1. ADMINISTRATIVE COMMITTEE

A. Call to Order

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<tr>
<th>Juror</th>
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<td>Reggie Roe, District 5, Chairman</td>
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<td>Charlie Roberts, District 1A</td>
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<td>Thomas Jones, District 4D</td>
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<td>Rodriguez Ross, District 6</td>
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</table>

B. Invocation

C. Pledge of Allegiance

D. Call for Additions and Deletions to the Agenda

E. Guest and Public Comments

1. Mr. Terry Taylor - Henderson Lane

F. Administrator's Reports

G. Administrative Items

1. Authorize the President to execute a Resolution indicating the intention of the DeSoto Parish Police Jury, State of Louisiana, to approve the two (2) year appointment of Steve Brown as a director to the board of the Louisiana Local Government Environmental Facilities and Community Development Authority

H. Motion to Adjourn

2. BUDGET AND FINANCE COMMITTEE
A. Call to Order

<table>
<thead>
<tr>
<th>Juror</th>
<th>Status</th>
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<tr>
<td>Jim &quot;Jimbo&quot; Davlin, District 2, Chairman</td>
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<td>Charlie Roberts, District 1A</td>
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<td>J. O. Burch, District 1C</td>
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<td>Thomas Jones, District 4D</td>
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B. Call for Additions and Deletions to the Agenda

C. Guest and Public Comments

1. Denise Henderson - Break Every Chain

D. Treasurer's Financial Report

E. Budget and Finance Items

1. Authorize payment of all approved bills.
2. Authorize transfer of Morgan Stanley Funds.
3. Authorize Budget Amendments.

F. Adjourn

3. PERSONNEL COMMITTEE

A. Call to Order

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<thead>
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<th>Juror</th>
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<td>Thomas Jones, District 4D, Chairman</td>
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<td>Charlie Roberts, District 1A</td>
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<td>B. D. Mitchell, District 1B</td>
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<td>Greg Baker, District 3</td>
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<tr>
<td>Richard Fuller, District 4A</td>
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</table>

B. Call for Additions and Deletions to the Agenda

C. Guest and Public Comments

D. Personnel Items


2. Authorize the Finance department to payroll deduct membership fees to Fitness First for employee volunteer fitness program.
3. Adopt the updated version of the Application For At Will Employment.

4. Adopt the updated version of the Performance Evaluation Form.

5. Authorize Amanda Mars to attend The Foundation of a Resilient Organization Workshop on November 17-18, 2016 in Dallas, Texas. (COOP & Emergency Response)

6. Authorize Marcus Pitts to move from Regular Operator to Heavy Equipment Operator (Step 1 pay scale)

7. Authorize to post and advertise the Laborer position at the Landfill.


9. Request clarification of take home vehicles for Permit Officer Foreman and Permit Officers.

E. Adjourn

4. ROAD COMMITTEE

A. Call to Order

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<th>Juror</th>
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<td>J.O. Burch, District 1C, Chairman</td>
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<td>B. D. Mitchell, District 1B</td>
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<td>Greg Baker, District 3</td>
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<td>Richard Fuller, District 4A</td>
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<td>Rodriguez Ross, District 6</td>
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B. Call for Additions and Deletions to the Agenda

C. Guest and Public Comments

D. Road Items

1. Award the low bid to Marketplace Chevrolet for the 2016 Vehicle for Road Department. (Assistant Superintendent)

E. Adjourn

5. ANIMAL & MOSQUITO CONTROL COMMITTEE

A. Call to Order

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<th>Juror</th>
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<tr>
<td>Rodriguez Ross, District 6, Chairman</td>
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<tr>
<td>Charlie Roberts, District 1A</td>
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</table>
B. Call for Additions and Deletions to the Agenda

C. Guest and Public Comments

D. Animal & Mosquito Control Items

1. Authorize the Animal Shelter Staff to attend an adoption event held at the PetZone in Shreveport on September 24, 2016.

E. Adjourn

6. SOLID WASTE COMMITTEE

A. Call to Order

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<td>Greg Baker, District 3, Chairman</td>
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<td>Charlie Roberts, District 1A</td>
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<td>Thomas Jones, District 4D</td>
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<td>Reggie Roe, District 5</td>
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B. Call for Additions and Deletions to the Agenda

C. Guest and Public Comments

D. Solid Waste Items

1. Authorize Amendment No. 1 to the Standby Trust Agreement with Community Bank of Louisiana for Closure-Post Closure Costs of the Landfill. (CD increased $307k to cover Cell VIII closure costs and inflation)

E. Adjourn

7. AIRPORT COMMITTEE

A. Call to Order

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<th>Juror</th>
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<td>Jim &quot;Jimbo&quot; Davlin, District 2, Chairman</td>
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<td>Reggie Roe, District 5</td>
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</table>
B. Call for Additions and Deletions to the Agenda
C. Guest and Public Comments
D. Airport Items
E. Adjourn

8. COMMUNITY SERVICES COMMITTEE

A. Call to Order

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<td>Richard Fuller, District 4A, Chairman</td>
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B. Call for Additions and Deletions to the Agenda
C. Guest and Public Comments
D. Community Services Items
E. Adjourn

9. BUILDING AND PROPERTIES COMMITTEE

A. Call to Order

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<tr>
<th>Juror</th>
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<td>B D. Mitchell, District 1B, Chairman</td>
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B. Call for Additions and Deletions to the Agenda
C. Guest and Public Comments
D. Building and Properties Items
E. Adjourn

10. INSURANCE COMMITTEE

A. Call to Order

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<thead>
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<th>Juror</th>
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<tr>
<td>Jeri Burrell, District 4B, Chairperson</td>
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</table>
Charlie Roberts, District 1A  
J.O. Burch, District 1C  
Jim "Jimbo" Davlin, District 2  
Thomas Jones, District 4D

B. Call for Additions and Deletions to the Agenda
C. Guest and Public Comments
D. Insurance Items
E. Adjourn

11. PUBLIC HOUSING COMMITTEE
A. Call to Order

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B. Call for Additions and Deletions to the Agenda
C. Guest and Public Comments
D. Public Housing Item
E. Adjourn

12. PARKS AND RECREATION COMMITTEE
A. Call to Order

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<td>Rodriguez Ross, District 6</td>
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</table>
B. Call for Additions and Deletions to the Agenda
C. Guest and Public Comments
D. Parks and Recreation Items
E. Adjourn

13. ZONING COMMITTEE

A. Call to Order

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</table>

B. Call for Additions and Deletions to the Agenda
C. Guest and Public Comments
D. Zoning Committee Items
E. Adjourn
August 11, 2016

Mr. Steven Brown  
Desoto Parish Police Jury  
PO Box 898  
Mansfield Louisiana 71052

SUBJ: LCDA Resolution (RENEWAL) for Desoto Parish Police Jury

Our records indicate that your resolution will expire on the 9th day of September 2016. The Desoto Parish Police Jury will need to adopt a new resolution to appoint a Director to serve and represent your municipality/entity on the Authority’s Board of Directors in order to prevent a lapse in membership. Enclosed is a copy of our Director’s Appointment resolution which can be completed or used as an example.

Please have a new resolution adopted by your council and return a certified copy to me as soon as possible. LCDA 5420 Corporate Blvd., Suite 205 Baton Rouge, Louisiana 70808

If you should have any questions, please do not hesitate to contact me. 225.924.6150 or you can reach me by email at Jennifer@louisianacda.com

Kindest Regards,

[Signature]

Jennifer B. Wheeler – Assistant Secretary
The following resolution was offered by ________ and seconded by ____________:

RESOLUTION

A RESOLUTION INDICATING THE INTENTION OF THE ___________________, STATE OF LOUISIANA, TO APPROVE THE TWO (2) YEAR APPOINTMENT OF ________________________ as a Director to the Board of the LOUISIANA LOCAL GOVERNMENT ENVIRONMENTAL FACILITIES AND COMMUNITY DEVELOPMENT AUTHORITY (THE "AUTHORITY") AS PROVIDED BY CHAPTER 10-D OF TITLE 33 OF THE LOUISIANA REVISED STATUTES OF 1950, AS AMENDED.

WHEREAS, Chapter 10-D of Title 33 of the Louisiana Revised Statutes of 1950, as amended, comprised of R.S. 33:4548.1 through 4548.16 is known as the Louisiana Local Government Environmental Facilities and Community Development Authority Act (the "Act"); and

WHEREAS, the Act creates the Louisiana Local Government Environmental Facilities and Community Development Authority (the "Authority") for the purpose of assisting political subdivisions, as defined in the Act, and other designated entities in acquiring, financing and constructing certain facilities, including environmental, public infrastructure, community and economic development purposes and to otherwise establish programs to aid in the financing of local government and economic development projects; and

WHEREAS, the _______________________, State of Louisiana, previously passed a resolution to become a participating political subdivision of the Authority in accordance with the Act; and

NOW THEREFORE, BE IT RESOLVED by the governing authority of the ________________, State of Louisiana, acting in such capacity:

Section 1. Approve the appointment of ________________________ to serve as a Director of the Authority for a term of two (2) years from the date hereof.

Section 2. This resolution shall take effect immediately and a certified copy hereof shall be forwarded to the offices of the Authority.

This resolution having been submitted to a vote, the vote thereon was as follows:

YEAS:

NAYS:

ABSENT:
And the resolution was declared adopted on this _____ day of ______________, 20__.

__________________________________________
ATTEST: 
Title: 

__________________________________________
Name: 
Title: 

CERTIFICATE

I, the undersigned, hereby certify that the foregoing is a true and correct copy of a Resolution adopted on ______________, 20__ by the governing authority of ______________, State of Louisiana, at a meeting thereof regularly convened and after proper notice thereof having been given, and I further certified that the same remains in full force and effect.

THUS DONE AND SIGNED, THIS ____________ DAY OF 
__________________, 20__.

__________________________________________
Title:
APPOINTMENT OF DIRECTOR

I, ______________________, do hereby appoint ______________________, as a member of the Board of Directors of the Louisiana Local Government Environmental Facilities and Community Development Authority representing the ______________________.

__________________________                 Name:

__________________________                 Title:

Date: ______________________
Attachment to

Articles of Incorporation of

Break Every Chain Youth Project, INC.

Said organization is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under the section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code. The business activity for said organization is as follows: life skills for the youth.

No part of the net earnings of this organization shall inure to the benefit of, or be distributable to, its members, trustees, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth herein. No substantial part of the activities of this corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and this corporation shall not participate in, or intervene in (including the publishing or distribution of statements), any political campaign on behalf of or in opposition to any candidate for public office. Notwithstanding any other provision of this document, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under section 501(c) (3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or (b) by a corporation, contributions to which are deductible under section 170(c) (2) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

Upon the dissolution of this corporation, assets remaining shall be distributed for one or more exempt purposes within the meaning of Section 501(c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed by a Court of Competent Jurisdiction of the county in which the principal office of the organization is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.
Date: 08/13/2016

**Location:** 427 Bypass Rd.
Grand Cane, LA 71032

**Time:** 9am to 10pm

Dear Sir/Madam:

On 08/13/2016, Break Every Chain Youth Project, Inc. in collaboration with Morning Star Missionary Baptist Church is hosting our first annual community outreach fundraiser. The movement will include our leaders & celebrities, inspirational speakers talking about community violence prevention, radio and TV stations, churches, social and / riding clubs, local business, bouncers for the kids, raffles, food, door prizes, and more. We anticipate over 3,000 people attending this event.

Our organization's mission is to provide empowerment to at-risk youth in our community, offering life skills, health and wellness, counseling, HIV Awareness, mentoring the youth into becoming positive citizen and a safe haven for battered women to escape domestic violence and intervention. This is your chance to give back to the community and give an at-risk youth or a battered women life-changing opportunities. Supporting us helps us show our community another way of life.

Your sponsorship will help assure the success of Break Every Chain Youth Project Community Outreach. Enclosed please find more information on this exciting movement and its sponsorship levels.

Please do not hesitate to contact us with any questions or concerns. We look forward to speaking with you at your earliest convenience.

Sincerely,

Robyn Tilley
Founder/CEO
Break Every Chain Youth Project, Inc.

Add: 219 Washington Ave.
Mansfield, LA 71052
Tel: 318-426-1295 or 318-455-2691
Bronze Sponsorship Package: $100-250 – Includes: Public recognition; Company banner at Event

Silver Sponsorship Package: $250-$400 – Includes: Public recognition; Company banner at Event; (1) FREE T-shirt

Gold Sponsorship Package: $400-$550 – Include: Public recognition, highlighted in post events publications for email and social media; company banner at event; company logo on 2017 t-shirts.

Platinum Sponsorship Package: $550 up – Includes: - Public recognition; highlighted in post event publications for email and social media; company banner at event; company logo on 2017 T-shirt. (1) FREE T-shirt. RESERVED SETTING FOR 8 TO ATTEND THE EVENT.

If you are interested in sponsorship, please give us a call, email or simply mail your contribution to the address listed below by July 25, 2016. Feel free to contact us with any additional questions. Thank you for your time.
Break Every Chain Community Outreach

Sponsorship Form

Please return Package on or before Monday, 7/25/16!!

<table>
<thead>
<tr>
<th>Sponsor Information</th>
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<tbody>
<tr>
<td>Address:</td>
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<tr>
<td>Name of Business:</td>
</tr>
<tr>
<td>City, State, Zip:</td>
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<tr>
<td>Contact:</td>
</tr>
<tr>
<td>Contact Phone:</td>
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<tr>
<td>Contact Email:</td>
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</table>

**Sponsorship Level** Please check which sponsorship you wish to participate.

- Bronze $100-$250
- Silver $250-$400
- Gold $400-$550
- Platinum $550 and up

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**Total Sponsorship Commitment and Agreement**

I hereby agree to participate as an official sponsor for the said event. This commitment is binding and goes into effect immediately.

Authorized Representative- Sponsor

<table>
<thead>
<tr>
<th>Signature and Title</th>
<th>Robyn Tilley/founder/CEO</th>
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<tbody>
<tr>
<td>Date:</td>
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<tr>
<td>Authorized Representative- BECYP, Inc.</td>
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<tr>
<th>Signature and Title</th>
<th>Date:</th>
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<tr>
<td>Name OR Name of Organization, Group, Business, or Individual</td>
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<td>Address City, State, Zip</td>
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<td>Telephone (Evening)</td>
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<td>Email Address</td>
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**Description of Food/ Craft/ Items you intend to sell/ display at your booth:** (Booth size: 10x10)

- 
- 
- 
- 
- 
- 

Vendors will need to bring their own generators. No electricity provided!!!

If your booth is geared for children’s games or activities, please specify the activity below:

**VENDOR FEE:** $200 FOR THE ONE DAY MOVEMENT. BOOTHS REQUIRING MORE SPACE MUST PURCHASE ADDITIONAL SPACE!!! CREDIT CARD PAYMENTS ARE ACCEPTED BUT NO CHECKS EXCEPTED!

Please RETURN COMPLETE applications to:

Mail: Break Every Chain Youth Project, Inc.
219 Washington Ave., Washington Ave, Mansfield, LA 71052
Email: becypinc@gmail.com  website: www.becypinc.org

Vendors may set-up their booths at 6:30 a.m. All vehicles must be out of exhibition area by 8:30 a.m. NO ALCOHOLIC BEVERAGES, NO GUNS, or NO DRUGS.

Deadline: All vendor application must be received by Monday, July 25, 2016

Notice: Exhibitors are responsible for erecting their own booth or tent, any tables, chairs, displays, etc. Exhibitors are responsible for reporting to city, parish, and state tax where applicable and comply with applicable reporting regulations. There is no rain date for this event. The event will be held rain or shine. Vendors will be requested to remain setup for the entire operating times of the event. Break Every Chain Youth Project, Inc. reserves the right to remove any exhibitors or exhibits or any part thereof if agreements or rules are not complied with/ or whose conduct is not acceptable.
DESOTO PARISH POLICE JURY
FINANCIAL STATEMENTS - JUNE 30, 2016 HIGHLIGHTS

❖ General Fund
Budget Amendments:
- Public Safety - $18k
- Economic Development $41k

❖ Sales Taxes
Revenues are 24% below projections for January - June.
Budget Amendments:
Revenues & Transfers Out - $1.5 million
- Road Fund - $750k
- Jail Fund - $150k
- Solid Waste Fund - $255k
- Library Transfer - $375k

❖ Road Fund
Budget Amendments:
- FEMA Related Expenditures $500k
- Litigation Expense $97k

❖ Witness & Jurors Fund
Budget Amendments:
- Petit Jury Software $50k
- Off-Duty Officers $10k

❖ Jail Fund
Budget Amendments:
- Litigation Expense $17k

❖ Solid Waste Fund
Budget Amendments:
- Tipping Fee Revenue $300k
- Litigation Expense $17k

❖ Office of Community Services
Budget Amendments:
- Capital Outlay (Homeless Shelter) $59k

❖ Airport
Transfer Funds from Morgan Stanley $350k (Matures Nov. 30, 2016)
Budget Amendments:
- Fuel Sales - $100k
- Oil & Gas Royalties - $25k

❖ Revenues and Expenditures for all other funds not included previously are within budgeted amounts or at expected levels.
E273: Managing Floodplain Development through the National Flood Insurance Program

Course Description:

This course is designed to provide an organized training opportunity for local officials responsible for administering their local floodplain management ordinance. The course will focus on the NFIP and concepts of floodplain management, maps and studies, ordinance administration, and the relationship between floodplain management and flood insurance.

Selection Criteria:

Local officials responsible for administering local floodplain management ordinances, including but not limited to floodplain management administrators, building inspectors, code enforcement/zoning officers, planners, city/county managers, attorneys, engineers, and public works officials. Federal/state/regional floodplain managers also are encouraged to attend. The course is designed for those officials with limited floodplain management experience. Attendance will be limited to two participants from any state for each offering.

Prerequisites:

Required:

Participants must complete the following online tutorials:

- Flood Insurance Rate Map (FIRM) tutorial at [http://www.floodmaps.fema.gov/tutorials/ot_firm.swf](http://www.floodmaps.fema.gov/tutorials/ot_firm.swf) (30 minutes)
- Federal Insurance Studies (FIS) tutorial at [http://www.floodmaps.fema.gov/tutorials/ot_fis.swf](http://www.floodmaps.fema.gov/tutorials/ot_fis.swf) (40 minutes)

Course Length: 4 days

CEUs: 3.1

CECs: 12 (core)
DE SOTO PARISH POLICE JURY
An Equal Opportunity Employer

Application For At Will Employment
This application will expire in one (1) year.
A new application must be submitted by applicant after
that time period if applicant wishes to be considered for employment.

Date of Application________________________

NAME:____________________________________

ADDRESS:_____________________________ CITY _______________ STATE _____ ZIP_______

TELEPHONE_____________________________ SOCIAL SECURITY NO._____________________

POSITION APPLIED FOR:______________________________

I WILL BE ABLE TO REPORT TO WORK _____ DAYS AFTER BEING NOTIFIED THAT I AM HIRED.

EDUCATION: Name of School, years attended and degree attained.

High School_______________________________

College/University___________________________

Business/Technical___________________________

Other_____________________________________

High School Diploma or GED_____________________

MILITARY SERVICE:
Duty/Specialized Training:_____________________

REFERENCES: List two personal references who are not relatives or former supervisors.

Name ______________________________________ Occupation __________ Years known ______ Phones Number

____________________________________________

EMPLOYMENT HISTORY: List last employment first. Include summer or temporary jobs. Be sure all your experience or
employers related to this job are listed here, in the summary (following this section), or use an extra sheet of paper if
necessary.

Employer 1:

Employer Name and Address_______________________________

Position_____________________________________________

Duties______________________________________________

______________________________________________

Dates Employed: from ______________________ to ______________________
Reason for leaving:__________________________________________

Supervisor's Name:__________________________________ Telephone:________________________

EMPLOYER 2:

Employer Name and Address:__________________________________________

Position:__________________________________________

Duties:__________________________________________

__________________________________________

Dates Employed: from ______________________ to ______________________

Reason for leaving:__________________________________________

Supervisor's Name:__________________________________ Telephone:________________________

EMPLOYER 3:

Employer Name and Address:__________________________________________

Position:__________________________________________

Duties:__________________________________________

__________________________________________

Dates Employed: from ______________________ to ______________________

Reason for leaving:__________________________________________

Supervisor's Name:__________________________________ Telephone:________________________

EMPLOYER 4:

Employer Name and Address:__________________________________________

Position:__________________________________________

Duties:__________________________________________

__________________________________________

Dates Employed: from ______________________ to ______________________

Reason for leaving:__________________________________________

Supervisor's Name:__________________________________ Telephone:________________________

Skills and Abilities:

Types of computers, other electronic or mechanical equipment that you are qualified to operate or repair:
Professional Licenses, Certifications or Registrations:________________________________________

Additional skills including supervision skills, other languages, or information regarding the career/occupation you wish to bring to the employer's attention:________________________________________

In case of accident or illness please contact: Name:______________________________________

Phone Number ( )________________________ Relationship ____________________________

Are you related to a current DeSoto Parish Public Official or Employee?  Yes  No

If so, whom and how?______________________________________________________________

Do you have the legal right to work in the U.S.A.? Yes  No

Do you have a driver’s license? Yes  No  DL#________________________ State:_______ Exp. Date:_________

The applicant grants permission to the DeSoto Parish Police Jury to contact all of the applicant’s previous employers and releases all persons providing employment information from liability to the fullest extent provided by LA R.S. 23:291 ________ (initial)

The applicant grants permission to the DeSoto Parish Police Jury to conduct background checks, including obtaining criminal records and driving records, and acknowledges that immunity from civil liability is granted to the fullest extent allowed by the law including that provided by LA R.S. 23:291. ____________ (initial)

Efforts may be made to verify the accuracy and completeness of this application by contacting the appropriate sources. The applicant by submitting this application consents to such contact.___________ (initial)

Applicant consents to the release of any information as it pertains to employment provided by or about the applicant. _______ (initial)

Applicant certifies that applicant is not subject to any contract or agreement that would restrict or prohibit him/her from performing the work for which he/she is applying. ____________ (initial)

Applicant acknowledges that no offer of employment has been made to the applicant. _______ (initial)

Information to the applicant: As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references. If necessary for employment, you may be required to: supply your birth certificate or other proof of authorization to work in the US, have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms. I understand and agree to the information shown above: Applicant states that the application is true, accurate, complete and correct and understands any misrepresentations or omissions may result in the application being disregarded, the prospective employee not being considered for employment or, if hired cause for discipline, including termination and, if hired, forfeiting workers compensation benefits. _______________ (initial)

Signature: __________________________ Date: __________________________

REVISED JUNE 2010
DESOTO PARISH POLICE JURY
An Equal Opportunity Employer

Application For At Will Employment
This application will expire in one (1) year.
A new application must be submitted by applicant after
that time period if applicant wishes to be considered for employment.

DATE OF APPLICATION: __________________________

NAME: _________________________________________

ADDRESS: ___________________________________ CITY ___________ STATE _____ ZIP ______

TELEPHONE NUMBER: ________________________ CELL PHONE NUMBER: _______________________

POSITION APPLIED FOR: _______________________

START DATE AVAILABLE: ______________________ SALARY DESIRED: ________________

Are you legally eligible for employment in the United States? o Yes o No

EDUCATION: Name of School, number of years completed and degree attained.
High School____________________________ High School Diploma or GED: ________________

College/University___________________________________________

Business/Technical___________________________________________

Other_______________________________________________________

MILITARY SERVICE:
Duty/Specialized Training:_____________________________________

REFERENCES: List two personal references who are not relatives or former supervisors.

Name __________ Occupation ___________ Years known ___________ Phone Number ___________

EMPLOYMENT HISTORY: List last employer first and include summer or temporary jobs. If you need additional space, please attach a sheet of paper.

Employer 1:

Employer Name and Address_____________________________________

Position_______________________________________________________

Duties________________________________________________________

_____________________________________________________________

Dates Employed: from __________________ to ____________________

_____________________________
Reason for leaving ________________________________

Supervisor's Name: ____________________________ Telephone: ____________________________

Starting Salary: ____________________________ Ending Salary: ____________________________

EMPLOYER 2:

Employer Name and Address ________________________________

Position ________________________________

Duties ________________________________

Dates Employed: from ____________________________ to ____________________________

Reason for leaving ________________________________

Supervisor's Name: ____________________________ Telephone: ____________________________

Starting Salary: ____________________________ Ending Salary: ____________________________

EMPLOYER 3:

Employer Name and Address ________________________________

Position ________________________________

Duties ________________________________

Dates Employed: from ____________________________ to ____________________________

Reason for leaving ________________________________

Supervisor's Name: ____________________________ Telephone: ____________________________

Starting Salary: ____________________________ Ending Salary: ____________________________

EMPLOYER 4:

Employer Name and Address ________________________________

Position ________________________________

Duties ________________________________

Dates Employed: from ____________________________ to ____________________________

Reason for leaving ________________________________

Supervisor's Name: ____________________________ Telephone: ____________________________

Starting Salary: ____________________________ Ending Salary: ____________________________
SKILLS AND ABILITIES

Types of computers, other electronic or mechanical equipment that you are qualified to operate or repair:

__________________________________________________________

Professional Licenses, Certifications or Registrations:

__________________________________________________________

Additional skills including supervision skills, other languages, or information regarding the career/occupation you wish to bring to the employer’s attention:

__________________________________________________________

Are you related to a current Desoto Parish Public Official or Employee?  ○ Yes  ○ No

If so, whom and how?  ______________________________________

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize DeSoto Parish Police Jury to verify their accuracy and to obtain reference information on my work performance. I hereby release DeSoto Parish Police Jury from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of DeSoto Parish Police Jury. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the DeSoto Parish Police Jury may terminate my employment at any time with or without notice or cause.

The applicant grants permission to the DeSoto Parish Police Jury to contact all of the applicant’s previous employers and releases all persons providing employment information from liability to the fullest extent provided by LA R.S. 23:291 __________ (initial)

The applicant grants permission to the DeSoto Parish Police Jury to conduct background checks, including obtaining criminal records and driving records, and acknowledges that immunity from civil liability is granted to the fullest extent allowed by the law including that provided by LA R.S. 23:291. __________ (initial)

Signature: ___________________________________________ Date: ____________________________

REVISED AUGUST 2016
### DeSoto Parish Police Jury
### Performance Evaluation Form

#### I. EMPLOYEE INFORMATION
- **Employee Name**
- **Job Title**
- **Supervisor/Reviewer**
- **Review Period**
  - From: / /  
  - To: / /

#### II. CORE VALUES AND OBJECTIVES

<table>
<thead>
<tr>
<th>PERFORMANCE CATEGORY</th>
<th>RATING</th>
<th>COMMENTS AND EXAMPLES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality of Work:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work is completed accurately (few or no errors), efficiently and within deadlines with minimal supervision</td>
<td>☐ Exceeds expectations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Meets expectations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Needs improvement</td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Unacceptable</td>
<td></td>
</tr>
<tr>
<td>Attendance &amp; Punctuality:</td>
<td>☐ Exceeds expectations</td>
<td></td>
</tr>
<tr>
<td>Reports for work on time, provides advance notice of need for absence</td>
<td>☐ Meets expectations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Needs improvement</td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Unacceptable</td>
<td></td>
</tr>
<tr>
<td>Reliability/Dependability:</td>
<td>☐ Exceeds expectations</td>
<td></td>
</tr>
<tr>
<td>Consistently performs at a high level; manages time and workload effectively to meet responsibilities</td>
<td>☐ Meets expectations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Needs improvement</td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Unacceptable</td>
<td></td>
</tr>
<tr>
<td>Communication Skills:</td>
<td>☐ Exceeds expectations</td>
<td></td>
</tr>
<tr>
<td>Written and oral communications are clear, organized and effective; listens and comprehends well</td>
<td>☐ Meets expectations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Needs improvement</td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Unacceptable</td>
<td></td>
</tr>
<tr>
<td>Judgment &amp; Decision-Making:</td>
<td>☐ Exceeds expectations</td>
<td></td>
</tr>
<tr>
<td>Makes thoughtful, well-reasoned decisions; exercises good judgment, resourcefulness and creativity in problem-solving</td>
<td>☐ Meets expectations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Needs improvement</td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Unacceptable</td>
<td></td>
</tr>
<tr>
<td>Initiative &amp; Flexibility:</td>
<td>☐ Exceeds expectations</td>
<td></td>
</tr>
<tr>
<td>Demonstrates initiative, often seeking out additional responsibility; identifies problems and solutions; thrives on new challenges and adjusts to unexpected changes</td>
<td>☐ Meets expectations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Needs improvement</td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Unacceptable</td>
<td></td>
</tr>
<tr>
<td>PERFORMANCE CATEGORY</td>
<td>RATING</td>
<td>COMMENTS AND EXAMPLES</td>
</tr>
<tr>
<td>----------------------</td>
<td>--------</td>
<td>----------------------</td>
</tr>
</tbody>
</table>
| Cooperation & Teamwork:  
Respectful of colleagues when working with others and makes valuable contributions to help the group achieve its goals | ✗ Exceeds expectations  
✗ Meets expectations  
✗ Needs improvement  
✗ Unacceptable | |

**III. JOB-SPECIFIC PERFORMANCE CRITERIA**

| Knowledge of Position:  
Possesses required skills, knowledge, and abilities to competently perform the job | ✗ Exceeds expectations  
✗ Meets expectations  
✗ Needs improvement  
✗ Unacceptable | |
| Training & Development:  
Continually seeks ways to strengthen performance and regularly monitors new developments in field of work | ✗ Exceeds expectations  
✗ Meets expectations  
✗ Needs improvement  
✗ Unacceptable | |

**IV. OVERALL RATING**

<table>
<thead>
<tr>
<th>✗ EXCEEDS EXPECTATIONS</th>
<th>✗ MEETS EXPECTATIONS</th>
<th>✗ NEEDS IMPROVEMENT</th>
<th>✗ UNACCEPTABLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee consistently performs at a high level that exceeds expectations</td>
<td>Employee satisfies all essential job requirements; may exceed expectations periodically; demonstrates likelihood of eventually exceeding expectations</td>
<td>Employee consistently performs below required standards/expectations for the position; training or other action is necessary to correct performance</td>
<td>Employee is unable or unwilling to perform required duties according to company standards; immediate improvement must be demonstrated</td>
</tr>
</tbody>
</table>

Comment on the employee's overall performance.

**V. EMPLOYEE COMMENTS (OPTIONAL)**

**VI. ACKNOWLEDGEMENT**

I acknowledge that I have had the opportunity to discuss this performance evaluation with my manager/supervisor and I have received a copy of this evaluation.

Employee Signature:  
Date:

Reviewer Signature:  
Date:
Hi Amanda,

Jon and I would like to extend a personal invitation to you and your colleagues to attend a workshop we are hosting on November 17-18, 2016 in Dallas, TX. Our workshop, entitled, "The Foundation of a Resilient Organization", is the first of a six-part series of workshops on achieving organizational resilience. As our inaugural event, this workshop and networking event will provide industry stakeholders with a strategic roadmap to sustainable organizational resilience through use of effective continuity operations.

As your community has unfortunately experienced, it has become an absolute imperative that organizations possess the ability to quickly recover from disaster. As the first of our six-part series on resilience that we proudly call “The Road to Resilience”, our workshop will deliver an in-depth presentation on the Resilience Framework and provide a forward-thinking blueprint on how to achieve a resilient organization through effective continuity operations. Guest speakers from across the homeland security and emergency management domain will be on hand to share testimonials, best practices, and lessons-learned. Our goal with this initiative is to strengthen the ability of industry stakeholders from across the nation to ensure the security and resilience of their organizations.

Workshop is ideal for those involved with the management or execution of activities that preserve an organization's essential functions, and for those who wish to learn the latest industry standards related to operational resilience. This workshop also represents an excellent opportunity to network with industry colleagues from federal, state and local government, business community, and health care/education sectors across the country.

So come join us for this exclusive event in beautiful Dallas, Texas at the Omni Hotel. Special room rates are available for your overnight stay November 17th & 18th, although to capitalize on these incredible rates rooms must be booked before October 27th. To learn more and to register for this exciting training and networking opportunity, please click the following link: www.crg-roadtoresilience.com

If you are unable to attend, please feel free to extend this opportunity to colleagues or anyone in your professional network you believe may benefit from attending.

You may also wish to visit our website at www.capitalresiliencegroup.com to learn more about us and how we can help you achieve your goals.

We hope to see you there!

Warmest Regards,

Robert Logan

Robert A. Logan | Co-founder
Capital Resilience Group
1629 K Street, NW, #300
Washington, D.C. 20002
202-379-4820
www.capitalresiliencegroup.com

Get Outlook for iOS
Scope: DeSoto Parish Police Jury

Category: Solid Waste

Description:
Maintains the facility and operates small equipment within the landfill and at compactor site locations throughout the parish.

Duties and Responsibilities:

- Pickup litter and debris in and around the landfill, including entrance areas, along fence line, active disposal area and facilities.
- Perform general office maintenance and repairs, including painting and janitorial work.
- Operate general site vehicles and equipment, such as lawnmowers, sweepers, trimming equipment, alternative daily cover spreader, etc.
- Fuel vehicles and equipment.
- Clean vehicles and equipment, including removing debris from track type and related equipment, as required.
- Install temporary wind fences, as required.
- Drive one-ton stake bed truck to all compactor sites and perform routine maintenance.
- May be required to pick up trash bags from parish roadways.
- Other duties as assigned.

Qualifications:

- Demonstrates good interpersonal communication skills.
- Must possess valid driver’s license.
- Demonstrate knowledge and experience with tools, equipment and machinery applicable to this position.
- Demonstrate knowledge of the hazards and safety precautions associated with this position.

Physical Demands

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions. While performing the duties of this job, the employee is frequently required to stand, reach, stoop and kneel as related to maintenance and construction. The employee must be able to work outside in all kinds of weather and in cramped or awkward positions, as well as working from ladders. The employee must occasionally lift and/or move up to 50 pounds.

Job Title: Laborer

Hourly Rate: $9.50-12.50
HCV Financial Accounting and Reporting
An HCV Seminar

SEMINAR NUMBER: 101-034

Schedule
Day One: 8:00 A.M. Registration
Day Three: 12:30 P.M. End of seminar
4:15 P.M. End of exam

Materials
- HCV Financial Accounting & Reporting course book
- NMA pen, pencil, calculator, and bag

Certification Exam
A certification exam is available for $150 unless otherwise stated on the order form.

Delivery Method
A group-live seminar featuring PowerPoint, case studies, group discussion, class materials (workbook, course book, or master book), brainstorming, and Q & A.

Length
Three days

Audience
Accounting and finance staff and executive directors.

Credits
CPE units w/ exam = 20 in the field of Specialized Knowledge and Applications. CEU units w/ exam = 1.7 Basic Program Level. No advanced preparation required. No prerequisites required.

Purpose:
As the most comprehensive class on HCV program financial accounting and reporting available, HCV Financial Accounting and Reporting will provide you with the knowledge and tools needed to understand the proper use of HUD's chart of accounts for the HCV program, the application of specific GAAP requirements for various HCV accounting transactions, revenue recognition guidelines, and HCV equity accounts. In addition, this two-day course will cover cost allocation plans and fee-for-service — including the difference between the two as well as when they would be used. Other topics include special rules for the accounting of fraud recoveries, portability, and FSS escrow accounts. You will also learn how to properly report year-end financial information to HUD in accordance with GAAP using the Financial Data Schedule (FDS), a Web-based reporting tool HUD uses to capture financial information about the program. This course will be most beneficial to housing authority accounting and financial management staff. Independent auditors desiring to understand HUD's financial accounting and reporting requirements for the HCV program will also benefit by attending.

This class has been updated to include:
- The latest information on how HUD wants various FDS line items to be used in recording HCV program income and expenses
- How the implementation of cash management has impacted HAP revenue recognition
- The NRA account and the creation of the new Program Reserve
- New information on fraud recovery proceeds for the receiving PHA under portability

*All classes are subject to change. Please plan ahead by purchasing refundable airfare.

For more information about this class, please call us at 800.783.3100, email sales@nanmckay.com, or visit our online store at nanmckay.com for current seminar locations and dates.

Nan McKay & Associates, Inc. has been accredited as an Authorized Provider by the International Association for Continuing Education and Training (IACET). In obtaining this accreditation, Nan McKay & Associates has demonstrated that it complies with the ANSI/IACET Standard which is recognized internationally as a standard of good practice. As a result of their Authorized Provider status, Nan McKay & Associates is authorized to issue IACET CEUs for its programs that qualify under the ANSI/IACET Standard.

Nan McKay & Associates, Inc. is registered with the National Association of State Boards of Accountancy (NASBA) as a sponsor of continuing professional education on the National Registry of CPE Sponsors. State boards of accountancy have final authority on the acceptance of individual courses for CPE credit. Complaints regarding registered sponsors may be submitted.
<table>
<thead>
<tr>
<th>Bid Amount</th>
<th>Delivery Date</th>
<th>Model</th>
<th>Make</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,800.00</td>
<td>2 days</td>
<td>Explorer</td>
<td>Ford</td>
<td>2016</td>
</tr>
<tr>
<td>$2,700.00</td>
<td>2 days</td>
<td>Traverse CR14526</td>
<td>Chevrolet</td>
<td>2016</td>
</tr>
</tbody>
</table>

Road Department recommends awarding to low bidder.

Bid opening: Aug 19 @ 2 pm