Addition Commercial	124	KIMBALL DR	TATE HOMES LLC			2/16/2024	222
Sign	1091	GLUCKSTADT RD	DOMINO'S	GLENN.DAVIS@RPMPIZZA.C		2/16/2024	10
Hood Suppression	178	CALHOUN STATION PKWY	CHEVRON		MARTIN BLOUGH COMPANY	2/14/2024	288
Hood Suppression	316	OLD JACKSON RD	FIT CHEF		MARTIN BLOUGH COMPANY	2/14/2024	658
Addition Commercial	272	CALHOUN STATION PKWY	ANGELOS TOO		PATRICK ROWLAND	2/14/2024	1127
Sign	1076	GLUCKSTADT RD	AUTOZONE, INC		ID ASSOCIATES	2/14/2024	190
Sign	316	OLD JACKSON RD	PTS PHYSICAL THERAPY AND SPORT	MADISONPTS@GMAIL.COM		2/6/2024	40
Sign	464	CHURCH RD	ALFA INSURANCE	HANNASHEDD@GMAIL.CO	GATOR SIGN COMPANY	2/1/2024	60
Addition Commercial	346	CHURCH RD	LOCAL MIXER, THE		YOUNG CONSTRUCTION	1/29/2024	1302

Addition Commercial	418	BUSINESS PARK DR	JOHNNY GOOCH		MARCELLE CONSTRUCTION	1/26/2024	343
Sign	178	CALHOUN STATION PKWY	CHEVRON			1/24/2024	90
Addition Commercial	346	CHURCH RD	AMAZING NAILS AND PRO DIP LLC		MILLENNIUM CONSTRUCTION	1/23/2024	1087
Sign	203	CALHOUN STATION PKWY	PUPPY LODGE BOARDING & DAY SPA			1/22/2024	10
New Building Commercial	130Z	AMERICAN WAY	HARMON QUALITY BUILDERS, LLC		INTEGRATION TECHNOLOGY LLC	1/18/2024	1542
Electical Commercial	178	CALHOUN STATION PKWY	CERTIFIED CONSTRUCTION LLC		CERTIFIED CONSTRUCTION	1/8/2024	50
New Building Commercial		HWY 51 & BROWNWOOD	MICHAEL ENGLISH			1/5/2024	100
New Building Commercial		CHURCH RD	KIRKLAND PROPERTIES			1/5/2024	100
New Building Commercial		CHURCH RD/JACKSON RD	PATRICK ROWLAND			1/5/2024	100
Addition Residential	176	CATLETT RD	PENNY COULON		RENOVISION OF MISSISSIPPI	1/4/2024	200
Addition Commercial	203	CALHOUN STATION PKWY	LOCAL NAIL SALON		MARK HUNT	1/2/2024	811
Sign	210	AUTOBAHN LOOP	CRASH CHAMPIONS, LLC	COMPLIANCE@CRASHCHA	EXPEDITE DIEHL LLC	12/28/2023	405
Sign	316	OLD JACKSON RD	KINDER BOUTIQUE		A PLUS SIGNS AND CREATIVE INC	12/22/2023	90
Sign	316	OLD JACKSON RD	JAZZY DANCER		A PLUS SIGNS AND CREATIVE INC	12/22/2023	90
Re-Roof	119	BEAR CREEK CIRCLE	JERRY HILLIARD		BEST CHOICE ROOFING	12/20/2023	255
Addition Commercial	432	CHURCH RD	VERIZON WIRELESS		SOUTHEAST TOWERS CORP, LLC	12/19/2023	288
Electical Commercial	644	CHURCH RD	TITAN DEVELOPNMENT CO.	RBWIL432@GMAIL.COM		12/19/2023	85
Re-Roof	103	RIDGEFIELD	Umathanulan Moorthy		BEST CHOICE ROOFING	12/18/2023	224
New Building Commercial	141	W. SOWELL ROAD	BRANDON SERVICE COMPANY, INC.	JREED@BRANDONSERVICE		12/13/2023	1727
New Building Commercial		GLUCKSTADT RD	RPM REALTY, LLC			12/13/2023	250
Sign	124	KIMBALL DR	COLORIZE HAIR STUDIO		A PLUS SIGNS & CREATIVE	12/11/2023	60
Sign	316	OLD JACKSON RD	PTS PHYSICAL THERAPY AND SPORT	MADISONPTS@GMAIL.COM		12/11/2023	10
Electrical Residential	144	OLD ORCHARD RD	HERMAN WASHINGTON		SYLVESTER HUNTER	12/11/2023	57
New Building Commercial	2210	HIGHWAY 51	RAVI BEDI	BEDIINVESTMENTS@GMAIL		12/8/2023	300
New Building Commercial		KIMBALL DR	MICHAEL TATE			12/8/2023	100
New Building Commercial	386	INDUSTRIAL DR S	FORD MUNDY			12/8/2023	100
New Building Commercial	2210	HIGHWAY 51	RAVI BEDI	BEDIINVESTMENTS@GMAIL		12/5/2023	300
Re-Roof	140	BEAR CREEK CIRCLE	ANDY DILLON		STRUCTUAL SOLUTIONS	12/5/2023	156
Sign	105	LEXINGTON DR., C.	MAKE IT POP			12/4/2023	120
New Building Commercial	2210	HIGHWAY 51	RAVI BEDI	BEDIINVESTMENTS@GMAIL		12/4/2023	100
New Building Commercial	2210	HIGHWAY 51	RAVI BEDI	BEDIINVESTMENTS@GMAIL		12/4/2023	250
Re-Roof	137	BEAR CREEK CIRCLE	BEST CHOICE ROOFING			12/4/2023	810
Re-Roof	126	BEAR CREEK CIRCLE	JACK DONALD			12/4/2023	612



Gas Commercial	135	INDUSTRIAL DR	STOIC EQUITY			11/30/2023	50
Sign	125	KIMBALL DR	CPS POOLS AND SPAS INC	TOMMY@CPSPOOLSANDSP	A PLUS SIGNS & CREATIVE	11/29/2023	60
Sign	1021	GLUCKSTADT RD	TINDLE FAMILY DENTISTRY	TINDLEFAMILYDENTISTRY@		11/28/2023	20
Addition Commercial	346	CHURCH RD	WEN HUA TANG		TONY VU dba VU CONTRACTORS	11/28/2023	766
Sign	232	OLD JACKSON RD	HUNTER ENGINEERING		MITCHELL SIGNS	11/27/2023	70
Addition Commercial	124	KIMBALL DR	MYERS CONSTRUCTION			11/17/2023	847
Sign	1021	GLUCKSTADT RD	TINDLE FAMILY DENTISTRY	TINDLEFAMILYDENTISTRY@		11/16/2023	10
Re-Roof	219	FARMERS ROW	MARILYN CLARK		LEVY CONSTRUCTION LLC	11/13/2023	189
Addition Commercial	203	CALHOUN STATION PKWY	SHREKA CLEVELAND		CERTIFIED CONSTRUCTION	11/13/2023	1532
New Building Commercial	346	CHURCH RD	BLURTON HOLDINGS INC			11/9/2023	100
Addition Residential	109	SUNRISE COVE	JACOB BAIN			11/9/2023	702
Sign	154	CALHOUN STATION PKWY	METHODIST REHABILITATION CENTER		A PLUS SIGNS AND CREATIVE INC	11/6/2023	180
Electrical Residential	208	MUNICH COVE	GEORGE HEMBREE		RINEWALT ELECTRIC	11/1/2023	50
Sign	316	OLD JACKSON RD	PTS SPORTS PERFORMANCE	MADISONPTS@GMAIL.COM	A PLUS SIGNS AND CREATIVE INC	10/31/2023	90
Sign	1237	GLUCKSTADT ROAD	SONIC DRIVE IN	KAREN_MASTERSON@MCC		10/31/2023	180
Sign	316	OLD JACKSON RD	PTS SPORTS PERFORMANCE	MADISONPTS@GMAIL.COM		10/31/2023	40
New Building Commercial	130B	AMERICAN WAY	A T & T			10/30/2023	250
New Building Commercial		CHURCH RD	S & D REALTY, LLC	DBOLA14@GMAIL.COM		10/30/2023	250
New Building Commercial		CHURCH RD	S & D REALTY, LLC	DBOLA14@GMAIL.COM		10/30/2023	100
New Building Commercial	608	CHURCH ROAD	PUCKETT MACHINERY	HASTINGS.PUCKETT@PUCK		10/30/2023	250
New Building Commercial	608	CHURCH ROAD	PUCKETT MACHINERY	HASTINGS.PUCKETT@PUCK		10/30/2023	100
Sign	124	KIMBALL DR. UNIT 100	TIMBER TAVERN, LLC	TIMBERTAVERNAXETHROW	A PLUS SIGNS & CREATIVE	10/24/2023	100
Addition Commercial	384	CHURCH RD	LEE HUTCHINSON		JASON MYERS	10/20/2023	1357
Addition Commercial	124	KIMBALL DR	BTH PROPERTIES		JASON MYERS	10/20/2023	550
Sign	311	CALHOUN STATION PKWY	HOTSPOT MARKET	WILLIAMSKANKISTA@YAH		10/16/2023	10
Sign	1227	GLUCKSTADT ROAD	SUBWAY		A PLUS SIGNS AND CREATIVE INC	10/10/2023	90
Solar	453	STOUT RD	JERRY BOULDIN		MYCHIE LAYNE	10/6/2023	398
Sign	154	CALHOUN STATION PKWY	METHODIST REHABILITATION CENTE	KWALLACE@MMRCREHAB.		10/5/2023	10
Sign	154	CALHOUN STATION PKWY	IMPROMPTU GIFTS AND BOUTIQUE	CHRISBENTON@BELLSOUT	A PLUS SIGNS AND CREATIVE INC	9/26/2023	180
Re-Roof	107	BEAR CREEK	REGINALD WOODARD		COPPER MASTERS	9/26/2023	233
Addition Commercial	1240	GLUCKSTADT ROAD	CARDINAL HEALTH		JAMES BROCK	9/14/2023	0
Sign	141	W SOWELL RD	BRANDON SERVICE COMPANY			9/12/2023	60
Sign	102	DEES DR	WON WOK		A PLUS SIGNS AND CREATIVE INC	9/7/2023	90

New Building Commercial		BUSINESS PARK DR	JOHN GOOCH			9/1/2023	2027
Addition Residential	200	PLANTERS COVE	ROBERT GIORDANO			8/31/2023	535
Addition Residential	103	GERMANTOWN RD	JEFFREY GUY			8/31/2023	942
Addition Residential	130	RIDGEFIELD DR	TED CRAWLEY		G & D CUSTOM CARPENTRY	8/21/2023	101
Sign	154	CALHOUN STATION PKWY	GLUCKSTADT PHARMACY		A PLUS SIGNS AND CREATIVE INC	8/9/2023	180
Sign	113	DEES DR	SIGNATURE SMILES			8/4/2023	10
Sign	102	LONE WOLF DR	BLACK DIAMOND RACING CUSTOMS			8/4/2023	60
Sign	1706	HIGHWAY 51	BUMPERS DRIVE IN			8/4/2023	20
Sign	311	CALHOUN STATION PKWY	HOTSPOT MARKET	WILLIAMSKANKISTA@YAHOO		8/3/2023	10
Addition Residential	108	PERRY COVE	DAVID TULLOS			8/2/2023	101
Addition Commercial	102	DEES DR	TONY VU dba VU CONTRACTORS			8/2/2023	500
Addition Residential	102	DEES DR	TONY VU dba VU CONTRACTORS			8/1/2023	0
Sign	195	INDUSTRIAL BLVD	SANHUA INTERNATIONAL, INC.	GREG.SIMPSON@SANHUA		8/1/2023	60
Addition Commercial	359	OLD JACKSON RD	FASTENAL COMPANY		ZACH PARKER	7/28/2023	685
New Building Commercial	264	CALHOUN STATION PKWY	CORNER AT CALHOUN STATION		JLS CONSTRUCTION	7/28/2023	5332
Addition Commercial	210	N INDUSTRIAL DR	WESTLAKE CHEMCIAL		STANLEY B LEWIS	7/28/2023	1552
Sign	1265	GLUCKSTADT ROAD	HOMEWELL CARE SERVICES	CRAMSEY@HOMEWELLCAR	A PLUS SIGNS AND CREATIVE INC	7/21/2023	60
Sign	154	CALHOUN STATION PKWY	SIMPLI NAIL SPA LLC	SIMPLINAILSPALLC@GMAIL	A PLUS SIGNS AND CREATIVE INC	7/21/2023	180
Re-Roof	168	HUNTERS ROW	MORAIN TONY		TERRY SANDERS	7/18/2023	145
Sign	102	DEES DR	EL SOMBRERO	MORALESBUTELR@YAHOO		7/17/2023	20
Sign	311	CALHOUN STATION PKWY	HOTSPOT MARKET	WILLIAMSKANKISTA@YAHOO		7/10/2023	10
New Building Commercial	311	CALHOUN STATION PKWY	CALHOUN STATION		SOUTHERN EAGLE CONSTRUCTION	7/6/2023	4332
Accessory Residential	127	RIDGEFIELD DR	RNC SERVICES LLC	RNC SERVICES LLC@OUTLO		7/5/2023	550
Sign	111	AULENBROCK DR	CHRISTIAN LEARNING CENTER			6/28/2023	60
New Building Commercial	1025	GLUCKSTADT RD	GLUCKSTADT PLACE	BUCK@INNOVATIONSWR.C		6/28/2023	4582
New Building Commercial	1	KAYO DR	KAYO PLACE			6/23/2023	2017
Sign	102	DEES DR	MISSISSIPPI CANDY COMPANY		A PLUS SIGNS AND CREATIVE INC	6/19/2023	90
Fence	102	LONE WOLF DRIVE	TPG, LLC	TINO@TINOSPETGROOMING		6/15/2023	50
Addition Commercial	300	YANDELL RD	MADISON CROSSING ELEM SCHOOL		TYLER HARRIS	6/15/2023	0
Sign	102	LONE WOLF DRIVE	TPG, LLC	TINO@TINOSPETGROOMING		6/12/2023	60
Sign	1743	HIGHWAY 51	BRYAN TIRES SREVICE	JOSEGUARDADO87@YAHOO		6/7/2023	60
Sign	108	DEES DRIVE	BURGER KING	KWARE@SPRINTMART.COM		6/6/2023	30
Sign	111	DEES DRIVE	3 HOUSES	SAHLERG@BELLSOUTH.NET		6/6/2023	90

Sign	1240	GLUCKSTADT ROAD	CARDINAL HEALTH	JNANA.LEWIS@CARDINALH		6/1/2023	10
New Building Commercial	409	CALHOUN STATION PKWY	MADISON COUNTY SCHOOL DISTRICT		ANDY TAYLOR	5/30/2023	0
Sign	154	CALHOUN STATION PKWY	YAMI ASIAN RESTAURANT	BUDGETSIGN@COMCAST.N		5/24/2023	90
Mechanical Residential	103	COTTON COVE	AIRSOUTH, LLC			5/24/2023	167
Sign	154	CALHOUN STATION PKWY	TIME 4 TOYS	BUDGETSIGNS@COMCAST		5/24/2023	90
Fence	125	KIMBALL DR	CPS POOLS AND SPAS INC	TOMMY@CPSPOOLSANDSP		5/23/2023	50
Generator	216	CRESCENT RIDGE	Robert Hinton		AIRSOUTH COOLINNG AND HEATING	5/19/2023	57
New Building Commercial	109	ENTERPRISE DRIVE	GREEN OAK	MAURM@GREENOAKMS.CO		5/19/2023	1202
Generator	123	LAKESHIRE COVE	DEBBIE HARDEE		AIRSOUTH COOLINNG AND HEATING	5/19/2023	244
Addition Residential	146	STRIBLING RD EXT	ZACH ETHERIDGE		NATHAN CRAFT	5/18/2023	892
Sign	102	DEES DR BLG 300	MISSISSIPPI CANDY COMPANY			5/16/2023	10
Accessory Residential	111	MUIRFIELD PLACE	JACQUELINE PATTON			5/10/2023	0
Sign	138	W. SOWELL ROAD	CLASSIC RESTORATIONS, LLC	MIKEAMARTIN02349@GMAI		5/9/2023	95
Sign	576	CHURCH RD	STEEL TECHNOLOGIES	HMUHAMMAD@DESTTING.C		5/4/2023	10
Sign	1716	HIGHWAY 51	RIPTIDE OUTDOORS	RIPTIDESALES@GMAIL.CO		4/19/2023	90
Electical Commercial	1267	GLUCKSTADT RD	DAMPIER LIGHTING			4/18/2023	50
Addition Commercial	155	CALHOUN STATION PKWY	SULLIVAN'S GROCERY		MCINTOSH CONSTRUCTION INC	4/17/2023	332
Sign	240	AUTOBAHN LOOP	CRASH CHAMPIONS			4/14/2023	40
Addition Residential	216	CRESCENT RIDGE	Robert Hinton		AIRSOUTH COOLINNG AND HEATING	3/29/2023	222
Sign	102	DEES DR	MAGNOLIA HEMP COMPANY	BUDGETSIGNS@COMCAST		3/28/2023	90
Fence	111	AULENBROCK DR	CHRISTIAN LEARNING CENTER			3/28/2023	50
Addition Commercial	195	INDUSTRIAL BLVD	CADENA SMITH, LLC	CADENASMITH20@GMAIL.C		3/20/2023	79
Gas Residential	105	ARRINGTON DR	JOHN DYKES	lgdykes1@gmail.com		3/17/2023	50
Addition Residential	113	MUIRFIELD PLACE	LARRY FRANKLIN			3/15/2023	57
Re-Roof	111	FIRST COLONY BLVD	GUARANTEED ROOFING COMPANY	RENEE@GUARANTEEDROO		3/10/2023	299
Sign	103	TRUSTMARK DR	TRUSTMARK NATIONAL BANK	BCOLLIER@TRUSTMARK.CO		3/7/2023	360
New Building Commercial	800	SAHLER LANE	FIT CHEF		JLS CONSTRUCTION	3/6/2023	0
Addition Residential	144	OLD ORCHARD RD	EAGLE CARPORTS			3/3/2023	0
Addition Residential	144	OLD ORCHARD RD	EAGLE CARPORTS			3/3/2023	0
Addition Residential	144	OLD ORCHARD RD	EAGLE CARPORTS			3/3/2023	0
Gas Residential	131	SUNRISE COVE	BUTLER PLUMBING	CHARLESBUTLER4566@AT		3/3/2023	85
Addition Residential	144	OLD ORCHARD RD	EAGLE CARPORTS			3/3/2023	0
Accessory Residential	175	BRADFIELD DR	MARQUEUS DRAPER			3/1/2023	24

Sign	1715	HIGHWAY 51	BOO'S SMOKEHOUSE BBQ LLC	BOOBAKER1@GMAIL.COM		3/1/2023	10
Sign	154	CALHOUN STATION PKWY	SOULSHINE PIZZA	DON.CLIFFORD@SOULSHI		2/22/2023	100
New Building Commercial	102	DEES DR	4 SEASONS NAILS		JLS CONSTRUCTION	2/16/2023	0
Sign	112	LONE WOLF DR	SCOTT C WOODS & ASSOC P. A.	SWOODS@SCWENG.COM		2/16/2023	30
Driveway	101	FIRST CHOICE DR	FIRST CHOICE DRIVE LLC	CALVINLUNCEFORD@GMA		2/10/2023	50
Sign	1091	GLUCKSTADT RD	DOMINO'S	GLENN.DAVIS@RPMPIZZA.C		2/8/2023	0
Sign	160	WEISENBERGER RD	KEBAB & CURRY	JEETENANAND@YAHOO.CO		2/7/2023	0
Sign	112	LONE WOLF DR	SCOTT C WOODS & ASSOC P. A.	SWOODS@SCWENG.COM		2/7/2023	0
Sign	124	LONE WOLF DR	KTA-TATOR, INC.	TMELOGRANE@KTA.COM		2/7/2023	0
Sign	115	AULENBROCK DR	WEEMS MCDONALD	TMITCHELL@WEEMSACCO		2/7/2023	0
New Building Commercial	346	CHURCH RD	JLS CONSTRUCTION	JLSCONST@YAHOO.COM		2/6/2023	25
Driveway	347	DISTRIBUTION DR	CLARK RENTAL AND SUPPLY	JHAGGARD@CLARKSUPPLY		2/2/2023	50
Sign	116	LONE WOLF DRIVE	HYDRONIC TECHNOLOGY	SDEES@DYDRONICTECHN		1/31/2023	0
Sign	102	DEES DR	EPIC DONUT/STONE GROUND COFFE	JOSH@MORRISONPUBLISH		1/30/2023	90
Sign	166	CALHOUN STATION PKWY	TWISTED TURNIP	MSBOWMANS@YAHOO.OM		1/30/2023	200
Electical Commercial	200	CALHOUN STATION PKWY	GERMANTOWN HIGH SCHOOL		RUSTY BAIN	1/26/2023	50
Addition Commercial	102	DEES DR	SOUTHERN MAGNOLIA HEMP COMPA		MARK HUNT	1/26/2023	921
Sign	1715	HIGHWAY 51	BOO'S SMOKEHOUSE BBQ LLC	BOOBAKER1@GMAIL.COM		1/26/2023	90
Sign	333	DISTRIBUTION DR	GLUCKSTADT BODY SHOP	KENNY@GLUCKSTADTBOD		1/25/2023	60
Sign	104	CHURCH RD	PRIORITY ONE BANK			1/25/2023	450
Addition Commercial	128	WEISENBERGER RD	BMC GENERAL CONTRACTORS LLC		BRUCE MASSEY	1/24/2023	1877
Sign	112	LEXINGTON DR	THE OFFICE			1/19/2023	90
Sign	105	LEXINGTON DR	BUDGET BLINDS	PJWHITE@BUDGETBLINDS.		1/19/2023	0
Sign	272	CALHOUN STATION PKWY	JOHNNY'S PIZZA	HARRISONHOMESLLC@GM		1/17/2023	0
Sign	105	LEXINGTON DR	MAGNOLIA CONCESSIONS LLC	magconcessions@gmail.co		1/13/2023	60
Sign	124	ENTERPRISE DR	SOUTHERNEASTERN AUTOMATIC SPR	DLANGFORD@AMTECK.CO		1/13/2023	60
Sign	111	DEES WAY	GO SHINE EXPRESS CARWASH	GOSHINECORP@GMAIL.CO		1/12/2023	0
Sign	109	AULENBROCK DR	HARTLEY EQUIPMENT	CAMERON@HARTLEYEQUIP		1/12/2023	0
New Building Commercial	105		AOK PROPERTIES LLC	SUNNY.SETHI@JACKIESINT	BRIAN WHITE	1/11/2023	0
Sign	243	INDUSTRIAL DR	BEN NELSON GOLF & OUTDOOR	RMATTIACE@BENNELSON.C		1/10/2023	0
Sign	102	LEXINGTON DR	DOGWOOD OFFICE CENTER	BWALKER@KICKAPOOPROF		1/10/2023	0
Sign	155	AMERICAN WY	DIXIE EQUINE	JVICE39@YAHOO.COM		1/10/2023	140
Sign	115	LONE WOLF DR	ETAIROS VHAC	ACCOUNTING@ETAIROSHV		1/10/2023	60

Sign	331	DISTRIBUTION DR	GULF EQUIPMENT CORPORATION	LIZ.VANEGMOND@GULFSE		1/9/2023	60
Sign	168	AMERICAN WAY	BOH INC	BRENTJ@GEORGIABLUE.NE		1/9/2023	60
Sign	1706	HIGHWAY 51	ALPHA FINANCIAL & TAX SERVICES	MCCULLOUGH413@GMAIL		1/5/2023	60
Sign	184	AMERICAN WAY	AFTERZONE, LLC	STEPHANIEMC1122@ATT.N		1/5/2023	60
Sign	100	FIRST CHOICE DR	DEPENDABLE PEST SERVICE INC	DEPENDABLEPEST@BELLS		1/3/2023	95
New Building Commercial	1091	GLUCKSTADT RD	ALTHLETICO PHYSICAL THERAPY		VOGTS CONSTRUCTION CO	12/29/2022	100
Sign	137	YANDELL RD	BAMBOO EXPRESS	BAMBOOEXPRESS98@GMA		12/28/2022	180
Sign	555	INDUSTRIAL DR S	V2X	SARAH.R.GRISSETT@VTXAE	SIGN CRAFTERS	12/28/2022	125
Sign	120	YANDELL RD	OUTLETS OF MISSISSIPPI	IMPORTS72@AOL.COM		12/28/2022	44
Sign	102	DEES DR BLG 300	SOPHIE'S MILKSHAKES & SUNDAES		A PLUS SIGNS AND CREATIVE INC	12/28/2022	90
Sign	102	DEES DR	GERMANTOWN DENTAL	SHARLEY@GARDNERDENT	A PLUS SIGNS AND CREATIVE INC	12/28/2022	190
Sign	114	DEES DR	GLUCKSTADT FITNESS		MCINTOSH CONSTRUCTION INC	12/28/2022	95
Accessory Commercial	154	CHURCH RD	4 SEASONS		JOHN WOOD	12/21/2022	24
New Building Commercial	130B	AMERICAN WAY	GREEN STEEL COATINGS		VENTURE SOUTH CONSTRUCTION	12/21/2022	0
Accessory Commercial	103	DEES DR	4 SEASONS		JOHN WOOD	12/21/2022	24
Accessory Commercial	238	WEISENBERGER RD	4 SEASONS		JOHN WOOD	12/21/2022	24
Mechanical Commercial	166	CALHOUN STATION PKWY	PRO SERVICE LLC	JMATHIS@PROSSERVICEMC	PRO SERVICE LLC	12/19/2022	96
Electical Commercial	195	INDUSTRIAL BLVD	COVINGTON ELECTRIC	AAARON@COVINGTONELE	COVINGTON ELECTRIC	12/15/2022	261
Sign	1085	GLUCKSTADT PLACE	GLUCKSTADT PLACE	BUCK@INNOVATIONSWR.C		12/14/2022	60
New Building Commercial	154	CALHOUN STATION PKWY	ANTHONY MORRISON		JLS CONSTRUCTION	12/13/2022	0
Sign	2125	HIGHWAY 51	W L BURLE ENGINEERS P A			12/12/2022	0
New Building Residential	148		AMANDA LORIAN	rachel.sargent@tylertech.c	Tyler Construction Co	12/9/2022	0
AC Change Out	148		Rachel Sargent	rachel.sargent@tylertech.c	Tyler Construction Co	12/9/2022	0
Sign	102	DEES DR	4 SEASON NAILS			12/2/2022	0
Addition Residential	144	OLD ORCHARD RD	EAGLE CARPORTS			11/23/2022	0
New Building Commercial	124	KIMBALL DR	BTH PROPERTIES		JASON MYERS	8/7/2022	0

## City of Gluckstadt

### Application for Conditional Use

Subject Property Address: 547 Church Rd.  
 Parcel #: 082E-15-001/04.02  
 Owner: Danny Bolaños  
 Address: 115 Honours Ln  
Madison MS 39110  
 Phone #: 601-559-8161  
 E-Mail: admin@s-dreality.com  
 Applicant: Roman Mora  
 Address: 110 Vinca Dr.  
Madison MS 39110  
 Phone #: 601-715-3794  
 E-Mail: roman@moracoffee.com  
 Current Zoning District: C-2  
 Acreage of Property (If applicable): 3.5 acres  
 Use sought of Property: Commercial - Mobile Food Truck

#### Requirements of Applicant:

1. Letter demonstrating how the proposed use will comply with or otherwise satisfy the requirements for granting a Conditional Use pursuant to Section 804.01 of the Zoning Ordinance.
2. Copy of written legal description.
3. Additional items may be requested depending on the nature and status of the proposed development or property.
4. \$ 250.00 fee required for processing
5. Site Plan as required in Section 807-810

#### Requirements for Granting Conditional Use: (Section 805.01, Zoning Ordinance)

A Conditional Use shall not be granted unless satisfactory provisions and arrangements have been made concerning all the following:

- (a). Ingress and egress to property and proposed structures
- (b). Off-Street parking and loading areas
- (c). Refuse and service areas
- (d). Utilities, with reference locations, availability, and compatibility.
- (e). Screening and buffering with reference to type, dimensions, and character.
- (f). Required yards and other open spaces.
- (g). General compatibility with adjacent properties and other properties in the district.
- (h). Any other provisions deemed applicable by the Mayor and Board of Aldermen.

Applicant shall be present at the Planning and Zoning Commission meeting and Mayor and Board of Alderman meeting. Documents shall be submitted thirty (30) days prior to the Planning and Zoning Commission meeting.





THIS DOCUMENT CONTAINS A TRUE WATERMARK - HOLD UP TO LIGHT TO VIEW  
WESTERN UNION FINANCIAL SERVICES INC. - ISSUER - Denver, Colorado  
Payable at Wells Fargo Bank Grand Junction - Downtown, N.A., Grand Junction, Colorado

Section 9, 1B)



(ISSUING AGENT)

A 359485 D 110725  
T 1538 14  
197844738058 L 000472

\$ 250.00

19-784473805

PAY EXACTLY TWO HUNDRED FIFTY DOLLARS AND NO CENTS

PAY TO THE  
ORDER OF

City of Guckstad  
110 Vine St Madison MS 39110  
547 Church Rd.

Conditional Use Permit

Kamon Thom

PURCHASER'S SIGNATURE  
PURCHASER BY SIGNING THIS AGREES TO THE TERMS ON THE REVERSE SIDE  
MOBILE DEPOSIT PROHIBITED

⑆102100400⑆ 40197844738058⑈



343 Distribution Drive  
Gluckstadt MS 39110

Receipt Number: R00010627  
Cashier Name: BRIDGETTE  
Terminal Number: 24  
Receipt Date: 11/10/2025 8:55:11 AM

Section 9, 1B)

MORA, ROMAN  
110 VINCA DR  
MADISON, MS 39110

Trans Code: 400.00 - Permit Payments	Account: 2025184 MORA, ROMAN	\$250.00
2025184 250.00CR		
	Total Balance Due:	\$250.00
Payment Method: Money Ord Payor: MORA, ROMAN	Reference: 19-784473805 Amount: \$250.00	
	Total Payment Received:	\$250.00
	Change:	\$0.00



# SERVICING AREA AGREEMENT (APPENDIX III)

Section 9, 1B)

TYPE or PRINT IN INK. Enter N/A where requested information does not apply. Leave NO BLANK SPACES.

MOBILE FOOD ESTABLISHMENT NAME: Magnolia Commons / Magnolia Pickleball (Ste. G.)

OWNER(S) NAME: Danny Bolaños PHONE NO: 601-559-8161

## TO BE COMPLETED BY SERVICING AREA OWNER/OPERATOR

The below listed facility will be providing the following services to the above mentioned business owner/operator on a ☒ DAILY BASIS ☐ WEEKLY BASIS ☐ OTHER, EXPLAIN: \_\_\_\_\_

- ☒ Approved Potable Water Source
- ☒ Waste Water Disposal
- ☒ Cleaning Area for MFE
- ☒ Overnight Storage of MFE
- ☐ Overnight Refrigeration

- ☐ Food Preparation Area
- ☐ Food Storage Area
- ☐ Utensil Washing Area
- ☐ Equipment and Utensil Storage Area
- ☐ Prepackaged Foods for Retail Sale

SERVICING AREA NAME: Magnolia Commons

OWNER/MANAGER: Danny Bolaños

ADDRESS: 547 Church Rd. CITY/STATE Gluckstadt/MS ZIP: 39110

PHONE NUMBER: 601-559-8161 FAX NUMBER: N/A

EMAIL ADDRESS: admin@s-drealty.com

FOOD ESTABLISHMENT PERMIT ISSUED BY: \_\_\_\_\_ PERMIT #: \_\_\_\_\_  
(ATTACH COPY OF PERMIT/LICENSE ISSUED BY REGULATORY AGENCY)

[Not yet issued]

Is the servicing area connected to a centralized (city) sewer authority? Yes ☒ No ☐

I give permission to the above listed Mobile Food Establishment Operator to use my establishment located at the above address.

SIGNATURE: [Signature] DATE: 9/5/25

TITLE: Owner





**ORDER APPROVING AND GRANTING A CONDITIONAL USE PERMIT  
ALLOWING A FOOD TRUCK ON PROPERTY LOCATED AT 547 CHURCH ROAD,  
IDENTIFIED AS TAX PARCEL NO. 082E-15-001/04.02,  
IN A DISTRICT ZONED C-2, CITY OF GLUCKSTADT,  
MADISON COUNTY, MISSISSIPPI**

THERE CAME ON for consideration by Applicant, Roman Mora, the issue of whether a Conditional Use allowing a food truck in a district zoned C-2 in the City of Gluckstadt, Mississippi, should be permitted. The Mayor and Board of Aldermen hereby find as follows:

WHEREAS, Applicant now request the governing authorities of City of Gluckstadt, Mississippi, to grant a Conditional Use as permitted by the City of Gluckstadt's Food Truck Ordinance (Ordinance No. 2025-06) and Section 805 of the Zoning Ordinance for the property described herein, which property is located in a C-2 Highway Commercial District, under the City of Gluckstadt's Official Zoning Ordinance of December 16, 2021, to Applicant, allowing a food truck in a district zoned C-2, specifically Tax Parcel No. 082E-15-001/04.02, located at 547 Church Road in the City of Gluckstadt; and

WHEREAS, the Applicant advises the City the real property is owned by S & D Realty, LLC, and Applicant desires to place a food truck on the subject property; and

WHEREAS, the City of Gluckstadt scheduled a public hearing on said Application for December 23, 2025, at 6:00 o'clock p.m. before the City's Planning and Zoning Commission. After review of the Application by the Planning and Zoning Commission of the City of Gluckstadt – the Board was advised that the Planning and Zoning Commission at its December 23, 2025, meeting, recommended approval of the requested conditional use allowing Applicant to operate a food truck on the subject property subject to the condition that the food truck is only allowed to be located in the rear parking lot behind the building; and

WHEREAS, all notice requirements of the Zoning Ordinance of the City of Gluckstadt were accomplished – the City Clerk did cause notice of the December 23, 2025, hearing to be published in the Madison County Journal, a newspaper of general circulation in the City of Gluckstadt, Madison County, Mississippi, in the manner and for the time required by law, and did post notice of same upon the affected property in the manner and for the time required by Section 811.02 of the Zoning Ordinance of the City of Gluckstadt and by law; and

WHEREAS, at the time, date and place specified in the City’s public notice, the Planning and Zoning Commission of the City of Gluckstadt, Mississippi, did conduct a full and complete public hearing on the Application on December 23, 2025, and received comments and heard evidence presented by the Applicant and by all others desiring to be heard, whether in support of or in opposition to the Application; and,

WHEREAS, the Planning and Zoning Commission upon conclusion of its December 23, 2025, meeting recommended in writing that the Board of Aldermen grant the request for a Conditional Use; and

WHEREAS, the Mayor and Board of Aldermen are fully familiar with the request and the property and existing land uses within the City of Gluckstadt and in the area of the City where the property is located, and in acting on this Order, have duly considered the matters and facts within their personal knowledge as same affect the land uses required in the Application;

BE IT HEREBY ORDERED by the Mayor and Board of Aldermen of the City of Gluckstadt, Mississippi, that the request of Applicant to grant a Conditional Use for Parcel No. 082E-15-001/04.02, located at 547 Church Road in the City of Gluckstadt, Madison County, Mississippi allowing Applicant to operate a food truck on the subject property subject to the

condition that the food truck is only allowed to be located in the rear parking lot behind the building; such action is taken pursuant to the findings of fact set out as follows:

1. The Mayor and Board of Aldermen of the City of Gluckstadt, Mississippi, have the final authority with regard to all matters involving the Zoning Ordinance.
2. The written recommendation of the Planning and Zoning Commission is advisory in nature.
3. The Mayor and Board of Aldermen have knowledge of the area involved and are aware of the need for the Conditional Use.
4. The requested designation meets the definitions of a Conditional Use of the Zoning Ordinance. *See also Amended Food Truck Ordinance (Ordinance No. 2025-06):*

**Mobile Food Vendor** means “any person who sells food and/or beverages from a mobile pushcart or motorized mobile food vehicle on a consistent basis for a period of more than 15 days each calendar year;” **Mobile Food Vehicle** means “a self-propelled (or towed) wheeled unit used to sell food or drinks.”

5. The subject property described herein, below, is within a zoning district zoned C-2:  
547 Church Road and being identified by Tax Parcel No. 082E-15-001/04.02 in the City of Gluckstadt, Madison County, Mississippi
6. The Conditional Use will promote the general welfare of the City of Gluckstadt and will not adversely affect the public interest or adjacent property. Future projects within the designation area will remain subject to the Zoning Ordinance and approval of site plans or other matter will allow the City to continue to monitor the area.

7. The establishment of this Conditional Use is not detrimental to the public health, safety, or general welfare, and this Conditional Use is compatible with the existing and intended character of the surrounding zoning district.
8. The Mayor and Board of Aldermen find that all portions of Section 805.01 (A) - (I) of the Zoning Ordinance have also been complied with and that all requirements of Section 805.01 (A) - (I) of the Zoning Ordinance are satisfied based upon the presentation of the Applicant and all documents presented to the Planning and Zoning Commission and to the Mayor and Board of Aldermen.
9. The granting of this Conditional Use does not relieve the requested use from compliance with any applicable law, court order, covenants, or contracts.
10. Applicant shall meet all requirements and standards set forth in the Amended Food Truck Ordinance (Ordinance No. 2025-06).
11. The Conditional Use is granted with the following additional conditions: 1) The food truck must be located in the rear parking lot behind the existing building.

---



---

ORDERED, ADOPTED AND APPROVED by the Mayor and Board of Aldermen of the City of Gluckstadt, Madison County, Mississippi, at a regular meeting thereof held on the \_\_\_\_ day of \_\_\_\_\_, 2026.

The foregoing Order, having been reduced to writing, Alderman \_\_\_\_\_ moved that said Order be adopted. Alderman \_\_\_\_\_ seconded. The vote was as follows:

Alderwoman Miya Warfield-Bates voted: \_\_\_\_\_  
Alderman John Taylor voted: \_\_\_\_\_  
Alderman Jayce Powell voted: \_\_\_\_\_  
Alderwoman Jessie Campbell voted: \_\_\_\_\_  
Alderman Chip Williams voted: \_\_\_\_\_

Whereupon, the Mayor declared the Motion carried and the Order approved and adopted.

SO ORDERED, this the \_\_\_\_ day of \_\_\_\_\_, 2026.

CITY OF GLUCKSTADT, MISSISSIPPI

BY: \_\_\_\_\_  
WALTER C. MORRISON, IV, MAYOR

ATTEST:

BY: \_\_\_\_\_  
LINDSAY KELLUM, CITY CLERK

[SEAL]

**RESOLUTION OF THE MAYOR AND BOARD OF ALDERMEN  
OF THE CITY OF GLUCKSTADT, MADISON COUNTY, MISSISSIPPI  
DENYING A CONDITIONAL USE PERMIT FOR PROPERTY  
LOCATED AT 547 CHURCH ROAD, IDENTIFIED AS  
TAX PARCEL NO. 082E-15-001/04.02, CITY OF GLUCKSTADT,  
MADISON COUNTY, MISSISSIPPI**

WHEREAS, Roman Mora (the "Applicant"), did file an Application for a Conditional Use Permit on property described herein, which property is located in a C-2 Highway Commercial District Classification under the City of Gluckstadt Zoning Ordinance of December 16, 2021 (the "Application"); and,

WHEREAS, the Mayor and Board of Aldermen referred the Application to the Planning and Zoning Commission of the City of Gluckstadt, which Planning and Zoning Commission scheduled a hearing on said Application for December 23, 2025, at 6:00 o'clock p.m.; and,

WHEREAS, the Mayor and Board of Aldermen are familiar with the property and existing land uses within the City of Gluckstadt and in the area of the City where the property is located, and in acting on this Resolution, have duly considered the matters and facts within their personal knowledge as same affect the land uses requested in the Application filed herein; and,

WHEREAS, at the conclusion of the discussion of the Planning and Zoning Commission's recommendation, the Mayor asked whether the Board of Aldermen desired to take any action regarding the Application and the recommendation of the Planning and Zoning Commission and after discussion thereof, Alderman \_\_\_\_\_ offered the following Resolution and moved that it be adopted, to-wit:

IT IS, THEREFORE, RESOLVED by the Mayor and Board of Aldermen of the City of Gluckstadt, Madison County, Mississippi, as follows, to-wit;



SECTION 1. That the matters and facts stated in the preamble hereof are found, determined, and adjudicated to be true and correct.

SECTION 2. That it is hereby found and determined that the conditions precedent to the granting of a Conditional Use Permit as required by Section 805 of the City of Gluckstadt Zoning Ordinance of December 16, 2021, do not exist, and have not been satisfied by the Applicant regarding the granting of a Conditional Use Permit allowing Applicant to operate a food truck in a district zoned C-2.

SECTION 3. That the Application to grant a Conditional Use Permit pursuant to Section 805 of the City of Gluckstadt Zoning Ordinance of December 16, 2021, on the following described property, be and same is hereby denied. The property referenced in the Application (the "property") is described as follows:

547 Church Road and being identified by Tax Parcel No. 082E-15-001/04.02  
in the City of Gluckstadt, Madison County, Mississippi

SO RESOLVED by the Mayor and Board of Aldermen of the City of Gluckstadt, Madison County, Mississippi, at a regular meeting held on \_\_\_\_ day of \_\_\_\_\_, 2026.

The motion for adoption was seconded by Alderman \_\_\_\_\_, and the foregoing Resolution having been first reduced to writing, was submitted to the Board of Aldermen for passage or rejection on roll call vote with the following results:

- Alderwoman Miya Warfield-Bates voted: \_\_\_\_\_
- Alderman John Taylor voted: \_\_\_\_\_
- Alderman Jayce Powell voted: \_\_\_\_\_
- Alderwoman Jessie Campbell voted: \_\_\_\_\_
- Alderman Chip Williams voted: \_\_\_\_\_

Whereupon, the Mayor declared the motion carried and the Resolution adopted.

The foregoing Resolution is approved, this the \_\_\_\_\_ day of \_\_\_\_\_, 2026.

CITY OF GLUCKSTADT, MISSISSIPPI

BY: \_\_\_\_\_  
WALTER C. MORRISON, IV, MAYOR

ATTEST:

BY: \_\_\_\_\_  
LINDSAY KELLUM, CITY CLERK

[SEAL]

## REQUEST FOR DIMENSIONAL VARIANCE APPLICATION

Subject Property Address: 264 Calhoun Station Parkway  
 Owner: Parker Sullivan Applicant: Mitchell Signs, Inc.  
 Address: \_\_\_\_\_ Address: 3200 Hwy 45 North  
Meridian, MS 39301  
 Phone No. (601) 397-2323 Phone No. (601) 482-7471  
 Current Zoning District: \_\_\_\_\_

### Requirements of Applicant:

1. Letter stating reason for requested dimensional variance.
2. Copy of the written legal description.
3. Site plan, building elevations and floor plan drawings on 8.5" x 11".
4. Four complete sets of working plans.
5. Proposed signage to include color and size.
6. \$250.00 fee required for processing.

### Requirements for Granting Variances: (Section 3004.01 - Zoning Ordinance)

- (a). Applicant shall demonstrate that special conditions and circumstances exist which are peculiar to the land, structure or building involved and which are not applicable to other lands, structures or buildings in the same district.
- (b). Applicant shall demonstrate that literal interpretation of the provisions of this Ordinance would deprive the applicant of rights commonly enjoyed by other properties in the same district under terms of this Ordinance.
- (c). Applicant shall demonstrate that granting the variance will not confer on the applicant any special privilege that is denied by this Ordinance to other lands, structures or buildings in the same district.

Applicant shall be present at the Planning and Zoning Commission meeting and Mayor/Board of Aldermen meeting. Documents shall be submitted thirty (30) days prior to the Planning and Zoning Commission meeting.

### Applicant is responsible for complying with all applicable requirements of the Zoning Ordinance.

By signing this application, it is understood and agreed that permission is given to the Zoning Administrator to have a sign erected on subject property, giving notice to the public that said property is being considered for a dimensional variance.

Applicant Signature

Date

Property Owner Signature

Date

---

Shea Goff  
Mitchell Signs, Inc.  
3200 Highway 45 North  
Meridian, MS 39301

(601) 482-7471  
shea.goff@mitchellcompanies.com

---

December 1, 2025

Mayor, Board of Aldermen and Planning & Zoning  
City of Gluckstadt  
P.O. Box 2210  
Gluckstadt, MS 39130

Dear All,

I am writing to you in the hopes you will consider a slight variance in the allowed square footage for a sign we have already created for Bank of Commerce at 264 Calhoun Station Parkway.

We initially measured this incorrectly by assuming that both windows were included in the property. We used the incorrect measurements (28 sq. ft.) to permit for signage and create the art that led to the manufacturing of the signage (41.24 sq.ft.).

Last week we came to install and found where we were wrong. The space only measures 20' giving us a 30' sign allowance. Instead of now scrapping the signage and creating new signage, we would like to ask if it will be permissible to redesign what we put up.

The attached art shows the signage without the B logo. We will give that logo to the Bank of Commerce to possibly put on the interior or at another location.

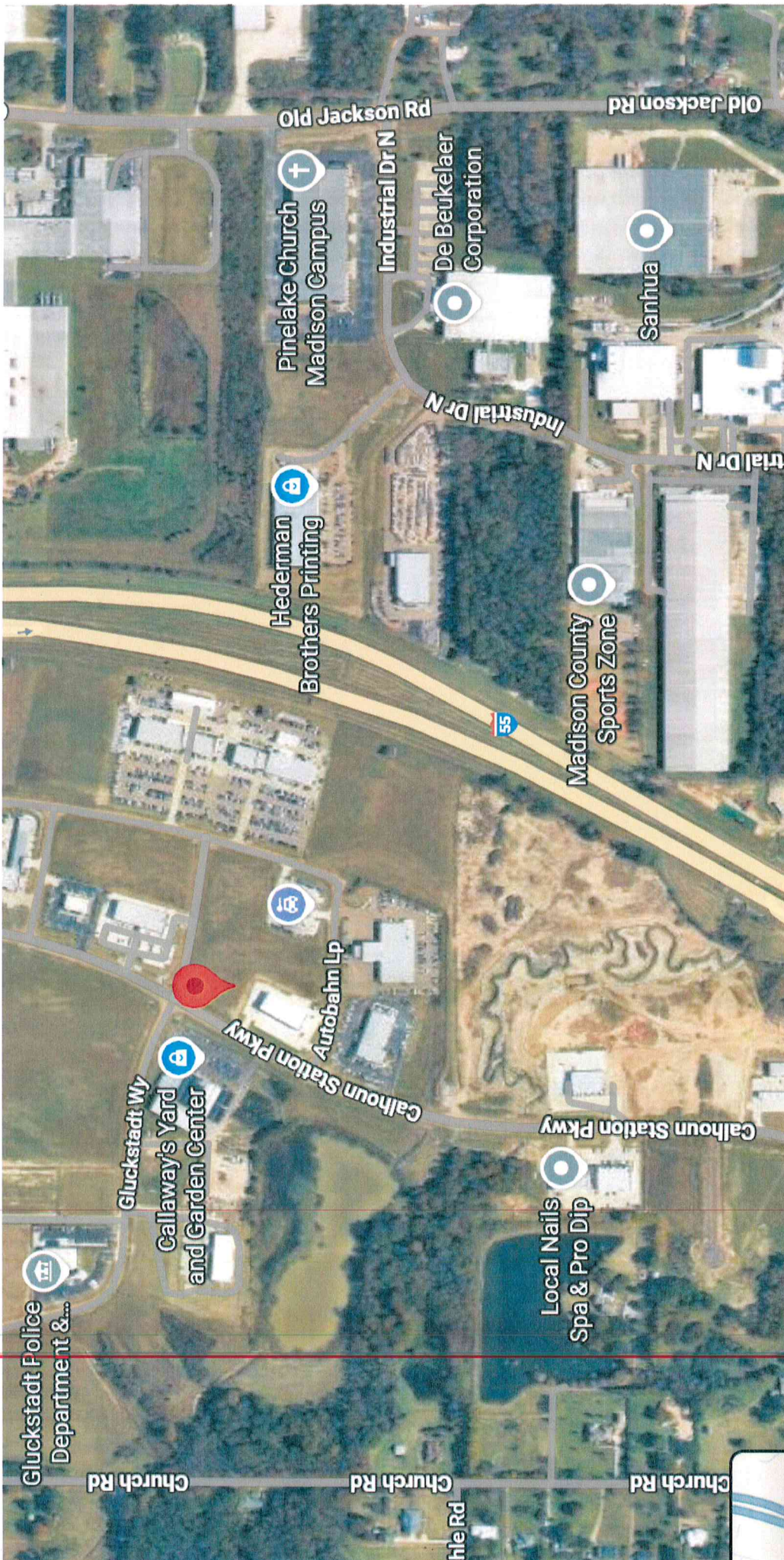
The new art is 30.19 square feet and can be centered above the one window and door. We would be so grateful if you would consider this as a possibility.

Thank you for your time and consideration.

---

Sincerely,  
Shea Goff





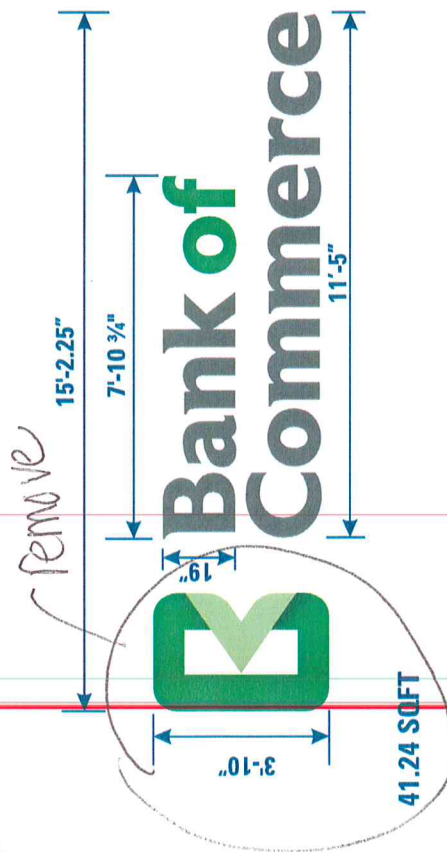


1st set of channel letters.

SCALE  
1/4" = 1'-0"

264 CALHOUN STATION PKWY\_GLUCKSTADT, MS

REVERSE ILLUMINATED CH. LETTERS / LOGO



NIGHT VIEW

Bank of  
Commerce

QTY. 1

REVERSE ILLUMINATED CHANNEL LOGO / LETTERS

-3" DEEP

-REVERSE ILLUMINATED WITH WHITE LEDS.

\*ADDITIONAL MANUFACTURING INFO ON FOLLOWING PAGE.

CUSTOMER TO PROVIDE FINAL ELECTRICAL CONNECTION.

PMS 2270 C PMS 2267 C PMS 7540 BLACK



SUPERIMPOSED PHOTO IS APPROXIMATE. (N.T.S.)



OPAQUE DIGITAL PRINT WITH  
THE "SHADOWS"

CUSTOMER: BANK OF COMMERCE	JOB NAME: REVERSE ILLUM. CH. LETTERS	DATE: 10/02/25
ADDRESS: 264 Calhoun Station Pkwy	CITY/STATE: Gluckstadt, MS 39110	REV:
4318-1/ASJ_BANK_OF_COMMERCE_(gluckstadt_rev_ch_letters).cdr	SALES: BETSY LUKE	REL: 10/10/25
NOVALS:	W.O. #: 33410.01	



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MITCHELL SIGNS  
3208 HWY. 46 NORTH, WESTMINSTER, MS 39391  
PHONE: 601-462-7471, FAX: 601-462-7474, 1-800-467-5191  
<http://www.mitchellsigns.com>



2nd set of channel letters.

SCALE  
1/4" = 1'-0"

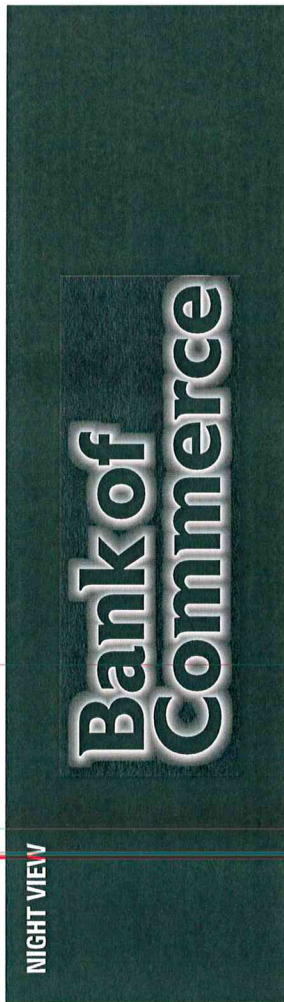
264 CALHOUN STATION PKWY \_ GLUCKSTADT, MS

REVERSE ILLUMINATED CH. LETTERS / LOGO



31.72 SQFT

NIGHT VIEW



QTY. 1

REVERSE ILLUMINATED CHANNEL LETTERS

-3" DEEP

-REVERSE ILLUMINATED WITH WHITE LEDS.

\*ADDITIONAL MANUFACTURING INFO ON FOLLOWING PAGE.

CUSTOMER TO PROVIDE FINAL ELECTRICAL CONNECTION.



SUPERIMPOSED PHOTO IS APPROXIMATE. (N.T.S.)

CUSTOMER: BANK OF COMMERCE	JOB NAME: REVERSE ILLUM. CH. LETTERS	DATE: 10/02/25
ADDRESS: 264 Calhoun Station Pkwy	CITY/STATE: Gluckstadt, MS 39110	REV:
4318-TASJ_BANK_OF_COMMERCE_(gluckstadt_rev_ch_letters).cdr	SALES: BETSY LUKE	REL: 10/10/25
W.O. #: 33410.01		

NOVALS:

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PHONE: 601-482-7471 | FAX: 601-482-7474 | 1-800-461-2471  
<http://www.mitchellsigns.com>

MITCHELL SIGNS

U.S. PATENT & TRADEMARK OFFICE

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U.S. PATENT & TRADEMARK OFFICE

**APPLICATION FOR SIGN PERMIT, CITY OF GLUCKSTADT**  
**A SKETCH OF PROPOSED SIGN(S) INCLUDING DIMENSION, LETTERING AND COLOR(S)**  
**MUST ACCOMPANY APPLICATION FOR ISSUANCE OF PERMIT**

NAME OF BUSINESS: BANK OF COMMERCE DATE: 11/25/25

STREET ADDRESS OF SIGN: 264 Calhoun Station Parkway.

IF WALL SIGN #1:	FRONT FOOTAGE OF BUILDING:	SIGN PERMIT NO.
SQ. FOOTAGE OF SIGN: <u>31.72</u>	<u>20'</u>	
ELEVATION: <u>22.3</u> (NORTH/SOUTH/EAST/WEST)	(width of exterior wall of owned/leased space where business sign is to be placed)	

IF WALL SIGN #2:	FRONT FOOTAGE OF BUILDING:	SIGN PERMIT NO.
SQ. FOOTAGE OF SIGN:		
ELEVATION: (NORTH/SOUTH/EAST/WEST)	(width of exterior wall of owned/leased space where business sign is to be placed)	

IF WALL SIGN #3:	FRONT FOOTAGE OF BUILDING:	SIGN PERMIT NO.
SQ. FOOTAGE OF SIGN:		
ELEVATION: (NORTH/SOUTH/EAST/WEST)	(width of exterior wall of owned/leased space where business sign is to be placed)	

\*\*\*\*\*

IF GROUND SIGN #1:	HEIGHT:	SIGN PERMIT NO.
SQ. FOOTAGE OF SIGN ON ONE SIDE:	SET BACK:	

IF GROUND SIGN #2:	HEIGHT:	SIGN PERMIT NO.
SQ. FOOTAGE OF SIGN ON ONE SIDE:	SET BACK:	

**ALL GROUND SIGNS REQUIRE LANDSCAPING AND SITE PLANS, AS REQUIRED BY THE CITY ORDINANCE.**

\*\*\*\*\*

IF TEMPORARY SIGN #1:	45 DAY TEMPORARY 7 DAY TEMPORARY	SIGN PERMIT NO.
LOCATION OF SIGN:		
PERMIT BEGINS (DATE):	28 DAY TEMPORARY	
PERMIT EXPIRES (DATE):	54 HR GARAGE SALE	



IF TEMPORARY SIGN #2:	_____ 45 DAY TEMPORARY _____ 7 DAY TEMPORARY _____ 30 DAY TEMPORARY _____ 54 HR GARAGE SALE	SIGN PERMIT NO.
LOCATION OF SIGN:		
PERMIT BEGINS (DATE): _____		
PERMIT EXPIRES (DATE): _____		

OWNER'S NAME/ADDRESS:	CONTRACTOR'S NAME/ADDRESS:
<u>Bank of Commerce</u>	<u>Mitchell Signs, Inc.</u>
<u>662-459-0123</u>	<u>601-482-7471</u>
TELEPHONE NO.	TELEPHONE NO.
<u>zach.luke@bankcom.com</u>	<u>shea.goff@mitchellcompanies.com</u>
EMAIL ADDRESS	EMAIL ADDRESS

I HEREBY CERTIFY THAT I AM THE OWNER, OR THE OWNER'S AGENT FOR THE PURPOSE OF APPLYING FOR THIS/THESE PERMIT(S) AND THE INFORMATION SET FORTH ABOVE IS TRUE AND CORRECT AND THE SAME MAY BE UTILIZED FOR ALL PURPOSES, INCLUDING TAX ASSESSMENT AND LEVY.

Shea Goff

SIGNATURE (OWNER/CONTRACTOR/AGENT)

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

ELECTRICIAN'S SIGNATURE

STAFF DETERMINATION:

\_\_\_\_\_  
\_\_\_\_\_

{STAMP}



## CITY OF GLUCKSTADT

MISSISSIPPI

PUBLIC WORKS DEPARTMENT

### MEMORANDUM

---

**TO:** Mayor & Board of Alderman

**FROM:** Buckner, Chris, Public Works Director

**DATE:** 1/6/26

**SUBJECT:** Request for Approval, Congestion Mitigation Project Application

---

This memo is to request approval from the Mayor and Board to apply for a traffic congestion mitigation project grant through the CMPDD MPO Transportation Grant Program. Should this application be selected, the project will involve improvements to Calhoun Station Parkway / Dees Way at the Gluckstadt Rd intersection. The primary goal will be to reduce peak hour congestion and delays at the intersection.

The terms of the grant are an 80/20 match of federal funds and local (city) funds for the construction portion of the project. The total estimated costs for the project are federal at \$760,000.00 and local at \$460,000.00, bringing the project grand total to \$1,220,000.00.

If you have any questions, please feel free to contact me.

**MAYOR**

Walter C. Morrison, IV

**CITY CLERK**

Lindsay Kellum

**POLICE CHIEF**

Barry Hale

**MUNICIPAL COURT  
CLERK**

Stephanie Gerlach

**PLANNING & ZONING  
ADMIN**

Caine Dearman

**BUILDING OFFICIAL**

Christian Hall

**PUBLIC WORKS**

Chris Buckner

**CITY OF GLUCKSTADT**  
MISSISSIPPI



**343 DISTRIBUTION DRIVE  
GLUCKSTADT, MS 39110**

**ALDERMEN**

Miya Bates

Jayce Powell

Chip Williams

John Taylor

Jessie Campbell

January 30, 2026  
Lesley Callender  
Central MS Planning and Development District  
1020 Centre Pointe Boulevard  
Pearl, MS 39208

Re: Surface Transportation Block Grant Program  
Congestion Mitigation Project Application  
Gluckstadt Road at Calhoun Station Parkway Capacity Improvements Project  
City of Gluckstadt, Mississippi

Dear Lesley,

Please find enclosed an application for a Surface Transportation Block Grant Program, Congestion Mitigation Project to perform capacity improvements to the intersection of Gluckstadt Road and Calhoun Station Parkway/Dees Way in the City of Gluckstadt, Mississippi. These improvements consist of the construction of turn lanes, drainage improvements and traffic signal improvements. On behalf of the City of Gluckstadt, I would like to thank you for the opportunity to submit a project for the referenced grant program. Please feel free to contact me with any questions concerning this application.

Sincerely,

---

Walter C. Morrison, IV  
Mayor

**WHEREAS**, Federal Transportation Program funds have been made available for transportation improvements within the Jackson Urbanized Area; and

**WHEREAS**, City of Gluckstadt  
*Name of local entity (municipality or county)* has selected a project to submit to the Jackson Metropolitan Planning Organization (MPO) for consideration for funding; and

**WHEREAS**, the selected project includes capacity improvements to the intersection of  
*Brief project description*  
Gluckstadt Rd & Calhoun Station Pkwy including the construction of additional turn lanes

**WHEREAS**, the City of Gluckstadt  
*Name of local entity (municipality or county)* hereby requests Federal STBG funding from the Jackson MPO in the amount of 760,000; and  
*\$ Amount of requested STBG funding*

**WHEREAS**, the City of Gluckstadt  
*Name of local entity (municipality or county)* agrees to provide local matching funds for the project in the amount of 460,000. The local entity agrees to provide  
*\$ Amount of local match*  
said matching funds in a timely manner.

**NOW, THEREFORE, BE IT RESOLVED:** the City of Gluckstadt  
*Name of local entity (municipality or county)* acknowledges if said project is selected for funding through the MPO selection process said project is subject to all applicable Federal and State laws and regulations regarding STBG funding, as well as subject to the rules and procedures established by the Jackson MPO regarding approved STBG projects.

Mayor Walter C. Morrison, IV

Print Name (Chief Elected Official or Board President)

\_\_\_\_\_  
Signature (Chief Elected Official or Board President)

ATTEST:

\_\_\_\_\_  
Signature (City Clerk/Board Attorney/or County Administrator)

\_\_\_\_\_  
Date

## Congestion Mitigation Project Application

### CMPDD MPO Transportation Grant Program

The following information must be completed for all **Congestion Mitigation** proposed MPO projects. MPO staff will use the information contained in the project application to assign points to proposed projects based on the Project Submittal Guidelines. The establishment of project eligibility and each project score will then be used by the Intermodal Technical Committee and Metropolitan Planning Policy Committee to program projects to be funded with MPO funds. A separate application must be submitted for each type of project. For example, do not combine a street widening project with a traffic signal improvement project.

#### Applicant Information

1. Project Sponsor City of Gluckstadt
2. Sponsor Contact Mayor Walter C. Morrison, IV
3. Telephone 769-567-2306 4. Email Walter.Morrison@gluckstadt.net
5. Mailing Address 343 Distribution Drive Madison, MS 39110
6. Additional Sponsors \_\_\_\_\_
7. Co-Sponsor Contact Name(s) \_\_\_\_\_

#### Project Description

8. Project Title Gluckstadt Rd @ Calhoun Station Pkwy Capacity Improvements Project
9. Project Type Capacity Improvement
10. County Madison 11. Municipality City of Gluckstadt
12. Small Municipality Yes
13. Small Municipality population according to the latest U.S. Census 3,208
14. Project Location Gluckstadt Road
15. Functional Class Principal Arterial
16. Is this project located on the National Highway System (NHS)? Yes

17. Is this project located in a Historic Preservation District?

No

---

18. Detailed Project Description

This project will involve geometric improvements to the signalized intersection of Gluckstadt Road with Calhoun Station Parkway/Dees Way. The primary objective is to reduce peak hour congestion and delays along Gluckstadt Road. These improvements will include the addition of a northbound right turn lane on Dees Way, a southbound right turn lane on Calhoun Station Parkway, traffic signal modifications, and the removal and replacement of concrete driveways, curb and gutter, drainage inlets and pipe. For planning purposes, we are assuming construction activities will take place on the west side of Calhoun Station Parkway and the east side of Dees Way. We anticipate approximately 20' of right-of-way (ROW) will be needed from 1 parcel. Utilities will also need to be relocated to accommodate the road widening. Due to existing constraints such as driveways, parking lot offsets and other planning and zoning issues as well as no existing bicycle or pedestrian facility to connect to, these items will not be considered as part of this project. These improvements will improve safety at the intersections. The existing traffic signal meets Warrants 1, 2 and 3 for both the existing and proposed geometric conditions.

## Project Costs

### 19. Overall Project Budget

<u>Description</u>	<u>Federal Funds</u>	<u>Local Funds</u>
Environmental	\$ _____	\$ 25,000
Design	\$ _____	\$ 125,000
Right-of-Way Acquisition	\$ _____	\$ 120,000
<u>Eligible for MPO funding</u>		
Construction Engineering	\$ 100,000	\$ 25,000
Construction	\$ 660,000	\$ 165,000
Other, please specify		
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
<b>TOTAL Estimated Project Cost</b>	<b>760,000</b>	<b>460,000</b>

**MPO Funds Requested***Construction & Construction Engineering Costs Only*

	<u>Amount</u>	<u>%</u>
20. Federal Funds Requested	\$ 760,000	80
		<i>Can't be more than 80% of construction costs</i>
21. Matching Funds Provided	\$ 190,000	20
		<i>Can't be less than 20% of construction costs</i>
22. TOTAL Construction Phase Costs	\$ 950,000	100%
23. Source of Matching Funds		
City of Gluckstadt General Funds and Bonds		

24. Date Available 2027

**Audit Status**

## 25. Audit Status

25 a. What was the date of the jurisdiction's last completed audit and what fiscal year was included in the audit?	10/23/2023
	<i>Date Completed</i>
	<i>Audit for Fiscal Year</i>
25 b. Has the audit been filed with the State Auditor's Office?	Yes
25 c. Did the latest audit identify any findings related to the expenditure of federal funds by the jurisdiction?	No



## Project Schedule

## 26. Milestone Dates

Completion of Preliminary Design	04/01/2027
Completion of Environmental Clearances	10/01/2027
Completion of Final Design	04/03/2028
Initiation of Right-of-Way Plan Review	04/03/2028
Completion of Right-of-Way Plan Review	10/02/2028
Initiation of Utilities Relocation	10/02/2028
Completion of Utilities Relocation	04/02/2029
Completion of Plans, Specifications and Estimates and/or Authorization for Advertisement	06/01/2029
Anticipated Construction Advertisement Date or Purchase Date	09/03/2029

### Congestion Management Process (CMP) Index Rating

## 27. CMP Index Rating

<u>Road Segment</u>	<u>CMP Index Rating</u>
Gluckstadt Road (Planters Row to Interstate 55)	8

*Average CMP Index Rating*

*To be completed by  
MPO Staff*

**Long-Range Plan Project ID**

28. Metropolitan Transportation Plan Project ID #

119

**Project Readiness**

29. Project Design

*Yes or No*

29 a. Has preliminary design work been created for the proposed project?

Yes

29b. *If Yes*, please provide a brief description of the work performed to-date.

A traffic study has been performed at the intersections of Gluckstadt Road at Calhoun Station Parkway/Dees Way. The analyses showed the intersection delay decreased by an average 57% during the PM peak hour with the additional improvements considered. Traffic Signal Warrants analyses have also been performed. Preliminary topographical survey and geotechnical and environmental investigations have already been performed.

30. Environmental

*Yes or No*

30 a. To the best of your knowledge, does the proposed project meet a categorical exclusion?

Yes

30 b. To the best of your knowledge, does the proposed project require the development of an Environment Assessment or Environmental Impact Statement?

No

30 c. Has the project received environmental approval?

No

30 d. Please provide a brief explanation of why the proposed project meets a categorical exclusion or why an Environment Assessment or Environmental Impact Statement is required.

Since this project involves adding turn lanes on an existing roadway within a developed urban environment, we believe the impact will be minimum at most and anticipate a categorical exclusion.

31. Right-of-Way Acquisition

Yes or No

31 a. To the best of your knowledge, does the proposed project require right-of-way acquisition?

Yes

31 b. *If Yes*, how many parcels are involved?

1

32. Utility Relocation

Yes or No

32 a. To the best of your knowledge, does the proposed project require utility relocation?

Yes

32 b. What utilities will have to be relocated?

AT&T Fiber Line  
C-Spire Fiber Line

33. Describe any potential delays or obstacles that have been identified that would interfere with the schedule for this project or the readiness of the project to proceed to construction.

The only obstacles that we think we may encounter will be working with property owner during the right-of-way acquisition phase as well as working with utility companies to relocate impacted utilities.

**Livability**

*If points are awarded based on proposed livability elements, those elements should not be removed during the construction phase for reasons such as budget overages without prior approval from the MPO. Points awarded for livability factors below must be outlined in the overall project budget.*

Yes or No

34. Does the proposed project include enhancements to landscaping and/or streetscape?

No

---

35. If yes, provide a brief explanation of the enhancements to landscaping and/or the streetscape included in the project.

36. Please indicate whether or not the proposed project includes the following elements:

Yes or No

The proposed project includes a Signed Bike Route

No

---

The proposed project includes Sidewalks

No

---

The proposed project includes Paved Shoulders

Yes

---

The proposed project includes Striped Lanes for bicycle travel

No

---

The proposed project includes Shared Use Facilities for bicycle and/or pedestrian travel

No

---

The proposed project is located adjacent to existing bicycle and/or pedestrian facilities, but the proposed project does not include enhancements to the existing facilities

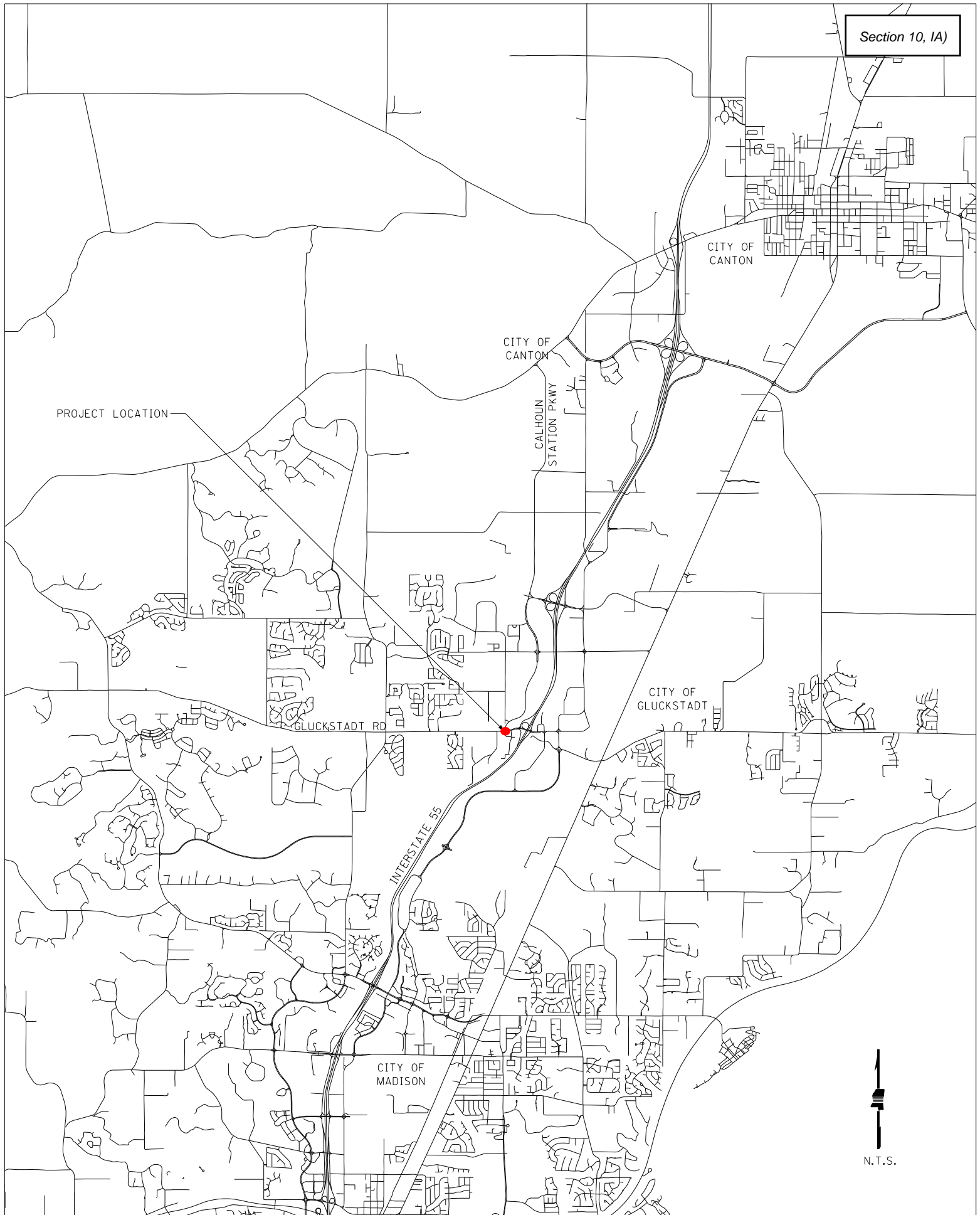
No

---

The livability enhancements included as part of the proposed project will connect to an existing bicycle and/or pedestrian facility

No

---



## Gluckstadt Road @ Calhoun Station Parkway - Estimated Cost of Construction

Item	Removal		\$/Unit	Total
	Total	Unit		
Inlets	4	4	\$2,500.00	\$10,000.00
curb & gutter	500	500	\$25.00	\$12,500.00
driveways	2	100	\$75.00	\$15,000.00
36" RCP	50	50	\$25.00	\$1,250.00
			Sub-Total	\$38,750.00

Item	Replacement		\$/Unit	Total
	Total	Unit		
Inlets	4	EA	4	\$5,000.00
curb & gutter	500	LF	500	\$40.00
driveways (30', ~100 SY)	2	SY	100	\$150.00
36" RCP	50	LF	50	\$150.00
			Sub-Total	\$77,500.00

Item	Unit	Quantity	\$/Unit	
apshalt (assume 8.5")	TON	607.75	\$185.00	\$112,433.75
crushed stone (6")	TON	421.875	\$85.00	\$35,859.38
mill & overlay	LS	1	\$75,000.00	\$75,000.00
traffic signal upgrades	LS	1	\$150,000.00	\$150,000.00
striping	LS	1	\$35,000.00	\$35,000.00
excess excavation (3')	CY	1800	\$25.00	\$45,000.00
borrow (3')	CY	1800	\$35.00	\$63,000.00
structural excavation	CY	100	\$25.00	\$2,500.00

Sub-Total \$518,793.13

Total \$635,043.13

incidentals/inflation (10%) \$63,504.31

mob (10%) \$63,504.31

mot (5%) \$31,752.16

staking (5%) \$31,752.16

Total \$825,556.06

CE&amp;I (15%) \$123,833.41

Total Construction Cost \$949,389.47

Right-Of-Way		
Length	Width	Total Area
	300	20 6000
	Cost/SF	\$20
	Total	\$120,000.00

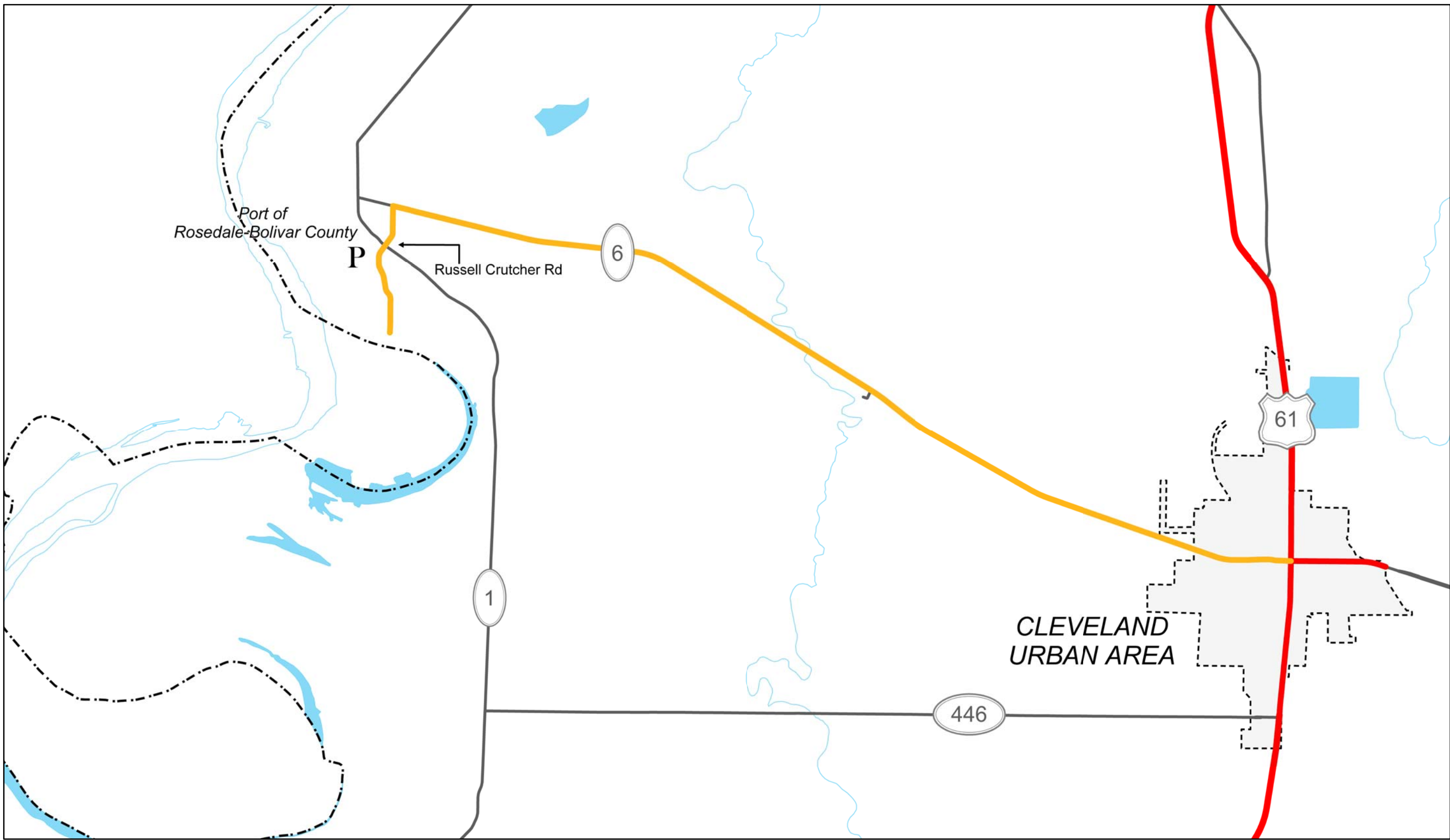
Design (15%) \$123,833.41

ROW (\$20/SF) \$120,000.00

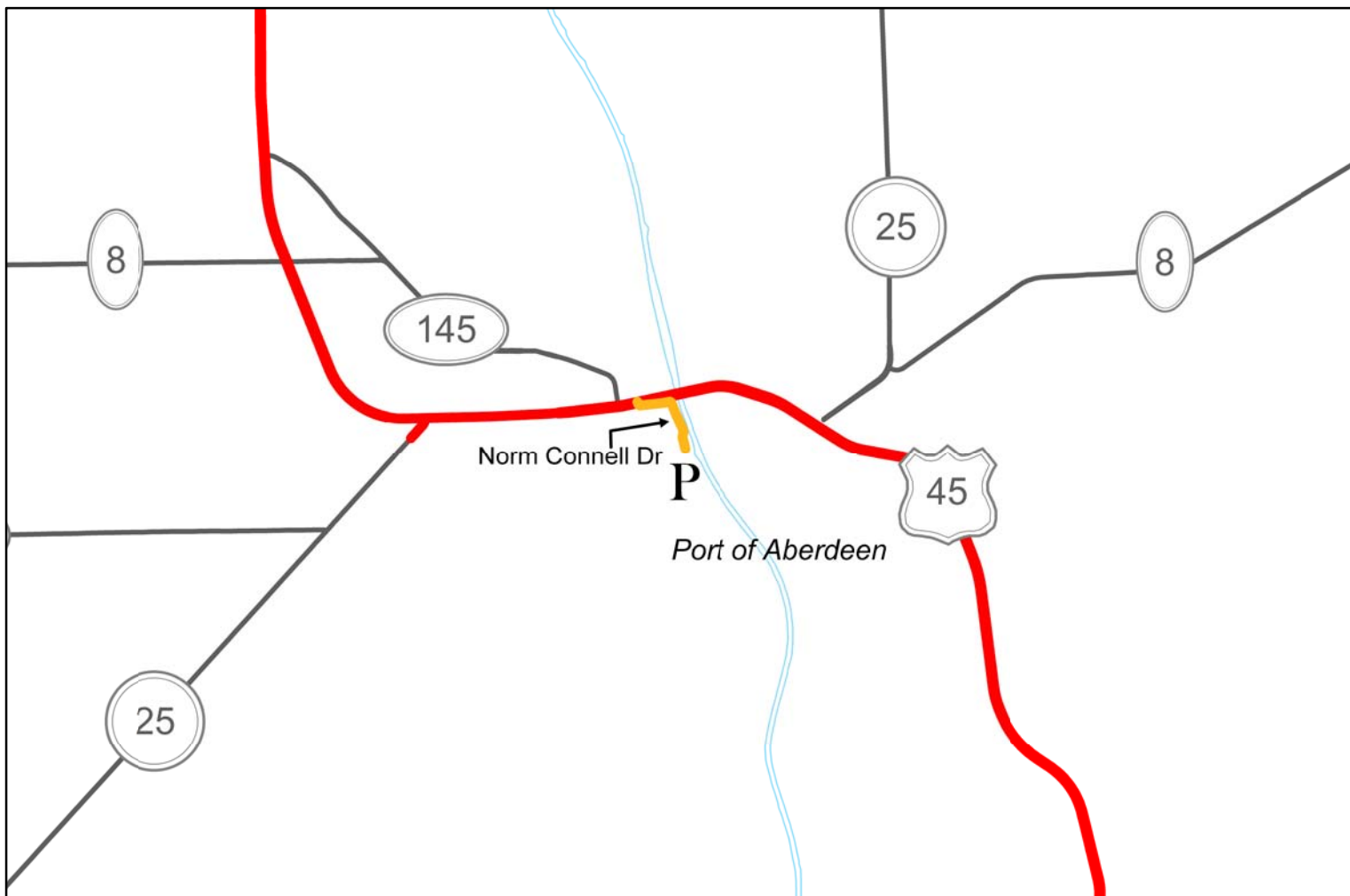
City Allocation for Construction (20%) \$189,877.89

Total City Allocation \$433,711.30

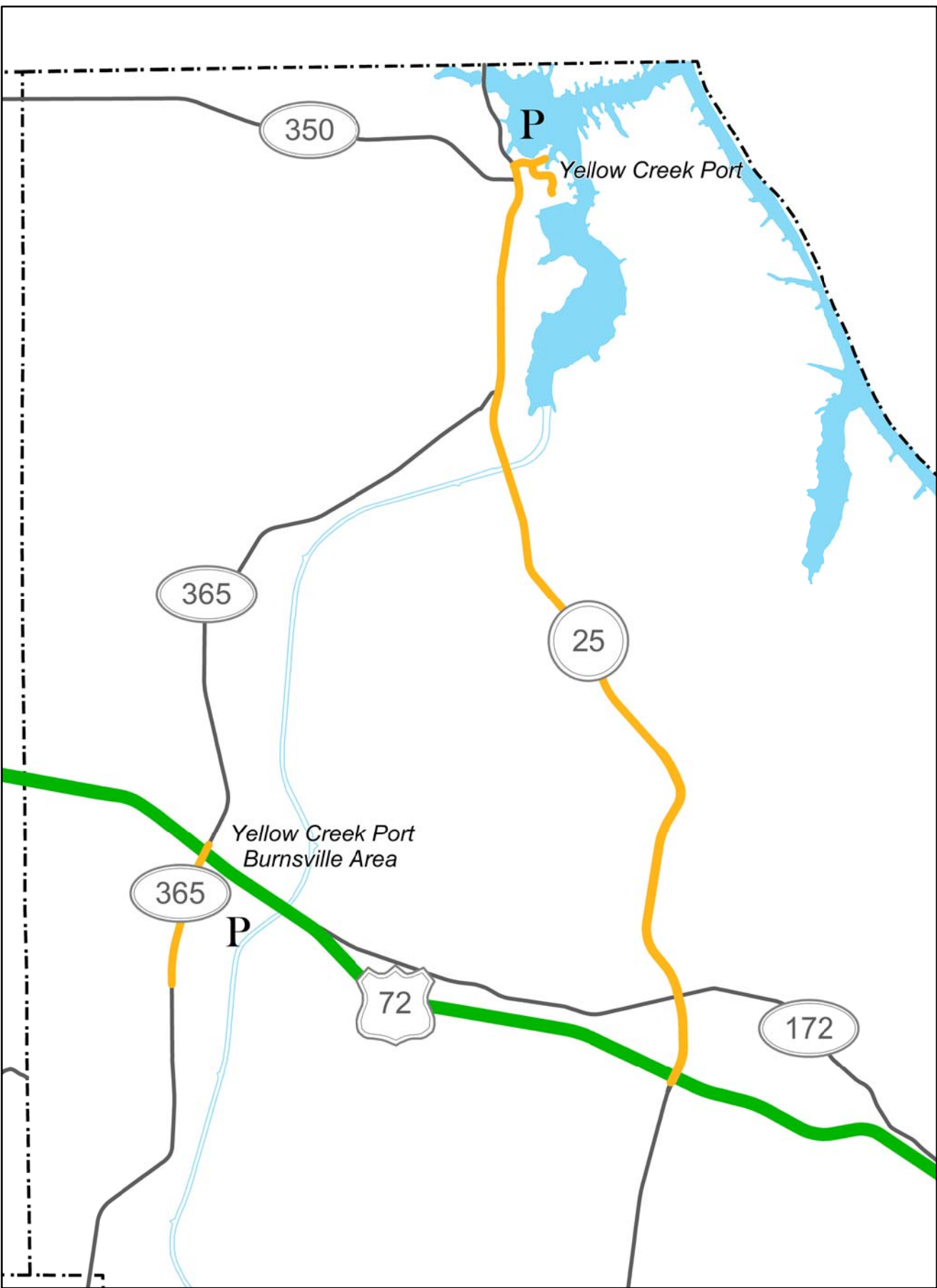




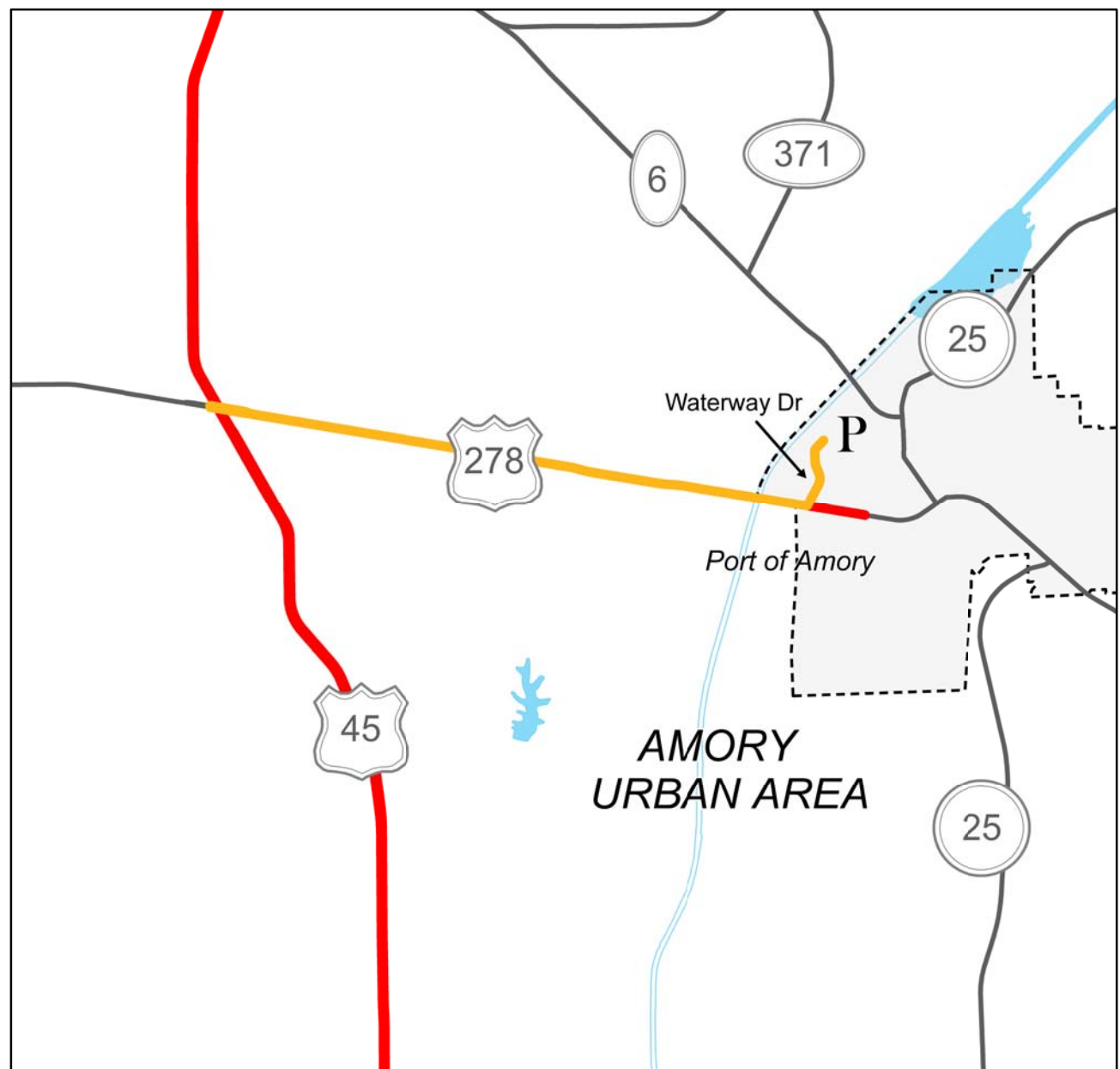
ROSEDALE AREA



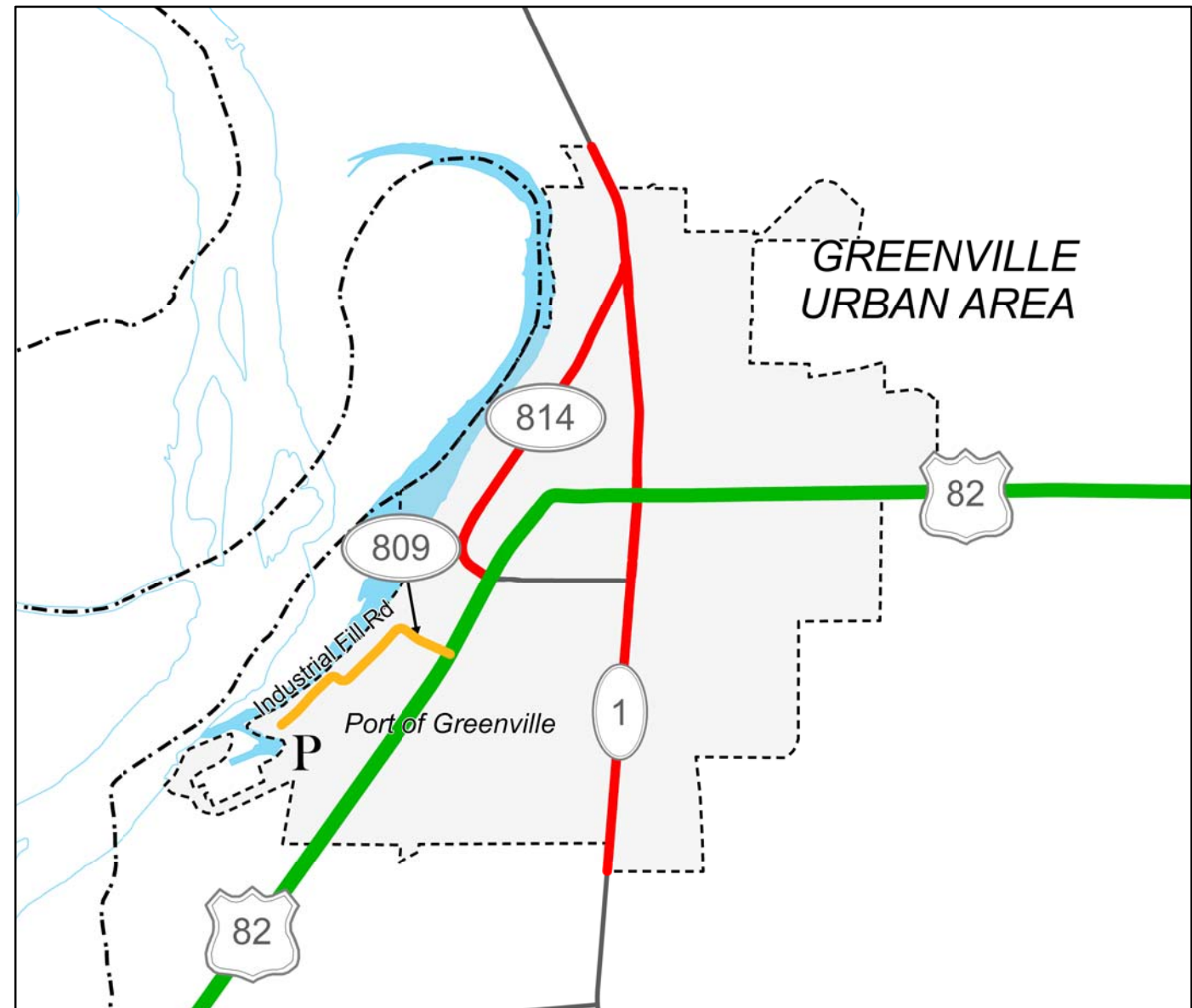
ABERDEEN AREA



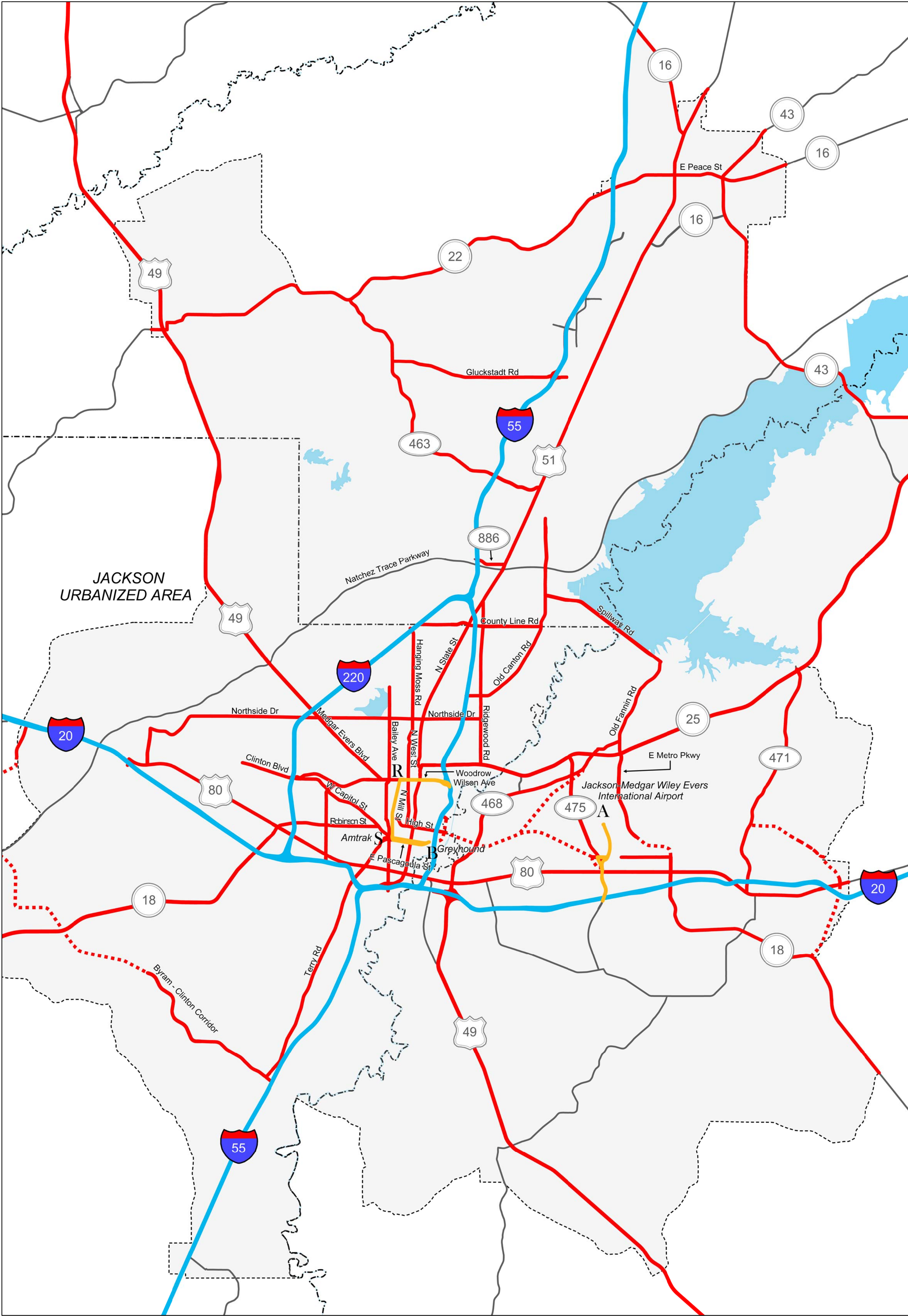
YELLOW CREEK PORT & BURNSVILLE AREA



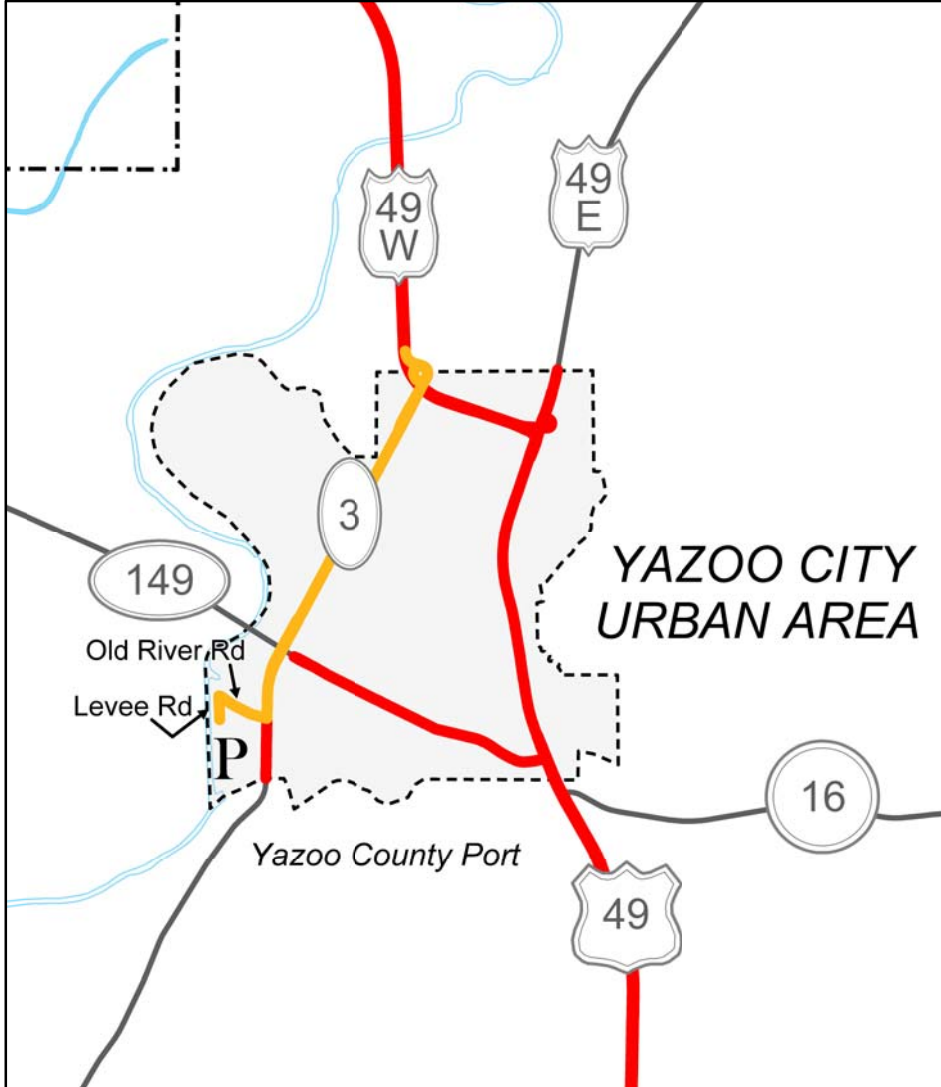
AMORY AREA



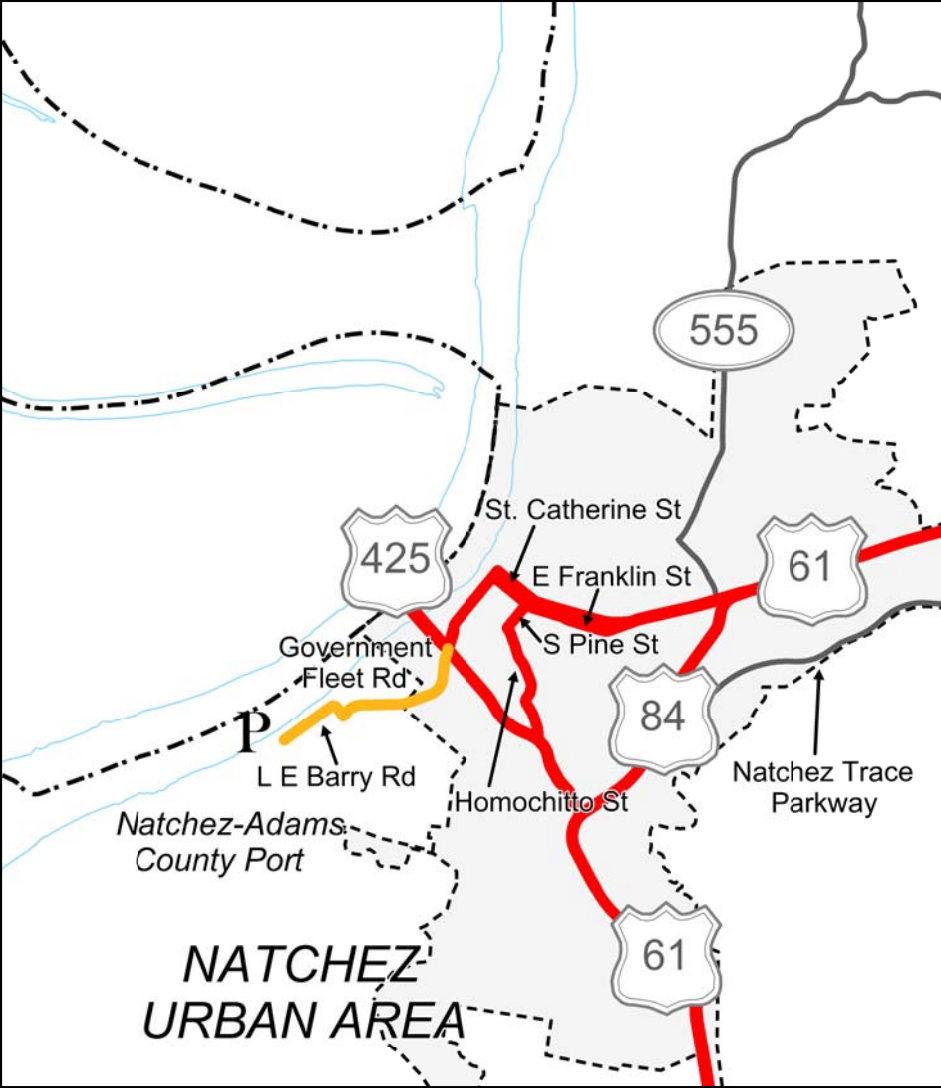
GREENVILLE AREA



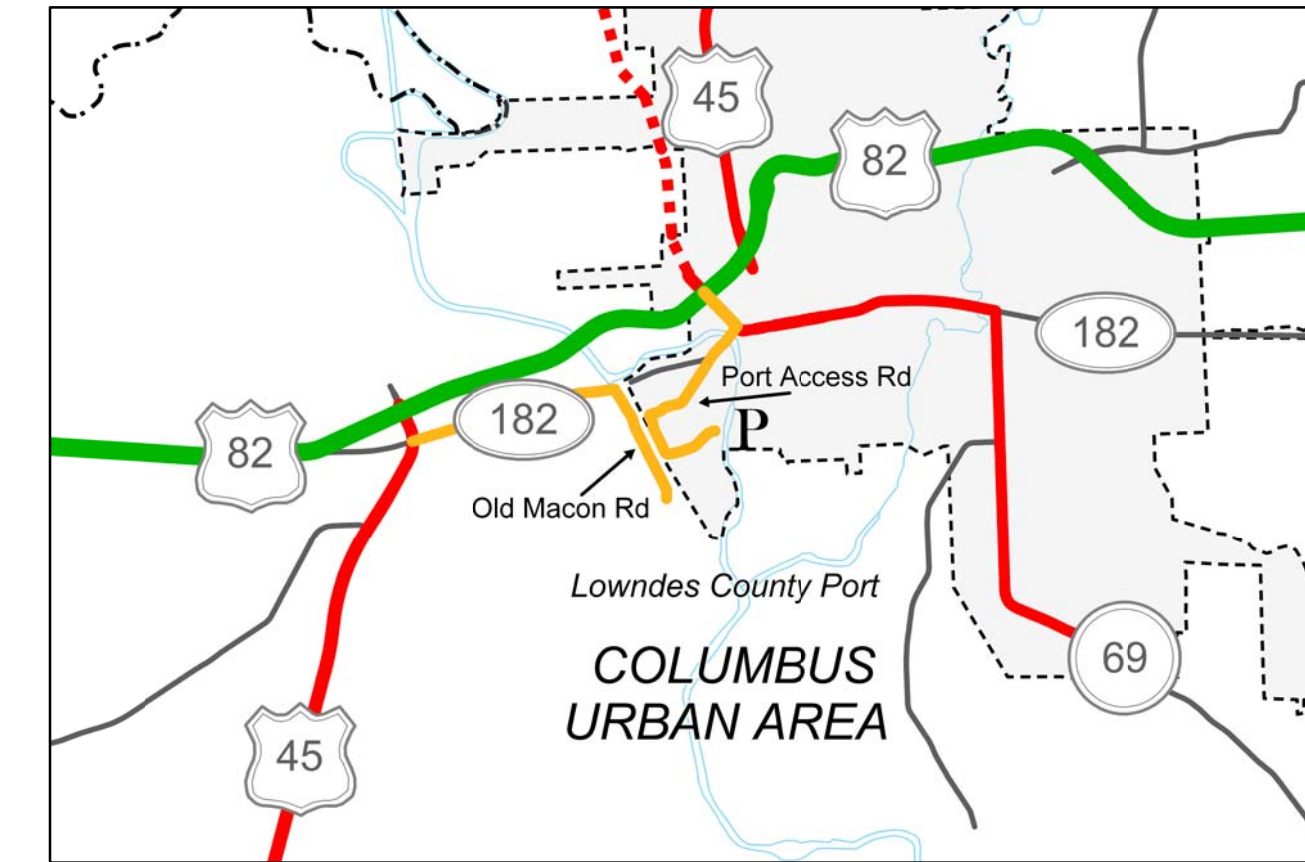
JACKSON URBANIZED AREA



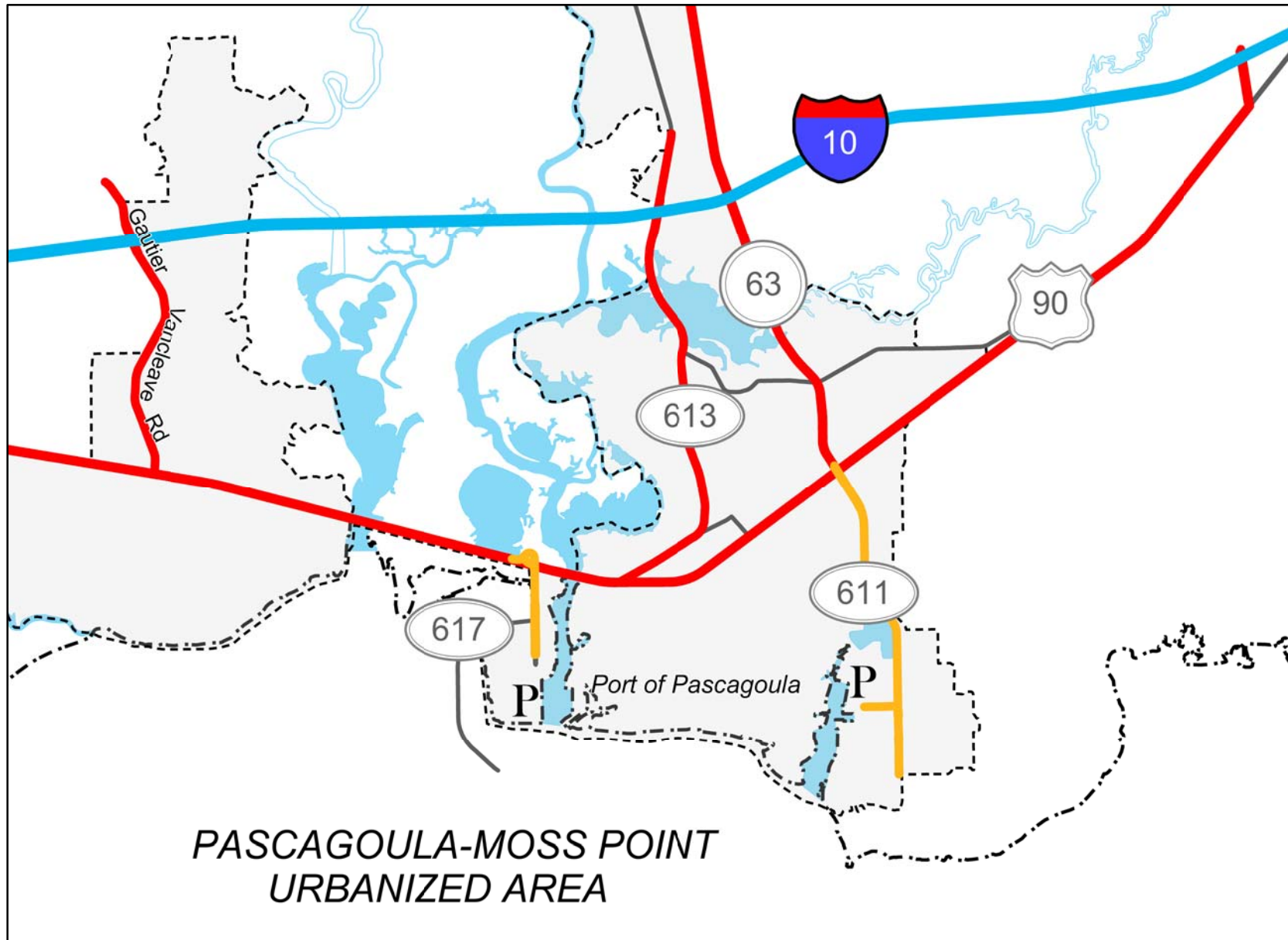
YAZOO CITY AREA



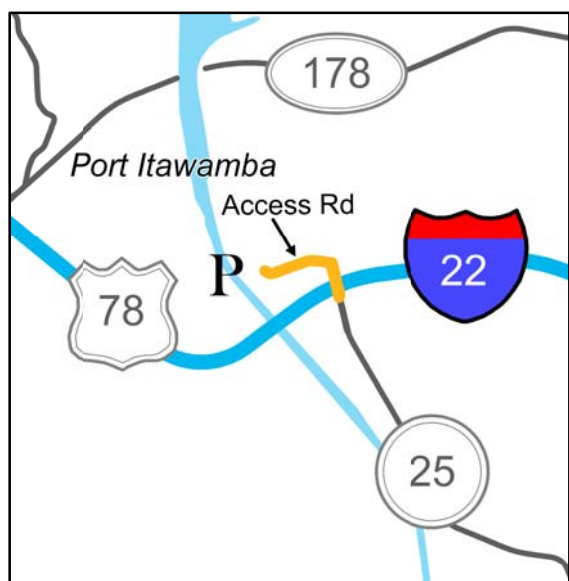
ADAMS COUNTY AREA



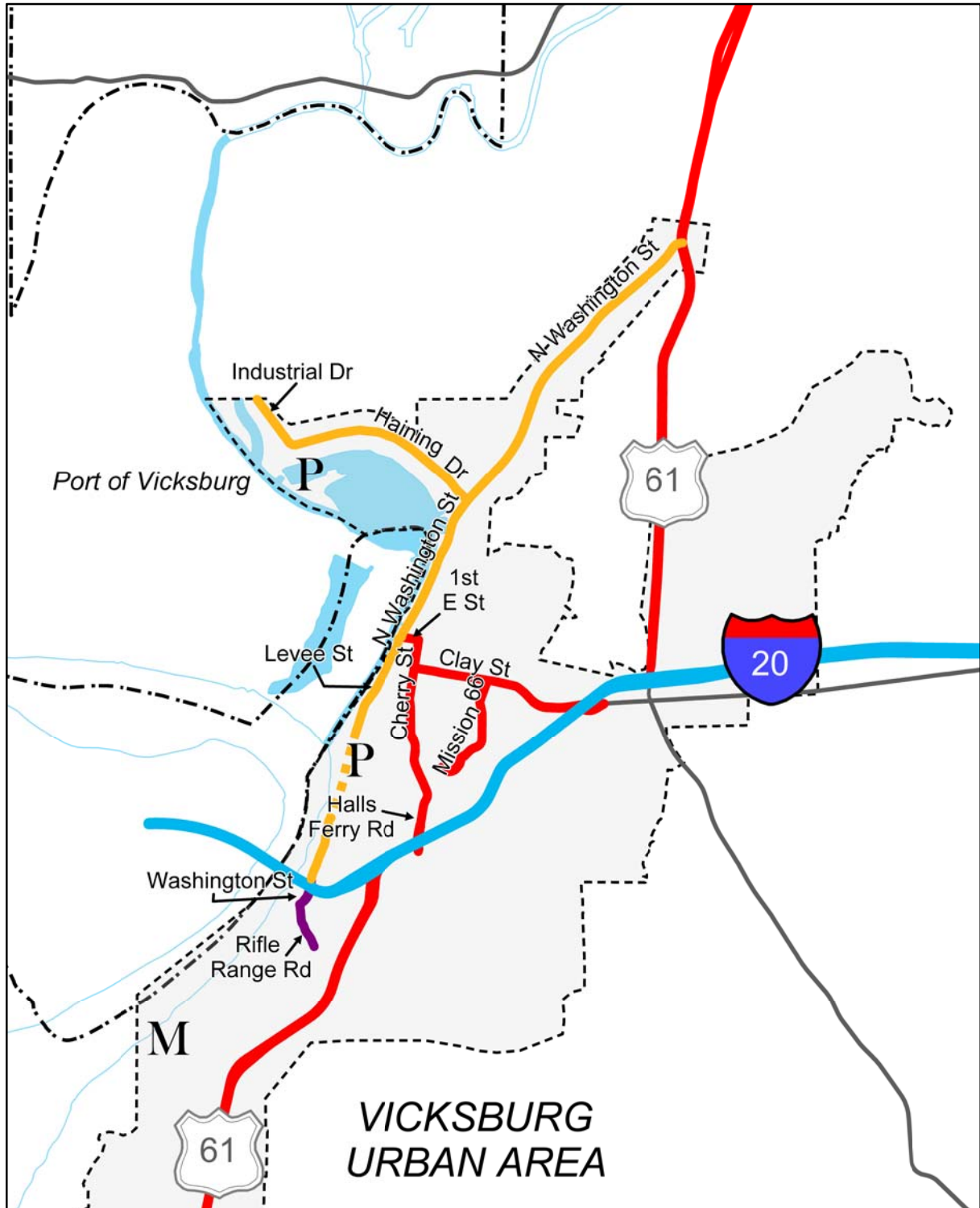
COLUMBUS AREA



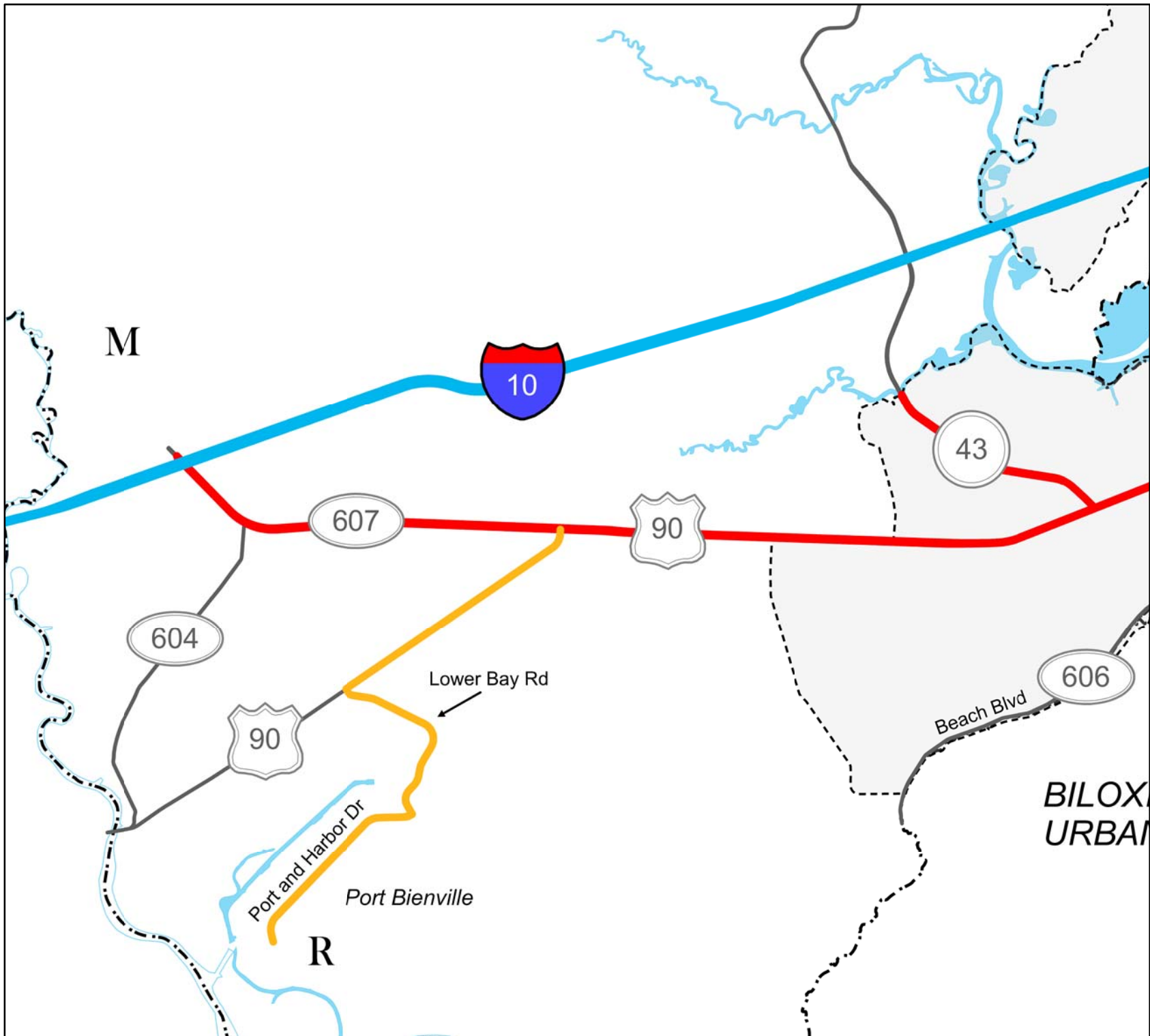
PASCAGOULA AREA



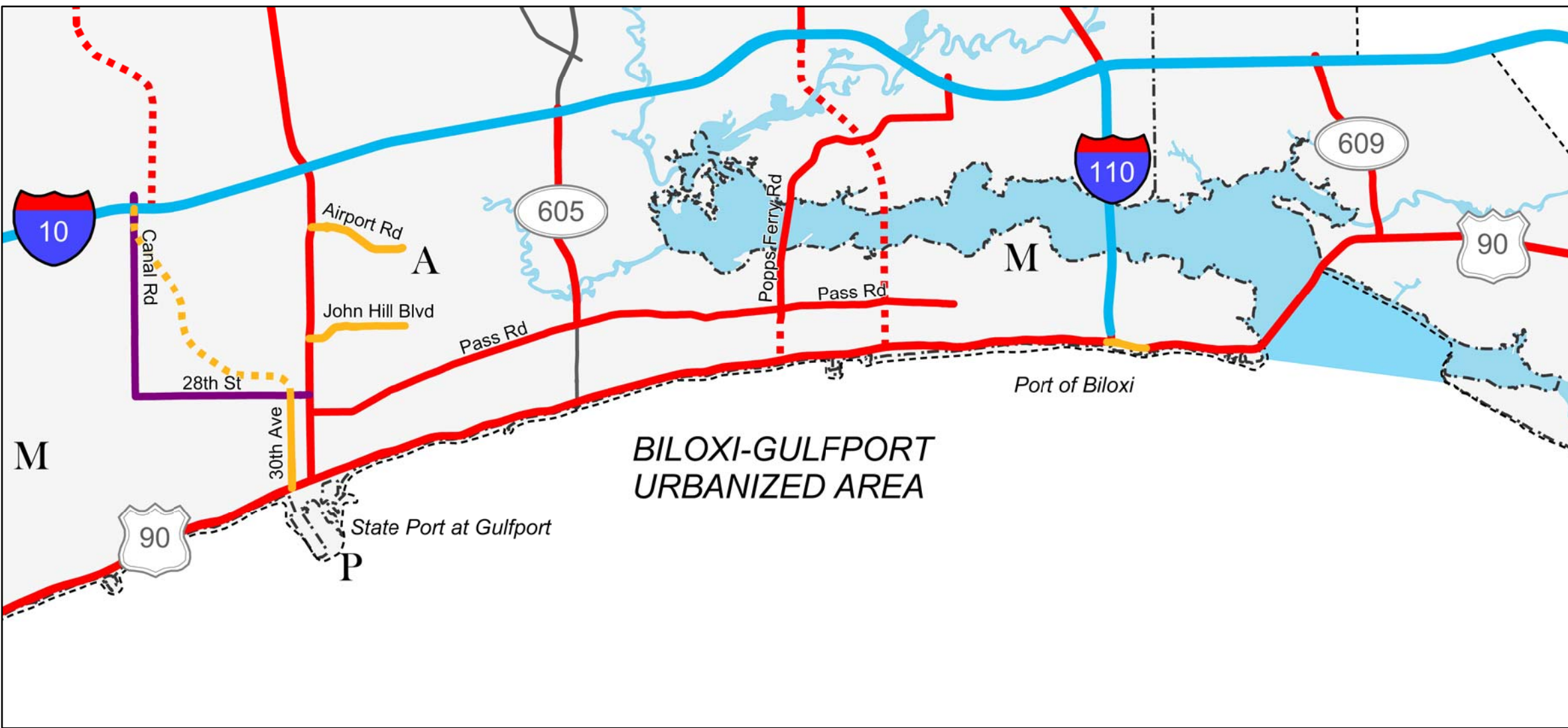
ITAWAMBA COUNTY AREA



VICKSBURG AREA



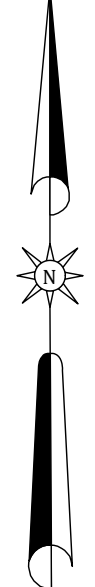
HANCOCK COUNTY AREA



GULFPORT-BILOXI AREA

SYMBOL LEGEND	
A	MAJOR AIRPORT
B	MAJOR BUS STATION
M	MILITARY INSTALLATION
P	MAJOR PORT
R	MAJOR TRUCK/RAIL
S	MAJOR AMTRAK STATION

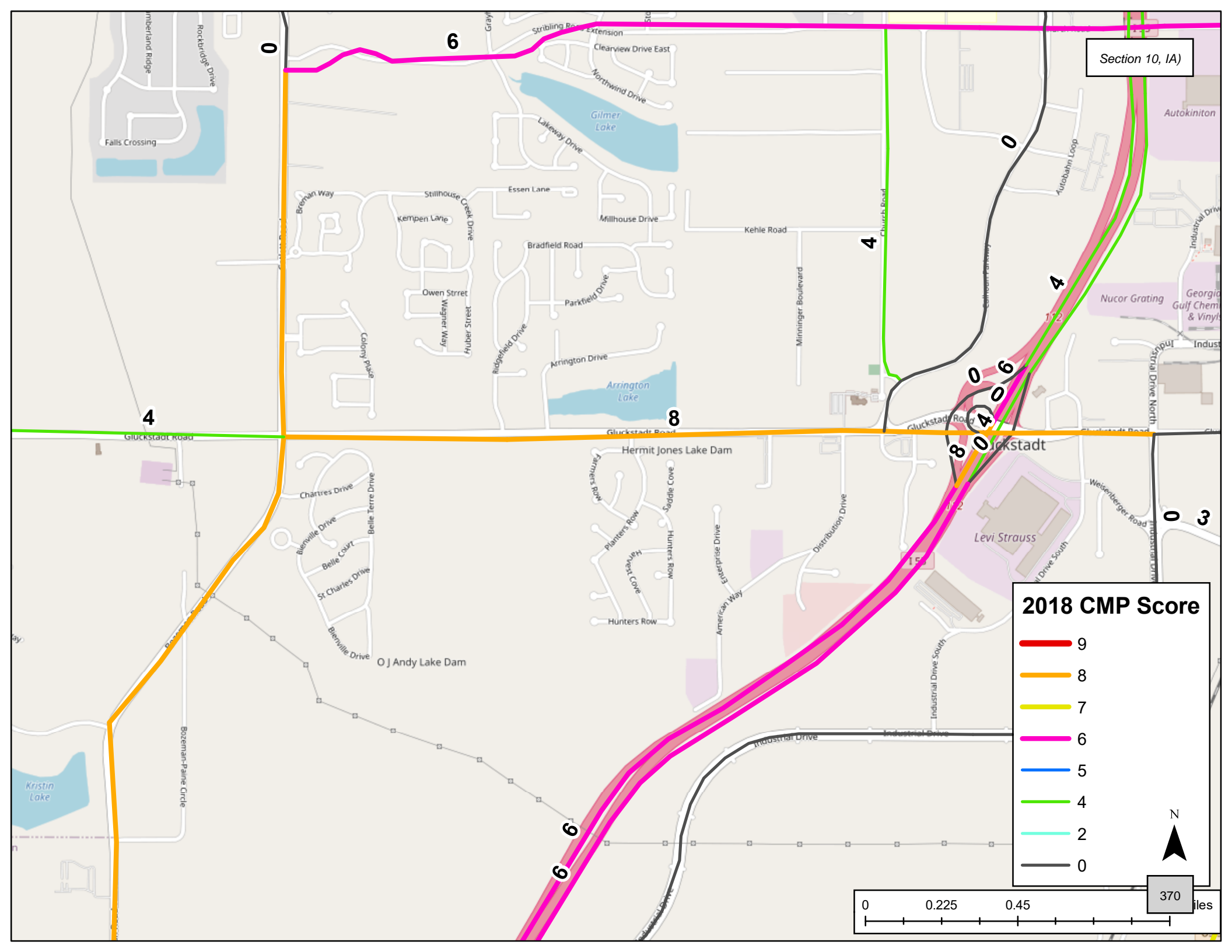
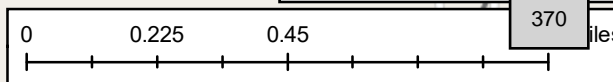
NATIONAL HIGHWAY SYSTEM COLOR LEGEND	
Blue line	INTERSTATE HIGHWAYS
Red line	STRAHNET ROUTES
Green line	CONGRESSIONAL HIGH PRIORITY CORRIDORS
Orange line	PRINCIPAL ARTERIALS
Purple line	STRAHNET CONNECTORS PRIORITY 1
Gray line	INTERMODAL CONNECTORS
Gray line	GRAY ROUTES INDICATE NON-HIGHWAYS





Section 10, 1A)

### 2018 CMP Score







## CITY OF GLUCKSTADT

MISSISSIPPI

PUBLIC WORKS DEPARTMENT

### MEMORANDUM

---

**TO:** Mayor & Board of Alderman

**FROM:** Chris Buckner, Public Works Director

**DATE:** 1/7/2026

**SUBJECT:** Authorization to Advertise for Term Bids

---

I request authorization from the Mayor and Board of Alderman to advertise for term bids for asphalt. I have attached a copy of the bid forms to give you an idea of the items proposed for bid.

The purpose for term bids is to streamline the purchasing process for the last 6 months of the 2026 budget. Please contact me if you have any questions.

BID FORM

To: Mayor and Board of Aldermen  
 City of Gluckstadt, Public Works  
 107 Lone Wolf Drive  
 Gluckstadt, Mississippi 39110

From: \_\_\_\_\_

(Name)

\_\_\_\_\_  
 (Address)

\_\_\_\_\_  
 (Email Address)

\_\_\_\_\_  
 (Phone #)

In accordance with the published Bid Notice, the undersigned does hereby agree to furnish the commodities, supplies, equipment, materials and/or services to the City of Gluckstadt, Mississippi, for the prices as shown on the attached listing. Unless otherwise indicated, prices will be F.O.B. Gluckstadt.

All prices submitted shall be good and valid from APRIL 1, 2026 THRU SEPTEMBER 30, 2026.

Acceptance by the Mayor and Board of Aldermen shall be sufficient to constitute a valid contract.

THIS, the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
 (Bidder)

By: \_\_\_\_\_

\_\_\_\_\_  
 (Title)

\_\_\_\_\_  
 (Signature)

## ADVERTISEMENT FOR BIDS

Notice is hereby given that the Mayor and Board of Aldermen of the City of Gluckstadt, Mississippi, will receive written and electronic sealed bids for the purchase of services, commodities, and/or supplies for Public Works and contracts for public construction as listed below. Bids will be received until the hour of **10:00 am., Tuesday, February 24, 2026**, in the Conference Room of the City of Gluckstadt Public Works Building located at 107 Lone Wolf Drive, Gluckstadt, MS, 39110.

Asphalt (FOB – Plant) (6 month)

Asphalt (FOB - City of Gluckstadt) (6 month)

Official bid documents can be downloaded and electric bids can be submitted at Central Bidding [www.centralauctionhouse.com](http://www.centralauctionhouse.com). For any questions relating to the electronic bidding process and to register, please call Central Bidding at 225-810-4814. All Bids that are mailed or hand delivered must be sealed and clearly marked “Sealed Bid” with the item you are bidding listed on the envelope. Please put only one bid form in each envelope. All bids shall be submitted in duplicate. Bids will only be accepted on forms provided by the City or downloaded from [www.centralbidding.com](http://www.centralbidding.com) and the prices quoted will be binding for the period from **APRIL 1, 2026 THRU SEPTEMBER 30, 2026, unless otherwise indicated**. Contracts for purchase will be made from the lowest and/or best bids submitted, but the Mayor and Board of Aldermen reserve the right to reject any and all bids, and accept or reject any part of a bid.

All bids properly submitted in accordance with this notice will be opened at **10:00 am, February 24, 2026** in the Conference Room of the City of Gluckstadt City Hall located at 343 Distribution Drive, Gluckstadt, MS 39110.

**Electronic Bidding:** [www.centralbidding.com](http://www.centralbidding.com)

**Hand Delivery:** City of Gluckstadt, Attn: Amber Trotter, 107 Lone Wolf Drive, Gluckstadt, MS 39110

**Mailing Address:** City of Gluckstadt, Attn: Amber Trotter, 107 Lone Wolf Drive, Gluckstadt, MS 39110

CITY OF GLUCKSTADT, MISSISSIPPI

BY: /s/Lindsay Kellum

Lindsay Kellum, City Clerk

Publish: January 22 and January 29, 2026

Furnish 2 proofs of publication/City of Gluckstadt

## INSTRUCTIONS TO BIDDERS

**PREPARATION OF PROPOSAL:** Only proposals submitted on the appropriate letterhead or Bid Proposal Form will be considered. Each proposal shall be legibly written, printed in ink or typed. In the case of conflict, words shall govern over figures. Proposals shall also clearly indicate the name or names of those person(s) or firm(s) submitting such proposal and the failure to sign a proposal will disqualify same. The bid price shall include all parts, labor, materials and related incidentals required to complete the work.

**All proposals shall be submitted in DUPLICATE and shall be addressed to:**

City of Gluckstadt  
107 Lone Wolf Drive  
Madison, MS 39110  
Attn: AMBER TROTTER

The outside of the envelope shall be clearly identified as a SEALED BID and marked with the item you are bidding along with the bidder's name and address. Bids for labor shall also include Certificate of Responsibility Number which must be clearly listed on the **outside** of the packaged sealed bid. Failure to do so will result in the bid being rejected.

**REJECTION OF PROPOSAL:** Proposals may be rejected in the case of any omission, alteration of forms, additions, or conditions not called for, unauthorized alternate bids, incomplete bids, erasures or irregularities of any kind.

**ACCEPTANCE AND/OR REJECTION OF BIDS:** Proposals will be compared on the basis of Total Base Bid or line item bid, as is appropriate. The City will also consider such factors as delivery time, parts availability, past performance of the bidder in doing business with the City, current or pending litigation between the City and the Contractor or vendor, should the bidder have held previous contracts with the City, and other relevant factors in determining which bid it deems as lowest and best.

The City reserves the right to reject any and all bids and to waive minor irregularities and technicalities which do not detract from the best interests of the City.

When necessary to ensure ready availability of services, supplies, or for public projects and the timely completion of public projects, the Mayor and Board of Aldermen reserve the right to accept no more than two alternate bids. However, no purchases will be made through alternate bidders unless the lowest and best bidder, for reasons beyond his control, cannot deliver the commodities or services contained in his bid in a timely manner. In that event, purchase of such commodities or services may be made from one of the bidders whose bid was accepted as an alternate.

**Bid Security:** Each bid for labor must be accompanied by a certified check of the bidder or a bid bond, prepared on the form of a bid bond duly executed by the bidder as principal and having as surety thereon a surety company licensed by the State of Mississippi and signed by an agent resident in Mississippi in the amount of Five Percent (5%) of the total bid for each labor category for which a bid is offered.

**Liquidated Damages for Failure to Enter into Contract (Labor Bids):** **The** successful labor bidder, upon his failure or refusal to execute and deliver the contract and bonds required ten (10) days after he has received notice of the acceptance of his bid, shall forfeit to the Owner, as liquidated damages, the security deposited with his bid. Any contractor submitting a proposal for these services who fails to respond to the "Notice of Intent to Issue Work Order" and thus refuses to accept a "Work Order" may be disqualified from any future consideration of work for the remainder of the current bid term and the entire following term.

**Qualifications of Bidder (Labor Bids):** **The** City may make such investigations as it deems necessary to determine the ability of the labor bidder to perform the work and the bidder shall furnish to the City all such information and data for this purpose as the Owner may request. The City reserves the right to reject the bid if the evidence submitted by or investigation of such bidder fails to satisfy the City that such bidder is properly qualified to carry out the work contemplated therein. Responsive bidders must have complied in a timely manner with all bidding criteria and requirements set forth in these contract documents. Each bidder must have his principal, permanent, full time business residence within a 50 mile radius of central Gluckstadt, Mississippi and be capable of responding in a timely fashion to any project awarded, including emergency repair work. Additionally, each Bidder shall have been engaged in the type of work for which a bid is offered for a period of not less than 5 years.

**AWARD OF BID:** The City Board will award the bid based on the line item bid unless otherwise specified, as is appropriate as soon as practicable after the tabulation of said bids and the other necessary information submitted by the bidder can be evaluated, to the bidder whose proposal is considered to be the lowest and best bid. In no case will an award be made until any and all investigations are completed concerning the qualifications and compliance with these specifications.

**INTERPRETATION OF BID DOCUMENTS:** Any prospective bidder who is in doubt as to the true meaning and intent of any part of these specifications may submit to the Public Works Director a written request for interpretation thereof. A formal interpretation will be given by addendum to all known prospective bidders. No oral interpretation made to any bidder shall be considered an effective modification of any of the provisions of these specifications.

**BIDDERS CERTIFICATION:** The bidder shall certify that the proposed bid meets these specifications in their entirety or shall list any deviations thereto. Deviations may be cause for disqualification of bids should it be in the City's best interest to do so.

**GENERAL INFORMATION:** Bidders shall inform themselves and comply with all pertinent City regulations and ordinances, state and federal laws, licenses and tax liability which may in any manner affect their bids and their fulfillment of the contract. Prices quoted shall not increase during the contract period, unless otherwise noted, and any price decrease shall be credited to the City. Price quoted shall include all delivery and shipping costs for receipt of materials and/or services at the delivery point or as noted on the bid form. Bid prices to be effective from APRIL 1, 2026 THRU SEPTEMBER 30, 2026.

The quantities specified are not necessarily actual quantities proposed for immediate purchase but are simply estimated quantities based upon prior annual purchases by the City. Unit Prices are requested for all items listed even though a zero (0) quantity may show that there have been no recent purchases.

Bid prices shall, unless otherwise noted, include delivery to the City of Gluckstadt. Materials picked up by the City of Gluckstadt at the supplier's place of business may be discounted. The percentage discounts offered to the City for materials picked up at the supplier's place of business should be noted in the space provided at the bottom of the bid form.

To: Equipment/Services/Materials Suppliers

From: City of Gluckstadt, Public Works Department

Re: Term Bids

The City of Gluckstadt, Madison County, Mississippi, will be receiving bids until 10:00 am. February 24, 2026. at which time said bids will be publicly opened at City Hall for various materials and services which include the following:

<u>Form No.</u>	<u>Description</u>
-----------------	--------------------

(5)	Asphalt (FOB – Plant (6 month)
(5-A)	Asphalt (FOB - City of Gluckstadt) (6 month)

## FORM # 5

ASPHALT**Bid TYPE: Line Item**

All asphalt shall be in accordance with the City of Gluckstadt Subdivision Regulations. BIDS SHALL BE BASED ON F.O.B. AT PLANT, LOADED IN CITY OF GLUCKSTADT TRUCKS OR FOB DELIVERED TO VARIOUS LOCATIONS IN CITY OF GLUCKSTADT.  
 Bids shall run from APRIL 1, 2026 THRU SEPTEMBER 30, 2026.

Bidder: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

ITEM NO.	ITEM DESCRIPTION	PROPOSAL QUANTITY	ITEM UNIT	UNIT PRICE	TOTAL PRICE
1.	Base Course (BB-1A) Loaded	100	Ton	\$	\$
2.	Base Course (BB-1A) Delivered	100	Ton	\$	\$
3.	Base Course (BB-1B) Loaded	100	Ton	\$	\$
4.	Base Course (BB-1B) Delivered	100	Ton	\$	\$
5.	Surface Course (SC-2) Loaded	100	Ton	\$	\$
6.	Surface Course (SC-2) Delivered	100	Ton	\$	\$
7.	Surface Course (SC-1A) Loaded	100	Ton	\$	\$
8.	Surface Course (SC-1A) Delivered	100	Ton	\$	\$
9.	Surface Course (SC-1B) Loaded	100	Ton	\$	\$
10.	Surface Course (SC-1B) Delivered	100	Ton	\$	\$



## FORM # 5A

ASPHALT**Bid Type: Line Item**

All asphalt shall be in accordance with the City of Gluckstadt Subdivision Regulations. BIDS SHALL BE F.O.B. CITY OF GLUCKSTADT, INSTALLED AT VARIOUS LOCATIONS.

Bids shall run from APRIL 1, 2026 THRU SEPTEMBER 30, 2026.

Bidder: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

ITEM NO.	ITEM DESCRIPTION	PROPOSAL QUANTITY	ITEM UNIT	UNIT PRICE	TOTAL PRICE
1.	Cold Mix	10	Ton	\$	\$
2.	Base Course (BB-1A)	100	Ton	\$	\$
3.	Surface Course (SC-1B) Loaded	100	Ton	\$	\$
4.	Failed Areas (Dig out and replacement of full depth asphalt)	10	Ton	\$	\$

**LOCAL ROADS**

5a.	Surface Course (SC-1A)	1,000	Ton	\$	\$
5b.	Milling of Asphalt Surface (<3,000 SY)	1	LS	\$	\$
5c.	Milling of Asphalt Surface (>3,000 SY)	4,000	SY	\$	\$
5d.	Failed Areas (Dig out and replacement of full depth asphalt)	10	Ton	\$	\$
<b>TOTAL 5(a-d)</b>					<b>\$</b>

## FORM # 5-A (Continued)

**COLLECTOR ROADS**

6a.	Surface Course (SC-1A)	1,000	Ton	\$	\$
6b.	Milling of Asphalt Surface (<3,000 SY)	1	LS	\$	\$
6c.	Milling of Asphalt Surface (>3,000 SY)	4,000	SY	\$	\$
6d.	Failed Areas (Dig out and replacement of full depth asphalt)	10	Ton	\$	\$
<b>TOTAL 6(a-d)</b>					\$

**ARTERIAL ROADS**

7a.	Surface Course (SC-1A)	1,000	Ton	\$	\$
7b.	Milling of Asphalt Surface (<3,000 SY)	1	LS	\$	\$
7c.	Milling of Asphalt Surface (>3,000 SY)	4,000	SY	\$	\$
7d.	Failed Areas (Dig out and replacement of full depth asphalt)	10	Ton	\$	\$
<b>TOTAL 7(a-d)</b>					\$

**PARKING LOTS**

8a.	Surface Course (SC-1A)	1,000	Ton	\$	\$
8b.	Milling of Asphalt Surface (<3,000 SY)	1	LS	\$	\$
8c.	Milling of Asphalt Surface (>3,000 SY)	4,000	SY	\$	\$
8d.	Failed Areas (Dig out and replacement of full depth asphalt)	10	Ton	\$	\$
<b>TOTAL 8(a-d)</b>					\$

## FORM # 5-A (Continued)

**MULTI-USE PATH**

9a.	Surface Course (SC-1A)	250	Ton	\$	\$
9b.	Milling of Asphalt Surface ( $<6,000$ SY)	1	LS	\$	\$
9c.	Failed Areas (Dig out and replacement of full depth asphalt)	10	Ton	\$	\$
<b>TOTAL 9(a-c)</b>					\$

## Notes:

1. All Bid Prices, except Item #1, include hauling, labor, equipment, materials, and installation at various locations designated by the City of Gluckstadt.
2. Item # 1 Bid Price includes labor, materials and hauling to the City of Gluckstadt's Public Works Department Shop.
3. The quantities specified are not actual quantities proposed for immediate purchase, but are simply estimated quantities used to establish unit prices for purchases by the City for the six month term.
4. The hot mix asphalt (HMA) mixtures shall meet the established production requirements and standards. In the event that it falls below established standards, the contractor is obligated to promptly rectify the situation at their expense.
5. For items 5-8 the application of asphalt shall commence no later than 48 hours and be completed no later than 96 hours from the time milling of the street under repair is commenced. Failure to comply with this requirement will result in \$500.00 per day in liquidated damages. The Public Works Director will determine if rain days or other environmental conditions warrant an extension of time. The City at its option will execute the Contractors bid bond for failure to start the work within 30 days of the purchase order date. The City will also at its option execute the Contractors bid bond for failure to complete the work within 60 days of the purchase order date unless otherwise specified on the purchase order. Time extensions will be awarded at the discretion of the Public Works Director in extraordinary circumstances.

## FORM # 5-A (Continued)

**Multi-Use Path Notes:**

This work consists of overlaying a new asphalt surface onto an existing multi-use path or a prepared surface intended for a multi-use path at various locations within the City of Gluckstadt. This work shall include furnishing, delivering and placement of hot mix asphalt pavement in one or more lifts, in reasonably close conformity with the lines, grades, thicknesses, and typical cross sections stated on the Purchase Order, and in strict accordance with the City of Gluckstadt Subdivision Regulations. Asphalt paving equipment and haul trucks must be able to travel on and overlay multi-use path width's ranging from 8-ft to 12-ft in remote areas with difficult terrain and limited access. The maximum allowable load shall be 10-tons on any haul truck traveling on the multi-use path to deliver asphalt to the paver. No separate payment will be made to the Contractor for construction and removal of temporary access paths along City-owned property. No separate payment shall be made for removal and replacement of multi-use path bollards.

## CERTIFICATION OF LOW BID

**ASPHALT FOB AT THE PLANT (6 MONTH)**

I, Chris Buckner, do hereby certify to the Mayor and Board of Aldermen that I, in my capacity as Public Works Director, have reviewed the bid specifications set forth in the advertisement for bids, and all bids received in response thereto and have attached a bid tabulation. Based on my personal examination thereof I certify the following:

1. That the bid be awarded to the vendors highlighted in yellow on the attached bid tab as the lowest and best bid and that the alternate bid be awarded to the vendors highlighted in blue.

**WITNESS** my signature, this the 24<sup>th</sup> day of February 2026.

---

Chris Buckner  
Public Works Director  
City of Gluckstadt

---

Lindsay Kellum  
City Clerk  
City of Gluckstadt

## CERTIFICATION OF LOW BID

**ASPHALT FOB – CITY OF GLUCKSTADT (6 MONTH)**

I, Chris Buckner, do hereby certify to the Mayor and Board of Aldermen that I, in my capacity as Public Works Director, have reviewed the bid specifications set forth in the advertisement for bids, and all bids received in response thereto and have attached a bid tabulation. Based on my personal examination thereof I certify the following:

1. That the bid be awarded to the vendors highlighted in yellow on the attached bid tab as the lowest and best bid and that the alternate bid be awarded to the vendors highlighted in blue.

**WITNESS** my signature, this the 24<sup>th</sup> day of February 2026.

---

Chris Buckner  
Public Works Director  
City of Gluckstadt

---

Lindsay Kellum  
City Clerk  
City of Gluckstadt



## CITY OF GLUCKSTADT

MISSISSIPPI

OFFICE OF THE POLICE DEPARTMENT

140 Gluckstadt Way, Gluckstadt, Mississippi 39110

### MEMORANDUM

To: Mayor & Board of Alderman

From: Barry Hale, Police Chief

Date: January 05, 2025

**Subject: Requesting approval to hire a part-time dispatcher and or a part-time police officer as needed to fill these positions.**

I'm requesting approval to hire a part-time dispatcher and or a part-time police officer as needed to fill these positions. This will be provided we have it in our budget at the time of hiring.

Thank you for your consideration in this matter,

Respectfully,

Chief Barry Hale  
Gluckstadt Police Department

