

455 -2021

CERTIFIED COPY OF ORDER

STATE OF MISSOURI

October Session of the October Adjourned

Term. 20 21

County of Boone

} ea.

In the County Commission of said county, on the

28th

day of October

20 21

the following, among other proceedings, were had, viz:

Now on this day, the County Commission of the County of Boone does hereby approve a standing request to hire above the flexible hiring maximum for position 304, Collector Office Specialist Part-time Pool and position 929, Collector Office Specialist II Part-time Pool. This Order authorizes hiring at up to \$13.50 per hour in position 304 and at up to \$14.50 per hour in position 929.

Done this 28th day of October 2021.

ATTEST:



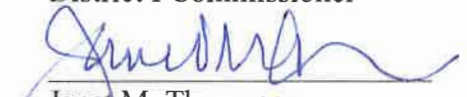
Brianna L. Lennon
Clerk of the County Commission



Daniel K. Atwill
Presiding Commissioner



Justin Aldred
District I Commissioner



Janet M. Thompson
District II Commissioner

REQUEST TO HIRE ABOVE FLEXIBLE HIRING MAXIMUM BOONE COUNTY

Description of form: To request approval to hire between 86% - 120% of the salary range mid-point

Procedure:

1. The Administrative Authority or designee completes the form and prepares a schedule that demonstrates that funding is available within the salary and wage appropriation (account #10100) and calculates the amount for a budget revision, if needed. The Administrative Authority submits the form, the schedule, and the budget revision (if needed) to the Auditor for certification of funds availability.
2. The Auditor certifies funds availability and approves budget revision (if applicable) and forwards to Human Resource Director.
3. The Human Resource Director reviews the information, makes recommendation, and schedules the request on the Commission agenda for approval.
4. The County Commission will review all requests for a starting salary above the flexible hiring limit and will either approve or deny the request. After approval/denial, the County Commission will return this form to the Administrative Authority.
5. The Administrative Authority will list the Commission Order number approving this request on the electronic Personnel Action Form.

Name of prospective employee NA Department Collector's Office

Position Title Office Specialist (I and II) Part-time Pool Position No. 304 and 929

Proposed Starting Salary (complete one only) Annual: _____ % of Mid-Point
OR Hourly: 13.50 and 14.50 % of Mid-Point _____

No. of employees in this job classification within your Department? 4-6 temp seasonal emp

Justification (Describe the prospective employee's education and/or work experience which supports this proposed compensation level)

The applicant pool for this position has been very small this year, the entry level hiring rate at many local employers has risen above our starting rate, and these positions are critical for the Collector's Office during the tax collection season.

If proposed salary exceeds what other employees in the same job classification are paid, explain how the prospective employee's background exceeds others working in the same job classification:

NA

What effect, if any, will this proposal have on salary relationships with other positions in your office and/or positions in other offices?

None.

Additional comments:

Administrative Authority's Signature: Brian McCollum per email to J. Redel Date: 10/27/21

Auditor's Certification: Funds are available within the existing departmental salary and wage appropriation (#10100).
 Funds are not available within the existing departmental salary and wage appropriation (#10100); budget revision required to provide funding is attached.

Auditor's Signature: June per email to J. Redel Date: 10/27/21

Human Resource Director's Recommendations:

Approve. This request does not cause any internal or external county issues

Human Resource Director's Signature: [Signature] Date: 10/27/21

County Commission _____ Approve _____ Deny

Comment(s): _____

Presiding Commissioner's Signature: [Signature] Date: 10/28/2021

District I Commissioner's Signature: [Signature] Date: 10/28/2021

District II Commissioner's Signature: [Signature] Date: 10/28/2021

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CERTIFIED COPY OF ORDER

STATE OF MISSOURI

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October Session of the October Adjourned

Term. 20 21

County of Boone

In the County Commission of said county, on the 28th day of October 20 21

the following, among other proceedings, were had, viz:

Now on this day, the County Commission of the County of Boone does hereby approve the request to hire above the Authorized Transfer Salary for position number 652, Office Specialist, and does hereby authorize an appropriation of \$16.25 per hour for the salary of said position.

Done this 28th day of October 2021.

ATTEST:

Brianna L. Lennon

Brianna L. Lennon
Clerk of the County Commission

Daniel K. Atwill

Daniel K. Atwill
Presiding Commissioner

absent

Justin Aldred
District I Commissioner

Janet M. Thompson

Janet M. Thompson
District II Commissioner

REQUEST TO TRANSFER ABOVE "ATS" (Authorized Transfer Salary)

BOONE COUNTY Commission Order 146-2006

Description of form: To request approval to transfer above "ATS" (authorized transfer salary).

Procedure:

1. The Administrative Authority or designee completes the form and prepares a schedule that demonstrates that funding is available within the salary and wage appropriation (account #10100) and calculates the amount for a budget revision, if needed. The Administrative Authority submits the form, the schedule, and the budget revision (if needed) to the Auditor for certification of funds availability.
2. The Auditor certifies funds availability, approves budget revision (if applicable), returns original form to the Administrative Authority and forwards a copy to Human Resource Director.
3. The Human Resource Director reviews the request and provides recommendation to the Administrative Authority.
4. The Administrative Authority will schedule the request for approval by the Commission and provide the Commission with the HR Director's recommendation.
5. The County Commission will review all requests for a starting salary above the "ATS" and will either approve or deny the request. After approval/denial, the County Commission will return this form to the Administrative Authority.
6. The Administrative Authority will attach a copy of this approved form to the Personnel Action Form.

Name of prospective employee Deanne Calvert Department 2909 LEST Sheriff/Detention Admin

Position Title Office Specialist Position No. 652

Proposed Starting Salary (complete one only) Annual: _____ % of Mid-Point _____
OR Hourly: 16.25 % of Mid-Point 94

No. of employees in this job classification within your Department? 4

Justification (Describe the prospective employee's education and/or work experience which supports this proposed compensation level) Deanne has been with the Sheriff's Office 25 years, she has worked in the jail, and in the Records branch and has demonstrated her dedication, is prompt and considerate of her leave hours, and is an asset to the Sheriff's Office. Deanne has valuable knowledge of the Sheriff's Office and Jail; Deanne will maintain her ability to work in other areas of the services branch making her a desirable candidate. In addition, Deanne is MULES certified, which would save valuable time in sending someone to become certified. In May we transferred Lindsey Kerr into this position, however, Lindsey has requested to transfer back to the Warrants branch stating the Civil Process position is too stressful. Lindsey was moved back to Warrants Specialist at the rate she was before moving into the Civil Process position. We would like to move Deanne into the position at the same rate as Lindsey.

If proposed salary exceeds what other employees in the same job classification are paid, explain how the prospective employee's background exceeds others working in the same job classification: Deanne would move to the same rate Lindsey was when approved with the prior commission order dated 04/29/21 CO #182-21

What effect, if any, will this proposal have on salary relationships with other positions in your office and/or positions in other offices?
We increased this salary 04/29/21 with CO #182-21, this increase has not affected any other positions within our department.

Additional comments: Lindsey has asked to move back into the Warrant Specialist position citing the Civil Process position is too stressful.

Administrative Authority's Signature: _____ Date: _____

Auditor's Certification: Funds are available within the existing departmental salary and wage appropriation (#10100).
 Funds are not available within the existing departmental salary and wage appropriation (#10100); budget revision required to provide funding is attached.

Auditor's Signature: [Signature] Date: 10/25/2021

Human Resource Director's Recommendations: This request is consistent with the rate the office requested for the staff member that moved into this position previously. The office will be rolling off the increase they gave to that staff member, who is now transferring out of the position, and transferring it to the new person covering the Civil Process function.

Human Resource Director's Signature: [Signature] Date: 10/27/21

County Commission Approve Deny
 Comment(s): _____

Presiding Commissioner's Signature: [Signature] Date: 10/28/2021

District I Commissioner's Signature: [Signature] Date: 10/28/2021

District II Commissioner's Signature: [Signature] Date: 10/28/2021

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STATE OF MISSOURI

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October Session of the October Adjourned

Term. 20 21

County of Boone

In the County Commission of said county, on the 28th day of October 20 21

the following, among other proceedings, were had, viz:

Now on this day the County Commission of the County of Boone does receive and accept the following subdivision plat and authorizes the presiding commissioner to sign it:

1. Cedar Heights Estates Plat 1. S26-T49N-R12W. A-2. Wildwood Enterprises LLC, owner. David Butcher, surveyor.
2. Drummond. A-2. S2-T50N-R12W. Scott and Sandy Drummond, owners. Michael L. Klasing, surveyor.

Done this 28th day of October 2021.

ATTEST:

Brianna L. Lennon
Clerk of the County Commission

Daniel K. Atwill
Presiding Commissioner

Justin Aldred
District I Commissioner

Janet M. Thompson
District II Commissioner

458-2021

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STATE OF MISSOURI }
County of Boone } ea.

October Session of the October Adjourned

Term. 20 21

In the County Commission of said county, on the 28th day of October 20 21

the following, among other proceedings, were had, viz:

Now on this day, the County Commission of the County of Boone does hereby approve the Missouri Foundation for Health grant application submitted by the Boone County Community Services Department.

It is further ordered the Presiding Commissioner is hereby authorized to sign the attached Application Acknowledgement and Non-discrimination Affirmation Form for said grant application.

Done this 28th day of October 2021.



Daniel K. Atwill
Presiding Commissioner



Justin Aldred
District I Commissioner



Janet M. Thompson
District II Commissioner

ATTEST:



Brianna L. Lennon
Clerk of the County Commission

APPLICATION ACKNOWLEDGEMENT AND NON-DISCRIMINATION AFFIRMATION

Missouri Foundation for Health (Foundation) requires this form be completed and attached to the application.

Applicants are required to affirm that the organization(s) does not/will not discriminate on the basis of race, color, sex, religion, national origin, age, disability, sexual orientation, gender identity or veteran status either in its employment practices or in its policies and procedures concerning access to services.

Complete and sign this form to affirm the organization(s) does not/will not discriminate as stated above and to indicate your acknowledgment of the application being submitted to the Foundation.

Applicant Organization: County of Boone, Missouri

Fiscal Agent Organization: _____
(if different from applicant organization)

Project Title: Bringing Results Based Accountability to Boone County

Applicant Organization:

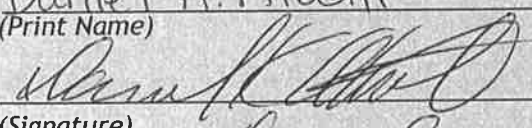
Name and title of applicant organization's Authorized Signatory for award agreement (if approved):

(Print Name) *(Title)* *(email address)*

Name, title, and email address of the individual authorized to receive email notification when disbursements are made (if project is approved):

(Print Name) *(Title)* *(email address)*

Acknowledged by applicant organization's President/CEO or Executive Director:

Daniel K. Atwill Presiding Commissioner
(Print Name) *(Title)*
 10.28.2021
(Signature) *(Date)*

Fiscal Agent Organization (if different from applicant organization):

Name and title of fiscal agent organization's Authorized Signatory for award agreement (if approved):

(Print Name) *(Title)* *(email address)*

Name, title, and email address of the individual authorized to receive email notification when disbursements are made (if project is approved):

(Print Name) *(Title)* *(email address)*

Acknowledged by fiscal agent organization's President/CEO or Executive Director:

(Print Name) *(Title)*

(Signature) *(Date)*

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October Session of the October Adjourned

Term. 20 21

County of Boone

In the County Commission of said county, on the 28th day of October 20 21

the following, among other proceedings, were had, viz:

Now on this day, the County Commission of the County of Boone does hereby approve the Organizational Use of the Boone County Courthouse Plaza by Dark Room Records and Dismal Niche Arts on Saturday, November 6, 2021, from 2:00PM until 8:00PM. This approval is contingent upon adherence to the current health order.

Done this 28th day of October 2021.

ATTEST:

Brianna L. Lennon

Brianna L. Lennon
Clerk of the County Commission

Daniel K. Atwill

Daniel K. Atwill
Presiding Commissioner

Justin Aldred

Justin Aldred
District I Commissioner

Janet M. Thompson

Janet M. Thompson
District II Commissioner



Boone County Commission

APPLICATION FOR ORGANIZATIONAL USE OF BOONE COUNTY COURTHOUSE PLAZA

The undersigned organization hereby applies for a use permit to use the Boone County Courthouse Plaza as follows:

Organization: Dark Room Records and Dismal Niche Arts

Address: 106 W. Lathrop Rd.

City: Columbia State: MO ZIP Code 65203

Phone: 573-721-6288 Website: dismalniche.com

Individual Requesting Use: Matthew Crook

Position in Organization: Executive Director

Address: 106 W. Lathrop Rd.

City: Columbia State: MO ZIP Code 65203

Phone: 573-721-6288 Email: dismalniche@gmail.com

Event: Dark Room Records Showcase

Description of Use (ex. Concert, speaker, 5K): Concert

Date(s) of Use: Saturday, November 6th

Start Time of Setup: 2pm AM/PM

Start Time of Event: 4pm AM/PM (If start times vary for multiple day events, please specify)

End Time of Event: 7pm AM/PM (If end times vary for multiple day events, please specify)

End Time of Cleanup: 8pm AM/PM

Emergency Contact During Event: Matthew Crook Phone: 573-721-6288

Will this event be open to the public? Yes No

If yes, please explain the publicity that will be used to promote the event, including names and contact information of any promoters: The event will take place as part of the 6th annual Columbia Experimental Music Festival presented by Dismal Niche Arts

and the MJ New Music Initiative. This concert will showcase local high school bands associated with the Dark Room Records studios at CPS. It will be promoted through the festival website and radio advertisements on KBIA.

How many attendees (including volunteers) do you anticipate being at your event? 100

If you anticipate more than 50 attendees (including volunteers) at your event, please detail your safety plan in the event of an emergency. If you have a separate Fire Safety, Public Safety and Evacuation Plan, please submit with application.

We do not anticipate needing security for this event and we do not have a specific safety plan beyond calling 911 in the case an emergency.

If you anticipate more than 1000 attendees (including volunteers), please provide the names and contact information of your crowd managers (1 per every 250 attendees):

Will the majority of attendees be under the age of 18? Yes No

If yes, please note the number of adult supervisors in attendance: _____ # adults per _____ # minors

Will you need access to electricity? Yes No

Will you be using amplifiers? Yes No

Will you be serving food and/or non-alcoholic drinks? Yes No

If yes, will you be **selling** food and/or non-alcoholic drinks? Yes No

If yes, please provide the following with copies of licenses attached to application:

Missouri Department of Revenue Sales Tax Number: _____

County Merchant's License Number: _____

City Temporary Business License Number: _____

Will you be serving alcoholic beverages? Yes No

If yes, will you be **selling** alcoholic beverages? Yes No

If yes, please provide the following with copies of licenses attached to application:

State Liquor License Number: _____

County Liquor License Number: _____

City Liquor License Number: _____

Will you be selling non-food items? Yes No

If yes, please provide the following with copies of licenses attached to application:

Missouri Department of Revenue Sales Tax Number: _____

County Merchant's License Number: _____

City Temporary Business License Number: _____

Will outside vendors be selling food, beverages or non-food items at this event? Yes No

If yes, please provide the following information (use separate sheet if necessary):

Vendor	Type of Sales	Contact Information	License Number(s)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Will you be requesting a road and/or sidewalk closure? Yes No

If yes, what road(s) and/or sidewalk(s)? _____

Please attach to application a copy of the order showing City of Columbia City Council approval.

Does your event include cooking or use of open flames? Yes No

If yes, please provide the Columbia Fire Department Special Events Permit Number: _____

Please attach to application a copy of the approved Columbia Fire Department Special Events Permit

Events that may pose increased responsibilities to the local law enforcement may be required to enlist the services of a professional security company. This will be determined by the Boone County Sheriff's Department and Boone County Commission. If necessary, have you hired a security company to handle security arrangements for this event?

Yes No

If yes, please provide the following:

Security Company: _____

Contact Person Name and Position: _____

Phone: _____ Email: _____

Will you be using portable toilets for your event? Yes No

**Please note: portable toilets are not permitted on the Boone County Courthouse Plaza grounds. Please contact the City of Columbia for options.

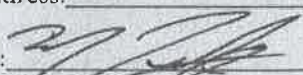
If your event is such that requires insurance per the Boone County Courthouse Plaza Rules and Regulations, please provide a copy of acquired insurance plan.

A deposit is required for use of the Boone County Courthouse Plaza. Please refer to the Boone County Courthouse Plaza Rules and Regulations for the deposit fee schedule. Boone County Facilities Maintenance Staff will inspect the Courthouse Plaza before and after each event. If staff finds the Courthouse Plaza is left the condition in which it was found, the deposit will be refunded to the organization. Please indicate below to whom the refund check should be issued:

Name/Organization: Matthew Crook / Dismal Niche Arts
Address: 106 W. Lathrop Rd.
City: Columbia State: MO ZIP Code 65203

The undersigned organization agrees to abide by the following terms and conditions in the event this application is approved:

1. To notify the Columbia Police Department and Boone County Sheriff's Department of time and date of use and abide by all applicable laws, ordinances and county policies in using Courthouse Plaza grounds.
2. To abide by all rules and regulations as set forth in the Boone County Courthouse Plaza Rules and Regulations document updated July 11, 2013 and attached to this document.
3. To remove all trash or other debris that may be deposited (by participants) on the courthouse grounds and/or in rooms by the organizational use.
4. To repair, replace, or pay for the repair or replacement of damaged property including shrubs, flowers or other landscape caused by participants in the organizational use of courthouse grounds and/or carpet and furnishings in rooms.
5. To conduct its use of Courthouse Plaza grounds in such a manner as to not unreasonably interfere with normal courthouse and/or Boone County Government building functions.
6. To indemnify and hold the County of Boone, its officers, agents and employees, harmless from any and all claims, demands, damages, actions, causes of action or suits of any kind or nature including costs, litigation expenses, attorney fees, judgments, settlements on account of bodily injury or property damage incurred by anyone participating in or attending the organizational use on the courthouse grounds and/or use of rooms as specified in this application.

Organization Representative/Title: Matthew Crook / Executive Director Dismal Niche Arts
Address: 106 W. Lathrop Rd.
Phone Number: 573-721-6288 Date of Application: 9/22/201
Email Address: dismalniche@gmail.com
Signature: 

Applications may be submitted in person or by mail to the Boone County Commission, 801 E. Walnut, Room 333, Columbia, MO 65201 or by email to commission@boonecountymo.org.

PERMIT FOR ORGANIZATIONAL USE OF BOONE COUNTY COURTHOUSE PLAZA

The County of Boone hereby grants the above application for permit in accordance with the terms and conditions above written. The above permit is subject to termination for any reason by duly entered order of the Boone County Commission.

ATTEST:


County Clerk

BOONE COUNTY, MISSOURI


County Commissioner

DATE: 10.28.2021

2141

DISMAL NICHE ARTS

509 A WEST BROADWAY
COLUMBIA, MO 65203

DATE 10/8/21

18-1/1010

PAY TO THE
ORDER OF

COUNTY OF BOONE

\$ 100 .00

ONE HUNDRED DOLLARS + 00/100

DOLLARS



Commerce Bank
Columbia, Missouri 65201
www.commercebank.com

FOR

STAGE RETIREMENT

MP

⑈00214⑈ ⑆101000019⑆ 130092672⑈

BOONE COUNTY TREASURER RECEIPT

Receipt Number: 2021 3639 Receipt Date: 10/12/2021

Employee Initials: TRJULIE

Received From: DISMAL NICHE ARTS

Amount: \$*****100.00

Remarks: DARK ROOM RECORDS SHOWCASE
PLAZA RENTAL- NOVEMBER 6, 2021



Boone County Treasurer

Thomas Danough

Treasurer of Boone County