

ATTACHMENT II - EXHIBIT F

Measure Z - Invoice

<p>K'ima:w Medical Center Mary Benedict, Controller P.O. Box 1288 Hoopa, CA 95546 (530) 625-4261 ext. 287</p>
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Invoice Date: 10/23/2020

Invoice # MZ- 1

Invoice Period: July-Sept 2020

Description	Cost	Total Amount Due
Personnel Costs (Wages and Benefits)	\$110,942.41	
Operational Costs (Rent, Utilites, Phones, etc.)	\$40,812.36	
Consumables/Supplies (Supplies and Consumables should be separate)	\$2,041.74	
Transportation/Travel (Local and out of county should be separate)	\$0.00	
Other (Indirect Costs, Contracts, etc.)	\$828.50	
Less Revenue Received for Period	(\$62,165.00)	
Adjustment to Revenue for Prior Periods (7/1/19-3/31/20):	\$0.00	
Adjust: Underfunded Amount from County	\$0.00	
		\$92,460.02

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:  10/23/2020

Print Name and Title: Mollie Myers, Grants and Contract Compliance

Send invoice to:

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



(707) 445-7266

10/23/2020

Date

Date

ATTACHMENT II - EXHIBIT E

Budget

K'ima:w Medical Center

Invoice Date: 10/23/20

Invoice # MZ- 1

Invoice Period: July-Sept 2020

Descriptions	Amounts	Previously Billed	Approved Budget
A. Personnel Costs			374,383.00
Title: EMS Director/Paramedic, Rod Johnson Salary and Benefits Calculation: 349 hours @ 45.30 per hour Duties Description: Manage day to day operations and working paramedic	15,809.70	0.00	
Title: EMT, Samantha Smith Salary and Benefits Calculation: 554 hours @ 36.04 per hour Duties Description: emergency medical care, standby time	19,966.16	0.00	
Title: Paramedic, Kyle Collins Salary and Benefits Calculation: 748 hours @ 27.80 per hour Duties Description: emergency medical care, standby time	20,794.40	0.00	
Title: EMT, James Davis Salary and Benefits Calculation: 523.5 hours @ 23.88 per hour Duties Description: emergency medical care, standby time	12,501.18	0.00	
Title: EMT, Charles Hollowell Salary and Benefits Calculation: 485.5 hours @ 17.97 per hour Duties Description: emergency medical care, standby time	8,724.44	0.00	
Title: EMT, John Newell Salary and Benefits Calculation: 313.5 hours @ 17.27 per hour Duties Description: emergency medical care, standby time	5,414.15	0.00	
Title: EMT, Zachariah Bayne Salary and Benefits Calculation: 264 hours @ 19.40 per hour Duties Description: emergency medical care, standby time	5,121.60	0.00	
Title: EMT, Adrianna Mateu Salary and Benefits Calculation: 288 hours @ 18.81 per hour Duties Description: emergency medical care, standby time	5,417.28	0.00	
Title: Paramedic, Tommy McWilliams Salary and Benefits Calculation: 72 hours @ 20.19 per hour Duties Description: emergency medical care, standby time	1,453.68	0.00	
Title: EMT, Rhesheika Jackson Salary and Benefits Calculation: 216 hours @ 23.28 per hour Duties Description: emergency medical care, standby time	5,028.48	0.00	

ATTACHMENT II - EXHIBIT E

Budget

K'ima:w Medical Center

Invoice Date: 10/23/20

Invoice # MZ- 1

Invoice Period: July-Sept 2020

Descriptions	Amounts	Previously Billed	Approved Budget
Title: Billing Clerk, Carolyn Lewis Salary and Benefits Calculation: 239.76 hours @ 30.40 per hour Duties Description: emergency medical care, standby time	7,288.70	0.00	
Title: Paramedic, Brittaney Lewis Salary and Benefits Calculation: 349 hours @ 28.09 per hour Duties Description: emergency medical care, standby time	9,803.41	0.00	
Title: EMT Para, Megan Valdovinos Salary and Benefits Calculation: 72 hours @ 21.20 per hour Duties Description: emergency medical care, standby time	1,526.40	0.00	
Title: EMT, Nick Comer Salary and Benefits Calculation: 48 hours @ 22.67 per hour Duties Description: emergency medical care, standby time	1,088.16	0.00	

Total Personnel: 110,942.41 0.00

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

Title: GSA Ambulance Lease & Repairs Description: Ambulance Lease & Repairs from GSA	21,037.23	0.00	
Title: Rent - Facility Description: Rent paid for base in Willow Creek (3 months)	3,150.00	0.00	
Title: Rent - Tanks Description: Rent paid for oxygen tanks	158.08	0.00	
Title: Utilities Description: Electricity, Propane, Water, Waste Removal	1,006.13	0.00	
Title: Dues and Subscriptions Description: DirecTv	416.97	0.00	
Title: Communications Description: VZW, AT&T, Frontier, Six Rivers Communications - Telephones/Internet	853.06	0.00	
Title: Dispatch Description: Amount paid to Hoopa Tribal Police Dispatch for dispatch services	17,500.00	0.00	

Total Operating Costs: 40,812.36 0.00

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

Title: Supplies - Medical (Leases in Budget)			
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ATTACHMENT II - EXHIBIT E

Budget

K'ima:w Medical Center

Invoice Date: 10/23/20

Invoice # MZ- 1

Invoice Period: July-Sept 2020

Descriptions	Amounts	Previously Billed	Approved Budget
Description: Eureka Oxygen Co - Onboard Oxygen/Med-Tech Resource, Inc.	179.11	0.00	
Title: Supplies - Pharmaceuticals			
Description: Mad River Hospital (Restock Medication for Ambulance)	365.31	0.00	
Title: Purchased Services			
Description: Mission Linen & Uniform Service/Bayside Embroidery	334.70	0.00	
Title: Supplies			
McKesson Medical/Physio-Control, Inc./Life Assist/Abbott/Bound Description: Tree/SWHealthcare	1219.51	0.00	
Title: Supplies - Base Supplies			
Description: Willow Creek Ace Hardware/Mendes Supply/Staples/Office Depot	21.51	0.00	
Title: Supplies			
Description: Mt. Shasta Water	87.15	0.00	
Total Consumable/Supplies:	2,041.74	0.00	
D. Transportation/Travel (Local and Out-of-County should be separate)			
Title:			
Description:	0.00		
Total Transportation/Travel Costs:	0.00	0.00	
E. Other			
Title: Miscellaneous			
Description: Arcata/Mad River Ambulance Coverage when Ambulance is on a run	330.00	0.00	
Title: Miscellaneous			
Description: Sierra 7 Collections	565.68	0.00	
Total Other Costs:	828.50	0.00	
Invoice Total:	154,625.02	0.00	

Less 7.5% Trinity County-deducted 7.5% from each category in the formula