040615-32

LARAMIE COUNTY CLERK BOARD OF COUNTY COMMISSIONERS AGENDA ITEM PROCESSING FORM

1. DATE OF PROPOSED ACTION: June 15, 2004
2. AGENDA ITEM: Appointments Bids/Purchases Claims X Contracts/agreements/leases Grants Land Use: Variances/Board App/Plats Proclamations Public Hearings/Rules & Reg's Reports & Public Petitions Resolutions X Other Credit Application
3. DEPARTMENT: Planning
APPLICANT: Mark Reid AGENT: Mark Reid
4. DESCRIPTION: Consideration of a <u>credit application to CitiCapital for the purpose of leasing a Minolta Copier/Printer/Fax.</u>
Amount \$ <u>n/a</u> From
5. DOCUMENTATION: 2 Originals (4) four Copies
<u>Clerks Use Only:</u>
<u>Commissioner</u> <u>Signatures</u>
Humphrey Co Attny
Knudson Assist Co Attny Ketcham Grants Manager
Action Outside Agency Postponed/Tabled

Received And Approved
As To Form Only
By The County Attorney

Credit Application		
1800 OVERCENTER DRIVE, MOBERLY, MO 65270 • TEL: (800) 762-7453 • FAX: (800) SUPPLIER →	245-5889	cíti capital
SUPPLIER NAME CAPITAL BUSINESS SYSTEMS	Tix.	EQUIPMENT TERM AND RENT
2000 Westzand Pd. Cheyevor, Wy.	82001	EQUIPMENT DESCRIPTION:
CONTACT PERSON Michele Meltzer 307	-637-6767	EQUIPMENT COST:
RATE FACTOR RATE PLAN	MV 60/13mo	MONTHLY LEASE PAYMENT:
LESSEE ♥	- /	LEASE TERM:
LESSEE (FULL LEGAL NAME) LARAMIE COUNTY	FEDERAL TAX ID⊕	ADVANCE LEASE PAYMENT
	ST, Room 400	CHECK ONE ONLY:
CHEYENNE LARAMIE WY	82001	□ PAYMENT \$ □ SECURITY DEPOSIT \$
CONTACT PERSON 307-633-4303 MARK REID	DIRECTOR	IMPORTANT INFORMATION ABOUT ESTABLISHING A RELATIONSHIP WITH CITICAPITAL: To help the United States Government light terrorism and money laun-
COUNTY GOVERNMENT	NO. YAS. IN BUSINESS	dering, Federal law requires us to obtain, verity, and record information that identifies each person or business that opens an account or establishes a relationship. What this means for you: when you open an account or establish a relationship, we will ask for your name, street address, date of birth, and identification number, such as a social security number or taxpayer identification number. For businesses, we will ask for the business
TYPE OF BUSINESS ON NON PROFIT OF PROPRIETORSHIP OF GENERAL OR LIMITED PARTNERSHIP OF CORPORATION OF LIMITED LIABILITY PARTNERSHIP OF CORPORATION OF CORPORA	CHASE ORDER NO. REQUIRED ON INVOICES	name, street address, date of birth, and identification number, such as a social security number or taxpayer identification number. For businesses, we will ask for the business name, street address and tax identification number. Federal law requires us to obtain
REFERENCES (IMPORTANT TO ESTABLISH ANY LOAN HISTORY AND HIGHEST TI	RADE REFERENCES)	this information. We may also ask to see your driver's license or other identifying docu- ments that will allow us to identify you. We appreciate your cooperation.
BANK REFERENCES TWO YEAR HISTORY	TRADE REFERENCES (OMIT CREDI	T CARD ACCOUNTS) DAB RATING
FUNDS ARE HELD AND DRAWN	1 NAME	
THROUGH UHRIOUS LOCAL	STREET	
FINANCIAL INSTITUTIONS	CITY/STATE/ZIP	
OFFICER TO CONTACT	TELEPHONE NO. ()	CONTACT:
TELEPHONE NO. ()	2 NAME	-
CHECKING ACCT, NO. LOAN ACCT, NO	STREET	
2 NAME	CITY/STATE/ZIP	
STREET	TELEPHONE NO. (CONTACT:
CITY/STATE/ZIP	3 NAME	
OFFICER TO CONTACT	STREET	
TELEPHONE NO. ()	CITY/STATE/ZIP	
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PERSONAL DATA (GUARANTOR REQUIRED ON COMPANIES IN BUSINES	S LESS THAN 2 YRS. AND S	MALL SERVICE RELATED COMPANIE
PERSONAL INFORMATION ON OFFICERS, PARTNERS, GUARANTORS (SOLE PROPRIETORS ARE REQU	JIRED TO COMPLETE)*	
NAME DATE OF BIRTH	NAME	BIRTH
HOME ADDRESS	HOME ADDRESS	
CITY STATE ZIP	CITY	SAVE
TITLE SOCIAL SECURITY NO.	TITLE	SOCIÁL SECURITY NO.
AUTHORIZATION TO RELEASE INFORMATION -		
The undersigned authorizes and instructs any person, consumer reporting agency or banking institution to com- information it may have in response to an inquiry from the above named business, credit grantor and/or supplier	and/or their respective designees. Unde	ess, credit grantor and/or supplier and/or their respective designees with any resigned further states that all of the above statements are true and complete
and are made to the above named business, credit grantor and/or supplier and/or their respective designees to	odiam a contract.	
DATE		LESSEE SIGNATURE

AUTHORIZATION TO OBTAIN INDIVIDUAL CREDIT HISTORY

THE UNDERSIGNED INDIVIDUALS(S) WHO IS EITHER APRINCIPAL OR PERSONAL GUARANTOR OF THE CREDIT APPLICANT OR A SOLE PROPRIETORSHIP, RECOGNIZING THAT HIS OR HER INDIVIDUAL CREDIT HISTORY MAY BE A FACTOR IN THE EVALUATION OF THE CREDIT HISTORY OF THE APPLICANT OR IN THE EVALUATION OF HIS OR HER PERSONAL GUARANTY, IF APPLICABLE, HEREBY CONSENTS TO AND AUTHORIZES THE USE OF A CONSUMER CREDIT REPORT ON THE UNDERSIGNED INDIVIDUAL(S) BY THE ABOVE NAMED BUSINESS CREDIT GRANTOR AND/OR SUPPLIER AND/OR THEIR RESPECTIVE DESIGNEES, FROM TIME TO TIME AS MAY BE NEEDED, IN THE INITIAL CREDIT EVALUATION AND SUBSEQUENT REVIEW PROCESSES.

NAME (PRINT)	SIGNATURE	NAME (PRINT)	SIGNATURE
l		· ·	DATE
CAPACITY (PRINCIPAL, PROPRIETOR, PERSONAL GUARANTOR)	DATE	CAPACITY (PRINCIPAL, PROPRIETOR, PERSONAL GUARANTOR)	DATE .

If your application, Personate Contracting, Personate Contracting Personate Contracting

MBDNCHIAP
CitiCapital is a service mark of Citicorp.

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CONTACT PERSON MICHELE Meltzer TELEPHONE	7-127-17/7	EQUIPMENT COST:
RATE FACTOR RATE PLAN		MONTHLY LEASE PAYMENT:
	MV 60/13mo	J
LESS EE (FULL LEGAL NAME)	FEDERAL TAX ID#	LEASE TERM;
BLUMADORES COUNTY	- O	ADVANCE LEASE PAYMENT CHECK ONE ONLY:
	ST, Koom 400)
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TYPE OF BUSINESS O NON PROFIT O PROPRIETORSHIP O GENERAL OR LIMITED PARTNERSHIP O CORPORATION PU	IRCHASE ORDER NO. REQUIRED ON INVOICES	each person or business that opens an account or establishes a relationship, when the each person or business that opens an account or establishes a relationship, we writt ask for you means for you: when you open an account or establish a relationship, we writt ask for you name, street address, date of birth, and identification number, such as a social security number or taxpayer identification number. For businesses, we will ask for the business name, street address and tax identification number. Federal law requires us to obtain
REFERENCES (IMPORTANT TO ESTABLISH ANY LOAN HISTORY AND HIGHEST T		this information. We may also ask to see your driver's license or other identifying documents that will allow us to identify you. We appreciate your cooperation.
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OFFICER TO CONTACT	TELEPHONE NO.	CONTACT:
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2 NAME	CITY/STATE/ZIP	
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HOME ADDRESS	HOME ADDRESS	
CITY STATE ZIP	CITY	STATE
TITLE SOCIAL SECURITY NO.	TITLE	SÖGAT SEGU
AUTHORIZATION TO RELEASE INFORMATION -	nile and fundah the above second	diameter districts
The undersigned authorizes and instructs any person, consumer reporting agency or banking institution to compinformation it may have in response to an inquiry from the above named business, credit grantor and/or supplier and are made to the above named business, credit grantor and/or supplier and/or their respective designees to	and/or their respective designees. Unde	ss, crean grantor and/or supplier and/or their respective designees with any rsigned further states that all of the above statements are true and complete
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CAPACITY (PRINCIPAL, PROPRIETOR, PERSONAL GUARANTOR)

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CAPACITY (PRINCIPAL, PROPRIETOR, PERSONAL GUARANTOR)

ATE

LY your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial if such statement is requested in writing within 60 days from the date you are notified of the denial decision. To obtain the statement, please contact Citicorp Vendor Finance, Inc., One International Boulevard, Mahwah, New Jersey 07430-631; 1-800-633-4594. We will send you a written statement of reasons for the denial writin 30 days of receiving your request.

NOTICE: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marifal status, age (provided the applicant is more derives from any public assistance program any public assistance program by public assistance program MBDNCRTAP

LARAMIE COUNTY CLERK BOARD OF COUNTY COMMISSIONERS AGENDA ITEM PROCESSING FORM

FION: June 15, 2004
ments Bids/Purchase Claims
Grants Land Use: Variances/Board App/Plats
gs/Rules & Reg's Reports & Public Petitions
nutes
erk
AGENT: Rhonda Reed
n of the Minutes of Proceedings for May 28, June 1, and
— From ——— to———
Originals (4) four Copies
Clerks Use Only:
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Date: 7 June 2004

To: Members of the Laramie County Commission

From: Tina Baldino, President, Cheyenne Animal Shelter Board of Directors

Subject: Additional budget request for animal shelter operations

We would like to ask for your consideration of our request for additional funding for operations of the Cheyenne Animal Shelter. The purpose of this memo is to clearly define for you the purposes and amounts of the additional funding requested by the shelter board.

Our request for increase to the FY 2005 animal shelter county contract budget totals \$36,869. This would be in addition to the \$172,485 amount that was used as a base amount in the bond issue revenue flow projection in the bond issue for the new building. We are requesting the additional funds to bring the FY 2005 total to \$209,354. Of the two contracts with the city and the county, the county's proportion is thirty percent (30%). Please bear in mind that the shelter also generates revenues for operations from adoption fees, reclaim fees, and fundraising efforts. These revenues are projected to be roughly equal to the amount of the city portion of the contracts.

We are projecting our overall budget needs at approximately \$1.2 Million for the 2005 fiscal year. Of this total amount, about \$153,000 falls into the category we are labeling "exception request." This need would be met by a combination of shelter generated revenues, city contractual payments, and county contractual payments. Please see the attached budget outline for further detail and clarification.

Our exception request consists of three main areas of need. First, we are requesting \$49,000 for increased utility expenses. The primary driver of this increase is the threefold increase in natural gas prices. Correspondingly, electricity rates have dramatically risen. Also in this energy price-related category of expense is \$8,000 for increased gasoline costs for our animal control vehicles. Those expenses have risen by approximately 50% in the last year.

Second, we have experienced a great deal of utilization of the SNIP (spay and neuter incentive program) funding in the last few years. To meet current demands in that area, we have had to increase funding by an additional \$20,000. We believe it is an extremely important issue to address the production of unwanted litters of puppies and kittens in Cheyenne and Laramie County.

Third, we are requesting \$45,000 (plus payroll taxes, continuing education expenses, and insurance costs) to fund a position for an entry-level veterinarian. The availability of an on-site veterinarian would improve animal health, but perhaps more importantly, it would allow the shelter to place animals that have already been altered. That would in turn reduce our spay/neuter incentive (SNIP program) coupon costs. (The reduction in SNIP

has been factored into this budget proposal, as well, in the amount of \$30,000.) Therefore, elimination of the requested veterinarian position would require us to fund the SNIP program with an additional \$30,000.

The exception items identified in the attached budget outline total \$182,897. Of this amount, the shelter anticipates raising approximately \$60,000 through its fundraising efforts. The board has made a request to the city to fund 70% of the remaining \$122,897 unmet need. The county's proportion of the contracts has been 30%, therefore the request we make of the council is for \$36,869 additional annually, or \$3,072 additional per month. The lateness of our request to you for this funding is the result of several factors, but ultimately the board takes responsibility for the problem. Be assured that future budgets will be submitted in a timely manner. Please accept our apologies for our tardiness.

			1	2	3	
			Standard	Exception	FY 2005	
			Request	Request	Proposal	Footnote
Revenue and Support			•			
Contracts						
	City		402,464	86,028	488,492	1
	County		172,485	36,869	209,354	1
Donations			210,125		210,125	
Donations-Other			-		-	
Membership Dues			-		-	
Adoptions/Reclaims			145,800		145,800	
Alter Coupons Income			-		-	
Fund Raisers			50,000	60,000	110,000	2
Interest/Dividend			7,396		7,396	
Misc Income			-		-	
Boarding Income			3,960		3,960	
In Kind Donations			4,000		4,000	
Gift Shop			20,826		20,826	
			-		-	
Total Revenue			1,017,056	182,897	1,199,953	
			_		<u>.</u>	
Cost of Salas Ciff Shan		\$	13,884		13,884	
Cost of Sales Gift Shop		Ψ	10,001		,	
					_	
Expenses		•	-	52 174	599,542	3
Salary		\$	546,368	53,174	399,342	
Overtime			44 707		44 707	
Payroll Taxes			41,797		41,797	
Workers Comp			27,318		27,318	
Group Insurance			61,200		61,200	
Building			-		2.076	
Maintenance-Building			2,076		2,076	
Maintenance-Equipment			15 000		- 15,000	
Maintenance-Vehicles			15,000		13,000	
Vehicle			10,803		10,803	
Insurance			11,000	49,000	60,000	
Utilities-Elect/Gas			4,000	40,000	4,000	
Utilities-Water			1,200		1,200	
Trash			96,000	(96,000)		4
Depreciation			90,000	(50,500)	_	
Andy Fund			_	8,000	8,000	5
Food			_	0,000	-	
Veterinary Fees SN Coupon			-		_	
Veterinary Fees Mascots			4 000		4,000	
Vet Fees -Medical			4,000		4,000	
Vet Fees- SN Clinic			0.000		2,000	
Disfct/Ster Supplies			2,000		5,000 5,000	
Advertising			5,000			
Conferences			2,000		2,000	
Membership			40.000	00.000	- 30,000	6
Fund Raisers			10,000	20,000	30,000	•

Net Income		(53,723)	53,723	
, otal Expoli		-		-
Total Expen	ses	1,070,779	129,174	1,199,953
	Bond Repayment - Principal		125,000	120,000
	Cash Short/Over	480	125 000	125,000 ⁸
	Storage Rentals	400		480
	Misc	-		-
	Computer	-		-
	Dog Park	3,600		3,600
	Web Site/Computer System	1,200		1,200
	Repair & Maint	2,500		2,500
	Education/Training	2,000		2,000
	Alarm System	500		500
	Dues & Subscriptions	600		600
	Equipment Replacement	-		-
	Loss on Disposal of Assets	-		-
	Office Equipment	2,000		2,000
	Property Tax Expense	-	•	
	Crematorium	1,000		1,000
	General Reserves	-		
	SNIP Expense	60,000	(30,000)	30,000 ′
	Bank Charges	2,000		2,000
	Theft	-		-
	Bad Debts	200		200
	Interest Exp	67,632		67,632
	Legal & Accounting	14,800		14,800
	Cleaning Supplies	12,000		12,000
	Material Supplies	17,000		17,000
	Pager/Voice Mail	120		120
	Telephone	6,300		6,300
	Postage	3,500		3,500
	Office Supplies	12,000		12,000
	Meeting/Newsletters	2,300		2,300
	Board Expenditures	1,000		1,000
	Investigations	400		400
	Uniforms	2,000		2,000
	Travel	2,000		2,000

¹ The amounts shown in Column 1 represent the current contract levels of city and county funding.

The depreciation expense shown in the original budget proposal is not a cash-flow issue, so it is removed for illustrative purposes.

The increase shown in Column 2 represents the anticipated increase in shelter revenue from all fundraising events, including Cajun Fest.

The amount shown in the change column is combination of adding \$75,000 for the expenses associated with hiring a full-time, entry-level veterinarian PLUS \$40,000 for hiring a full-time volunteer coordinator PLUS reducing the request for salary monies to a 40 hour/week level at current salary and staffing levels for existing positions (a net reduction of approximately \$113,000 from the original estimate shown in column 1).

⁵ This adjustment reflects a board recommendation to participate in the Science Diet shelter food program.

⁶ Increased fund raising expenses are included in this budget, and have the effect of offsetting some of the additional anticipated revenues from this source.

⁷ Assuming the shelter is successful in hiring a veterinarian, it is anticipated that demands for SNIP funding will also decrease as all shelter adoptees will be altered in-house.

⁸ The Bond Repayment - Principal line item is added to show actual cash-flow demands in this budget.