

**ATTACHMENT II - EXHIBIT B**

Measure Z - Invoice

**K'ima:w Medical Center  
Mary Benedict, Controller  
PO Box 1288, Hoopa CA 95546  
(530) 625-4261 ext. 287**

Invoice Date: 1/26/2016

Invoice # MZ- 1

Invoice Period: Oct. - Dec. 2015

Description	Cost	Total Amount Due
Personnel Costs (Wages and Benefits)		
	\$54,839.69	
Operational Costs (Rent, Utilites, Phones, etc.)		
	\$9,260.75	
Consumables/Supplies (Supplies and Consumables should be separate)		
	\$6,282.36	
Transportation/Travel (Local and out of county should be separate)		
	\$0.00	
Other (Indirect Costs, Contracts, etc.)		
	\$146.33	
		<b>\$70,529.12</b>

I certify that the information provided above is, to the best of my knowledge, complete and accurate; the expenditures are in accordance with the approved Agreement cited for services provided under the provision of that agreement. Full justification and backup records for the expenditures are maintained in our office at the address indicated.

Signature and date: Mary Benedict 1/27/16

Print Name and Title: Mary Benedict, Controller

Send invoice to:

**COUNTY OF HUMBOLDT**  
County Administrative Office  
825 Fifth Street, Room 112  
Eureka Ca 95501



(707) 445-7266

\_\_\_\_\_  
Date 1/26/2016

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

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ATTACHMENT II - EXHIBIT A  
Budget  
K'ima:w Medical Center

Invoice Date: 1/26/16

Invoice # MZ-

1

Invoice Period:

Oct. - Dec. 2015

Descriptions	Amounts	Previously Billed	Annual Approved Budget	Remaining Balance
<b>A. Personnel Costs</b>				
Title: EMS DIRECTOR/PARAMEDIC Salary and Benefits Calculation: 329.5 hours @ \$21,624 per hour  Duties Description: <u>Manage day to day operations and paramedic</u>	5,771.41	13,564.56	387,021.00	367,685.03
Title: Paramedic, Kyle Collins Salary and Benefits Calculation: 302.40 hours @ \$17,882 per hour  Duties Description: <u>emergency medical care, standby time</u>	4,379.98	6,121.64		357,183.41
Title: EMT, James Davis Salary and Benefits Calculation: 532.90 hours @ \$10,376 per hour  Duties Description: <u>emergency medical care, standby time</u>	4,478.81	3,327.64		349,376.95
Title: EMT, Sheileah Dildine Salary and Benefits Calculation: 664.15 hours @ \$12,568 per hour  Duties Description: <u>emergency medical care, standby time</u>	6,761.03	6,067.89		336,548.03
Title: Paramedic, Constance Duffie Salary and Benefits Calculation: 763.00 hours @ \$15,596 per hour  Duties Description: <u>emergency medical care, standby time</u>	9,638.82	4,964.25		321,944.96
Title: Paramedic, Tommy McWilliams Salary and Benefits Calculation: 433.60 hours @ \$15,574 per hour  Duties Description: <u>emergency medical care, standby time</u>	5,469.82	10,861.13		305,614.01
Title: EMT, Tyler Kimball Salary and Benefits Calculation: 48 hours @ \$ 11.02 per hour  Duties Description: <u>emergency medical care, standby time</u>	428.46	3,499.98		301,685.58
Title: Paramedic, Eli Reissner Salary and Benefits Calculation: 60.40 hours @ \$12,798 per hour  Duties Description: <u>emergency medical care, standby time</u>	626.14	855.75		300,203.69
Title: EMT, Kaitlyn Manishin Salary and Benefits Calculation: 96 hours @ \$ 12,343 per hour  Duties Description: <u>emergency medical care, standby time</u>	959.77	264.97		298,978.95
Title: EMT, Spencer Warren Salary and Benefits Calculation: 48 hours @ \$ 11.02 per hour  Duties Description: <u>emergency medical care, standby time</u>	428.46	0.00		298,550.50
Title: EMT, Josh Scollard Salary and Benefits Calculation: 403.20 hours @ \$10,575 per hour  Duties Description: <u>emergency medical care, standby time</u>	3,453.64	769.05		294,327.81
Title: Paramedic, Ana Simons Salary and Benefits Calculation: 188.40 hours @ \$20,988 per hour	3,202.80	2,838.81		288,286.20

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Descriptions	Amounts	Previously Billed	Annual Approved Budget	Remaining Balance
Duties Description: emergency medical care, standby time				
Title: EMT, Cameron Smith				
Salary and Benefits				
Calculation: 526.60 hours @ \$ 13.56 per hour	5,783.78	3,304.29		279,198.12
Duties Description: emergency medical care, standby time				
Title: EMT, Megan Stanley				
Salary and Benefits				
Calculation: 339.50 hours @ \$12.57 per hour	3,456.77	7,092.49		268,648.86
Duties Description: emergency medical care, standby time				
<b>Total Personnel:</b>	<b>54,839.69</b>	<b>63,532.45</b>	<b>387,021.00</b>	<b>268,648.86</b>

**B. Operational Costs (Rent, Utilities, Phones, etc.)**

Title: GSA Ambulance Lease & Repairs				
Description:	1,374.17	1,316.99	23,062.00	20,370.85
Title: Rent-Facility				
Description: Rent pd for base in Willow Creek (3 months)	1,640.25	1,640.25	8,100.00	4,819.50
Title: Utilities				
Description: PGE & Campora	756.05	918.35	5,316.00	3,641.59
Title: Other Contracted Services				
Description: Arcata/Mad River Ambulance Coverage when ambulance is on a run	959.04	1,093.91		1,588.65
Title: Dues and Subscriptions				
Description: Direct TV	412.24	259.38		917.03
Title: Communications and Dispatch				
Description: Verizon-telephones	676.50	616.88	38,966.00	37,672.62
Title: Dispatch				
Description: Amount paid to Hoopa Tribal Police Dispatch for dispatch services	3,442.50	3,442.50		30,787.62
<b>Total Operating Costs:</b>	<b>9,260.75</b>	<b>9,288.25</b>	<b>75,444.00</b>	<b>66,183.25</b>

**C. Consumables/Supplies (Supplies and Consumables should be separate)**

Title: Supplies-Medical				
Description: Eureka Oxygen Co.-Onboard oxygen	138.34		5,630.00	5,491.66
Title: Other Non Medical Supply				
Description: Mt. Shasta Water	60.39	54.31		5,376.96
Title: Auto Expense				
Description: Fuel for Ambulances	5,804.15	3,884.34		(4,311.53)
Title: Supplies-Pharmaceuticals				
Description: Mad River Hospital (restock medication for ambulance)	279.48			(4,591.01)
<b>Total Consumable/Supplies:</b>	<b>6,282.36</b>	<b>3,938.65</b>	<b>5,630.00</b>	<b>(652.36)</b>

**D. Transportation/Travel (Local and Out-of-County should be separate)**

Title: Training				
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ATTACHMENT II - EXHIBIT A  
Budget  
K'ima:w Medical Center

Invoice Date: 1/26/16

Invoice # MZ- 1

Invoice Period: Oct. - Dec. 2015

Descriptions	Amounts	Previously Billed	Annual Approved Budget	Remaining Balance
Description:			738.00	738.00
Title:				0.00
Description:				0.00
Title:				0.00
Description:				0.00
<b>Total Transportation/Travel Costs:</b>		<b>0.00</b>	<b>0.00</b>	<b>738.00</b>
<b>738.00</b>				<b>738.00</b>
<b>E. Other</b>				
Title: Miscellaneous				
Description:			1,467.00	1,467.00
Title: Instruments and Medical Equipment				0.00
Description:		1,696.93		(229.93)
Title: Repairs & Maintenance				
Description: Repair to GSA ambulance	146.33			
<b>Total Other Costs:</b>		<b>146.33</b>	<b>1,696.93</b>	<b>1,467.00</b>
<b>1,320.67</b>				<b>1,320.67</b>
<b>Invoice Total:</b>		<b>70,529.12</b>	<b>78,456.28</b>	<b>470,300.00</b>
Less 19% Trinity County-deducted 19% from each category in the formula				89,357.00
		<u>70,529.12</u>	<u>78,456.28</u>	<u>380,943.00</u>