



FINANCE COMMITTEE AGENDA
Room 400, Government Center

Tuesday, February 7, 2006

4:00 p.m.

1. Roll Call
2. Approval of Minutes: January 3, 2006
December 20, 2005 (Stand-up Meeting)
3. Departmental Matters
 - A. Lee Newcom, County Recorder
 - 1) Items to be Presented for Action:
 - a) Request Approval to Apply for a County-owned Credit Card to be used by the Recorder's Office – County Recorder's Office 1-2
 - 2) Items to be Presented for Information:
 - a) General Report 3-25
 - b) Other
 - B. Becky McNeil, County Treasurer
 - 1) Items to be Presented for Action:
 - a) Request Approval of Professional Services Agreement with Joseph E. Meyer for the Creation and Administration of a Delinquent Tax Liquidation Program 26-27
 - 2) Items to be Presented for Information:
(Documents to be provided at meeting)
 - a) Accept and place on file County Treasurer's Monthly Financial Reports as of January 31, 2006
 - b) General Report
 - c) Other

- C. Peggy Ann Milton, County Clerk
- 1) Items to be Presented for Information:
 - a) County Clerk Monthly Activity Report for the Fourth Quarter of 2005 28-54
 - b) General Report
 - c) Other
- D. Jennifer Ho, Risk Management
- 1) Items to be Presented for Action:
 - a) Request Approval of Proposed Insurance Program for Fiscal Year 2006 55-62
 - b) Request Approval of Insurance Service Fee Agreement 63
 - 2) Items to be Presented for Information:
 - a) General Report 64-66
 - b) Other
- E. Jackie Dozier, County Auditor
- 1) Items to be Presented for Action:
 - a) Request Approval of an Ordinance of the McLean County Board Amending the 2006 Combined Annual Budget and Appropriation Ordinance 67-70
 - 2) Items to be Presented for Information:
 - a) General Report
 - b) Other
- F. Robert Kahman, Supervisor of Assessments
- 1) Items to be Presented for Information:
 - a) General Report 71
 - b) Other
- G. Don Lee, Director, Nursing Home
- 1) Items to be Presented for Action:
 - a) Request Approval of Transfer Agreement between Lutheran Senior Living of Illinois, Inc. and McLean County Nursing Home 72-76
 - 2) Items to be Presented for Information:
 - a) Monthly Reports 77-78
 - b) General Report
 - c) Other
- H. John M. Zeunik, County Administrator
- 1) Items to be Presented for Action:
 - a) Request Approval of Resolution Transferring Monies from the Working Cash Fund 0002 to the Persons with Developmental Disabilities Fund 0110, Children's Advocacy Center 0129, F.I.C.A./Social Security Fund 0130 and to the I.M.R.F. Fund 0131, Fiscal Year 2006 79-80

b) Request Approval of an Ordinance
Transferring Monies from the County General
Fund 0001 to the Tort Judgment Fund 0135,
Fiscal Year 2006

81-83

c) EXECUTIVE SESSION: Personnel
Matters and Collective Bargaining

2) Items to be Presented for Information

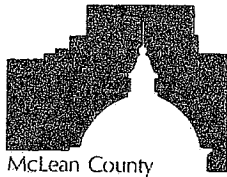
a) General Report

b) Other

4. Recommend Payment of Bills and Transfers, if any, to County Board

5. Adjournment

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H. Lee Newcom
McLean County Recorder
115 E. Washington Street, Room M-104
Post Office Box 2400
Bloomington, IL 61702-2400
(309) 888-5170
(309) 888-5927 Fax

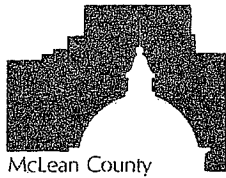
February 7, 2006

To: Honorable Members of the Finance Committee

From: Lee Newcom, County Recorder

For your information and approval at your February 7, 2006, meeting I present the following attached documents and action items.

1. Request for credit card
2. December 2005 monthly financial reports.



H. Lee Newcom
McLean County Recorder
115 E. Washington Street, Room M-104
Post Office Box 2400
Bloomington, IL 61702-2400
(309) 888-5170
(309) 888-5927

February 7, 2006

Memorandum

To: McLean County Board Finance Committee

From: Lee Newcom, Recorder

I am requesting authorization from the Finance Committee for a credit card for use by the Recorder's office. This is to be used for making on-line purchases for the office and travel related purchases when I attend conventions. The card should be issued in the name of McLean County Recorder. I will be responsible for the card.

This request has been made on the recommendation of the McLean County Auditor, Jackie Dozier.

FOR THE MONTH OF DECEMBER 2005

Description	Revenue Account #	GL Balance	Recorder's Rcpts		Less 12/30/2005	Total	Difference
		As Of 12/30/2005	For the Month Of December 2005	PLUS 11/30/2005 Rec Rcpts Dep To GL 12/01/2005	Rec Rcpts Dep To GL 01/03/2006		
Copy Fees	0001-0006-0008 0410-0008	1,796.30	1,779.80	16.50		1,796.30	-
Recording Fees	0001-0006-0008 0410-0029	57,865.00	55,819.00	2,088.00	(42.00)	57,865.00	-
County Revenue Stamps	0001-0006-0008 0410-0032	38,170.75	37,518.00	652.75		38,170.75	-
Micro Film Sales	0001-0006-0008 0410-0128	-	-	-		-	-
Compact Disc Sales	0001-0006-0008 0410-0132	280.00	280.00	-		280.00	-
Rental HSG Support Program	0001-0006-0008 0410-0195	3,107.00	2,983.00	124.00		3,107.00	-
Document Storage	0137-0006-0008 0410-0089	11,694.00	11,331.00	384.00	(21.00)	11,694.00	-
GIS Document Storage	0137-0006-0008 0410-0181	3,898.00	3,777.00	128.00	(7.00)	3,898.00	-
GIS Fund	0167-0006-0008 0410-0181	19,385.00	18,759.00	640.00	(14.00)	19,385.00	-

(A) (B) (C) (D) Sum(B:D)=E (A-E)

Adjustments are made to column C & D because the Recorder's daily receipts are not turned into the General Ledger until the next business day. These adjustments must be made in order to balance to the General Ledger.

Explanation of Differences:

DON EVERHART
CHIEF DEPUTY RECORDER



Year-to-date Totals through December, 2005

Account #	Account Description	Month-to-date Totals			Year-to-date Totals through December, 2005				
		Cash/Check/ Change	Charge	Charges Paid	Total	Cash/Check/ Change	Charge	Charges Paid	Total
101-0-0-201-070-034:	Due Idor-Rental Hsg Prog	\$26,847.00	\$0.00	\$0.00	\$26,847.00	\$133,704.00	\$0.00	\$0.00	\$133,704.00
101-6-8-410-008-034:	Copy Fees	\$1,781.05	\$1.25	\$2.50	\$1,779.80	\$24,444.70	\$27.50	\$27.50	\$24,440.95
101-6-8-410-029-035:	Recording Fees	\$55,969.00	\$7,145.00	\$7,295.00	\$55,819.00	\$598,409.00	\$10,516.00	\$10,110.00	\$598,815.00
101-6-8-410-032-036:	County Revenue Stamps	\$37,518.00	\$0.00	\$0.00	\$37,518.00	\$450,711.50	\$0.00	\$0.00	\$450,711.50
101-6-8-410-111-111	Payment On Account	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
101-6-8-410-128-100	Microfilm Sales	\$0.00	\$0.00	\$0.00	\$0.00	\$2,145.00	\$0.00	\$0.00	\$2,145.00
101-6-8-410-132-100:	Compact Disc Sales	\$280.00	\$0.00	\$0.00	\$280.00	\$1,820.00	\$0.00	\$0.00	\$1,820.00
101-6-8-410-195-035:	Rental Hsg Support Program	\$2,983.00	\$0.00	\$0.00	\$2,983.00	\$14,856.00	\$0.00	\$0.00	\$14,856.00
116-8-4-102-222-222:	Balance Brought Forward	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
116-8-4-102-222-222:	Balance Brought Forward/Credit	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
37-6-8-410-089-284:	Document Storage	\$11,439.00	\$1,857.00	\$1,965.00	\$11,331.00	\$117,910.00	\$3,714.00	\$3,553.00	\$118,071.00
37-6-8-410-181-100:	Gis Document Storage	\$3,813.00	\$619.00	\$655.00	\$3,777.00	\$39,182.00	\$1,174.00	\$1,063.00	\$39,293.00
51-0-0-126-001-903:	State Revenue Stamps	\$75,036.00	\$0.00	\$0.00	\$75,036.00	\$921,029.00	\$0.00	\$0.00	\$921,029.00
67-6-8-410-181-100:	Gis Fund	\$18,819.00	\$2,969.00	\$3,029.00	\$18,759.00	\$127,578.00	\$4,175.00	\$4,027.00	\$127,726.00
Final Total :		\$234,485.05	\$12,591.25	\$12,946.50	\$234,129.80	\$2,431,789.20	\$19,602.75	\$18,780.50	\$2,432,611.45

PROJECT #	G/L DATE	JOURNAL	TYPE	SOURCE	TRANSACTION DESCRIPTION	BUDGET	REVENUES
	G/L ACCOUNT NUMBER: 0001-0006-0008 0410-0008						
	12/01/2005	504985	RA	Copy Fees-	DESCRIPTION: Copy Fees		
	12/02/2005	505013	RA	Copy Fees-	BEGINNING BALANCE	25,000.00	22,644.65-
	12/05/2005	505049	RA	Copy Fees-	Copy Fees-Co. Recorder		16.50-
	12/06/2005	505081	RA	Copy Fees-	Copy Fees-Co. Recorder		159.80-
	12/07/2005	505119	RA	Copy Fees-	Copy Fees-Co. Recorder		52.00-
	12/08/2005	505146	RA	Copy Fees-	Copy Fees-Co. Recorder		27.25-
	12/09/2005	505156	RA	Copy Fees-	Copy Fees-Co. Recorder		619.80-
	12/12/2005	505167	RA	Copy Fees-	Copy Fees-Co. Recorder		85.25-
	12/13/2005	505186	RA	Copy Fees-	Copy Fees-Co. Recorder		21.50-
	12/14/2005	505220	RA	Copy Fees-	Copy Fees-Co. Recorder		34.00-
	12/15/2005	505256	RA	Copy Fees-	Copy Fees-Co. Recorder		64.95-
	12/16/2005	505263	RA	Copy Fees-	Copy Fees-Co. Recorder		94.50-
	12/19/2005	505289	RA	Copy Fees-	Copy Fees-Co. Recorder		33.50-
	12/20/2005	505299	RA	Copy Fees-	Copy Fees-Co. Recorder		36.35-
	12/21/2005	505335	RA	Copy Fees-	Copy Fees-Co. Recorder		49.75-
	12/22/2005	505362	RA	Copy Fees-	Copy Fees-Co. Recorder		65.50-
	12/23/2005	505385	RA	Copy Fees-	Copy Fees-Co. Recorder		24.25-
	12/27/2005	505404	RA	Copy Fees-	Copy Fees-Co. Recorder		32.00-
	12/28/2005	505440	RA	Copy Fees-	Copy Fees-Co. Recorder		16.75-
		505440	RA	Copy Fee	Copy Fee Charges		82.00-
	12/29/2005	505465	RA	Copy Fees-	Copy Fees-Co. Recorder		30.75-
	12/30/2005	505468	RA	Copy Fees-	Copy Fees-Co. Recorder		1.25-
		505488	JE	pw010305	2005 Revenue Rec in 06		170.40-
						.00	63.25-
							15.00-
							1,796.30-
							.00
							.00
						25,000.00	24,440.95-
						25,000.00	24,440.95-
						25,000.00	24,440.95-
						25,000.00	24,440.95-
						25,000.00	24,440.95-

PROJECT #	G/L DATE	JOURNAL	TYPE	SOURCE	TRANSACTION DESCRIPTION	BUDGET	REVENUES
G/L ACCOUNT NUMBER: 0001-0006-0008 0410-0029							
					DESCRIPTON: Recording Fees		
					BEGINNING BALANCE	600,000.00	540,895.00-
	12/01/2005	504985	RA	Recording	Recording Fees		2,088.00-
	12/02/2005	505013	RA	Recording	Recording Fees		2,247.00-
	12/05/2005	505049	RA	Recording	Recording Fees		1,738.00-
		505049	RA	Rec FeeCH	Recording Fee Charges		16.00-
	12/06/2005	505081	RA	Recording	Recording Fees		2,905.00-
	12/07/2005	505119	RA	Recording	Recording Fees		2,063.00-
		505119	RA	Rec FeeCH	Recording Fee Charges		10.00-
	12/08/2005	505146	RA	Recording	Recording Fees		2,601.00-
	12/09/2005	505156	RA	Recording	Recording Fees		1,811.00-
	12/12/2005	505167	RA	Recording	Recording Fees		1,820.00-
	12/13/2005	505186	RA	Recording	Recording Fees		2,463.00-
		505186	RA	Rec FeeCH	Recording Fee Charges		43.00-
	12/14/2005	505220	RA	Recording	Recording Fees		2,455.00-
		505220	RA	Rec FeeCH	Recording Fee Charges		95.00-
	12/15/2005	505256	RA	Recording	Recording Fees		2,059.00-
	12/16/2005	505263	RA	Recording	Recording Fees		2,525.00-
	12/19/2005	505289	RA	Recording	Recording Fees		2,027.00-
		505289	RA	Rec FeeCH	Recording Fee Charges		5.00-
	12/20/2005	505299	RA	Recording	Recording Fees		1,724.00-
		505299	RA	Rec FeeCH	Recording Fee Charges		1,008.00-
	12/21/2005	505335	RA	Recording	Recording Fees		2,336.00-
		505335	RA	Rec FeeCH	Recording Fee Charges		1,008.00-
	12/22/2005	505362	RA	Recording	Recording Fees		1,552.00-
		505362	RA	Rec FeeCH	Recording Fee Charges		4,668.00-
	12/23/2005	505385	RA	Recording	Recording Fees		2,186.00-
		505385	RA	Rec FeeCH	Recording Fee Charges		216.00-
	12/27/2005	505404	RA	Recording	Recording Fees		2,890.00-
	12/28/2005	505440	RA	Recording	Recording Fees		2,908.00-
		505440	RA	Rec FeeCH	Recording Fee Charges		24.00-
	12/29/2005	505465	RA	Recording	Recording Fees		2,780.00-
		505465	RA	Rec FeeCH	Recording Fee Charges		5.00-
		505553	JE	pw011005	Crrt trun in		2,771.00-
		505553	JE	pw011005	Crrt trun in		2,780.00-
	12/30/2005	505468	RA	Recording	Recording Fees		2,972.00-
		505468	RA	Rec FeeCH	Recording Fee Charges		5.00-
		505488	JE	pw010305	2005 Revenue Rec in 06		2,621.00-
MONTH TOTAL: DECEMBER 2006						.00	57,865.00-
	1/03/2006	600036	RA	Rec FeeCH	Recording Fee Charges		42.00-
MONTH TOTAL: JANUARY 2006						.00	42.00-
Base Acct#/Detl Acct# TOTAL: Recording						600,000.00	598,802.00-
Sub-Dept. TOTAL : LEGAL REC						600,000.00	598,802.00-
Department TOTAL : CO.RECORDR						600,000.00	598,802.00-
Fund TOTAL : GEN. FUND						600,000.00	598,802.00-

PROJECT #	G/L DATE	JOURNAL	TYPE	SOURCE	TRANSACTION DESCRIPTION	BUDGET	REVENUES
G/L ACCOUNT NUMBER: 0001-0006-0008 0410-0032							
	12/01/2005	504985	RA	CountyRevs	DESCRIPTION: Sale Of Revenue Stamps	375,000.00	412,540.75-
	12/02/2005	505013	RA	CountyRevs	BEGINNING BALANCE		652.75-
	12/05/2005	505049	RA	CountyRevs	County Rev Stamp Sales		1,717.00-
	12/06/2005	505081	RA	CountyRevs	County Rev Stamp Sales		1,998.50-
	12/07/2005	505119	RA	CountyRevs	County Rev Stamp Sales		2,126.00-
	12/08/2005	505146	RA	CountyRevs	County Rev Stamp Sales		1,255.25-
	12/09/2005	505156	RA	CountyRevs	County Rev Stamp Sales		3,273.50-
	12/12/2005	505167	RA	CountyRevs	County Rev Stamp Sales		1,126.50-
	12/13/2005	505186	RA	CountyRevs	County Rev Stamp Sales		1,613.75-
	12/14/2005	505220	RA	CountyRevs	County Rev Stamp Sales		2,210.75-
	12/15/2005	505256	RA	CountyRevs	County Rev Stamp Sales		2,884.50-
	12/16/2005	505263	RA	CountyRevs	County Rev Stamp Sales		652.75-
	12/19/2005	505289	RA	CountyRevs	County Rev Stamp Sales		1,532.50-
	12/20/2005	505299	RA	CountyRevs	County Rev Stamp Sales		2,194.75-
	12/21/2005	505335	RA	CountyRevs	County Rev Stamp Sales		1,323.50-
	12/22/2005	505362	RA	CountyRevs	County Rev Stamp Sales		1,548.00-
	12/23/2005	505385	RA	CountyRevs	County Rev Stamp Sales		1,074.75-
	12/27/2005	505404	RA	CountyRevs	County Rev Stamp Sales		2,033.25-
	12/28/2005	505440	RA	CountyRevs	County Rev Stamp Sales		1,950.25-
	12/29/2005	505465	RA	CountyRevs	County Rev Stamp Sales		2,569.75-
	12/30/2005	505468	RA	CountyRevs	County Rev Stamp Sales		2,141.00-
		505488	JE	pw010305	2005 Revenue Rec in 06		1,605.25-
							686.50-
						.00	38,170.75-

MONTH TOTAL: DECEMBER 2005

MONTH TOTAL: JANUARY 2005

Base Acct#/Detl Acct# TOTAL: Rev.Stamps

Sub-Dept. TOTAL : LEGAL REC

Department TOTAL : CO.RECORDR

Fund TOTAL : GEN. FUND

McLean County
 DATE 1/13/06
 TIME 20:05:09

F I N A N C I A L M A N A G E M E N T
 REVENUE LEDGER - DETAIL LISTING

PAGE 1
 GL1450
 NWSTRRCT

PROJECT #	G/L DATE	JOURNAL TYPE	SOURCE	TRANSACTION DESCRIPTION	BUDGET	REVENUES
=====						
G/L ACCOUNT NUMBER:	0001-0006-0008	0410-0128		DESCRIPTION: Microfilm Roll Sales		
	Base Acct#/Detl Acct# TOTAL: Microfilm					
	Sub-Dept. TOTAL			: LEGAL REC	5,000.00	2,145.00-
	Department TOTAL			: CO.RECORDR	5,000.00	2,145.00-
	Fund TOTAL			: GEN. FUND	5,000.00	2,145.00-
=====						

PROJECT #	G/L DATE	JOURNAL	TYPE	SOURCE	TRANSACTION DESCRIPTION	BUDGET	REVENUES
G/L ACCOUNT NUMBER: 0001-0006-0008 0410-0132							
	12/06/2005	505081	RA	CD Sales	Compact Disk Sales	.00	1,540.00-
	12/13/2005	505186	RA	CD Sales	Compact Disk Sales	.00	200.00-
					Compact Disk Sales	.00	80.00-
					BEGINNING BALANCE		
					MONTH TOTAL: DECEMBER 2005	.00	280.00-
					MONTH TOTAL: JANUARY 2005	.00	.00
					Base Acct#/Detl Acct# TOTAL: CDiskSales	.00	1,820.00-
					Sub-Dept. TOTAL : LEGAL REC	.00	1,820.00-
					Department TOTAL : CO.RECORDR	.00	1,820.00-
					Fund TOTAL : GEN. FUND	.00	1,820.00-

PROJECT #	G/L DATE	JOURNAL	TYPE	SOURCE	TRANSACTION DESCRIPTION	BUDGET	REVENUES
G/L ACCOUNT NUMBER: 0001-0006-0008 0410-0195							
					DESCRIPTION: Rental Hsg Support Progra		
					BEGINNING BALANCE		
	12/01/2005	504985	RA	Hsg sppt	Rental Hsg Support Progra	.00	11,749.00-
	12/02/2005	505013	RA	Hsg sppt	Rental Hsg Support Progra		124.00-
	12/05/2005	505049	RA	Hsg sppt	Rental Hsg Support Progra		132.00-
	12/06/2005	505081	RA	Hsg sppt	Rental Hsg Support Progra		111.00-
	12/07/2005	505119	RA	Hsg sppt	Rental Hsg Support Progra		185.00-
	12/08/2005	505146	RA	Hsg sppt	Rental Hsg Support Progra		131.00-
	12/09/2005	505156	RA	Hsg sppt	Rental Hsg Support Progra		165.00-
	12/12/2005	505167	RA	Hsg sppt	Rental Hsg Support Progra		110.00-
	12/13/2005	505186	RA	Hsg sppt	Rental Hsg Support Progra		113.00-
	12/14/2005	505220	RA	Hsg sppt	Rental Hsg Support Progra		156.00-
	12/15/2005	505256	RA	Hsg sppt	Rental Hsg Support Progra		157.00-
	12/16/2005	505263	RA	Hsg sppt	Rental Hsg Support Progra		122.00-
	12/19/2005	505289	RA	Hsg sppt	Rental Hsg Support Progra		148.00-
	12/20/2005	505299	RA	Hsg sppt	Rental Hsg Support Progra		121.00-
	12/21/2005	505335	RA	Hsg sppt	Rental Hsg Support Progra		89.00-
	12/22/2005	505362	RA	Hsg sppt	Rental Hsg Support Progra		140.00-
	12/23/2005	505385	RA	Hsg sppt	Rental Hsg Support Progra		89.00-
	12/27/2005	505404	RA	Hsg sppt	Rental Hsg Support Progra		137.00-
	12/28/2005	505440	RA	Hsg sppt	Rental Hsg Support Progra		166.00-
	12/29/2005	505465	RA	Hsg sppt	Rental Hsg Support Progra		191.00-
		505553	JE	pw011005	Crrt trun in		178.00-
		505553	JE	pw011005	Crrt trun in		179.00-
	12/30/2005	505468	RA	Hsg sppt	Rental Hsg Support Progra		178.00-
		505488	JE	pw010305	2005 Revenue Rec in 06		176.00-
					MONTH TOTAL: DECEMBER 2005	.00	3,107.00-
					MONTH TOTAL: JANUARY 2005	.00	.00
					Base Acct#/Detl Acct# TOTAL: RntlHsgPrgr	.00	14,856.00-
					Sub-Dept. TOTAL : LEGAL REC	.00	14,856.00-
					Department TOTAL : CO.RECORDR	.00	14,856.00-
					Fund TOTAL : GEN. FUND	.00	14,856.00-

PROJECT #	G/L DATE	JOURNAL	TYPE	SOURCE	TRANSACTION DESCRIPTION	BUDGET	REVENUES
G/L ACCOUNT NUMBER: 0137-0006-0008 0410-0089							
					DESCRIPTION: Document Storage Fees		
					BEGINNING BALANCE	120,000.00	106,353.00-
	12/01/2005	504985	RA	Recorder D	Recorder Document Storage		384.00-
	12/02/2005	505013	RA	Recorder D	Recorder Document Storage		438.00-
	12/05/2005	505049	RA	Recorder D	Recorder Document Storage		342.00-
		505049	RA	Doc St Ch	Document Storage Charges		9.00-
	12/06/2005	505081	RA	Recorder D	Recorder Document Storage		579.00-
	12/07/2005	505119	RA	Recorder D	Recorder Document Storage		408.00-
		505119	RA	Doc St Ch	Document Storage Charges		6.00-
	12/08/2005	505146	RA	Recorder D	Recorder Document Storage		513.00-
	12/09/2005	505156	RA	Recorder D	Recorder Document Storage		351.00-
	12/12/2005	505167	RA	Recorder D	Recorder Document Storage		366.00-
	12/13/2005	505186	RA	Recorder D	Recorder Document Storage		489.00-
		505186	RA	Doc St Ch	Document Storage Charges		24.00-
	12/14/2005	505220	RA	Recorder D	Recorder Document Storage		495.00-
		505220	RA	Doc St Ch	Document Storage Charges		57.00-
	12/15/2005	505256	RA	Recorder D	Recorder Document Storage		387.00-
	12/16/2005	505263	RA	Recorder D	Recorder Document Storage		483.00-
	12/19/2005	505289	RA	Recorder D	Recorder Document Storage		390.00-
		505289	RA	Doc St Ch	Document Storage Charges		3.00-
	12/20/2005	505299	RA	Recorder D	Recorder Document Storage		315.00-
		505299	RA	Doc St Ch	Document Storage Charges		252.00-
	12/21/2005	505335	RA	Recorder D	Recorder Document Storage		438.00-
		505335	RA	Doc St Ch	Document Storage Charges		252.00-
	12/22/2005	505362	RA	Recorder D	Recorder Document Storage		288.00-
		505362	RA	Doc St Ch	Document Storage Charges		1,167.00-
	12/23/2005	505385	RA	Recorder D	Recorder Document Storage		417.00-
		505385	RA	Doc St Ch	Document Storage Charges		54.00-
	12/27/2005	505404	RA	Recorder D	Recorder Document Storage		534.00-
	12/28/2005	505440	RA	Recorder D	Recorder Document Storage		585.00-
		505440	RA	Doc St Ch	Document Storage Charges		6.00-
	12/29/2005	505465	RA	Recorder D	Recorder Document Storage		576.00-
		505465	RA	Doc St Ch	Document Storage Charges		3.00-
	12/30/2005	505468	RA	Recorder D	Recorder Document Storage		549.00-
		505468	RA	Doc St Ch	Document Storage Charges		3.00-
		505488	JE	pw010305	2005 Revenue Rec in 06		531.00-
					MONTH TOTAL: DECEMBER 2006	.00	11,694.00-
	1/03/2006	600036	RA	Doc St Ch	Document Storage Charges		21.00-
					MONTH TOTAL: JANUARY 2006	.00	21.00-
					Base Acct#/Detl Acct# TOTAL: Doc Storag	120,000.00	118,068.00-
					Sub-Dept. TOTAL : LEGAL REC	120,000.00	118,068.00-
					Department TOTAL : CO.RECORDR	120,000.00	118,068.00-
					Fund TOTAL : RECORD DOC	120,000.00	118,068.00-

PROJECT #	G/L DATE	JOURNAL	TYPE	SOURCE	TRANSACTION DESCRIPTION	BUDGET	REVENUES
	G/L ACCOUNT NUMBER: 0137-0006-0008 0410-0181				DESCRIPTION: GIS Document Fees		
		BEGINNING BALANCE					
	12/01/2005	504985	RA	Rec-GIS DS	Recorder-GIS Doc Storage	.00	35,387.00-
	12/02/2005	505013	RA	Rec-GIS DS	Recorder-GIS Doc Storage		128.00-
	12/05/2005	505049	RA	Rec-GIS DS	Recorder-GIS Doc Storage		146.00-
		505049	RA	GIS Doc Ch	GIS Document Storage Char		3.00-
	12/06/2005	505081	RA	Rec-GIS DS	Recorder-GIS Doc Storage		193.00-
	12/07/2005	505119	RA	GIS Doc Ch	GIS Document Storage Char		2.00-
	12/08/2005	505146	RA	Rec-GIS DS	Recorder-GIS Doc Storage		171.00-
	12/09/2005	505156	RA	Rec-GIS DS	Recorder-GIS Doc Storage		117.00-
	12/12/2005	505167	RA	Rec-GIS DS	Recorder-GIS Doc Storage		122.00-
	12/13/2005	505186	RA	Rec-GIS DS	Recorder-GIS Doc Storage		163.00-
		505186	RA	GIS Doc Ch	GIS Document Storage Char		8.00-
	12/14/2005	505220	RA	Rec-GIS DS	Recorder-GIS Doc Storage		165.00-
		505220	RA	GIS Doc Ch	GIS Document Storage Char		19.00-
	12/15/2005	505256	RA	Rec-GIS DS	Recorder-GIS Doc Storage		129.00-
	12/16/2005	505263	RA	Rec-GIS DS	Recorder-GIS Doc Storage		161.00-
	12/19/2005	505289	RA	Rec-GIS DS	Recorder-GIS Doc Storage		130.00-
		505289	RA	GIS Doc Ch	GIS Document Storage Char		1.00-
	12/20/2005	505299	RA	Rec-GIS DS	Recorder-GIS Doc Storage		105.00-
		505299	RA	GIS Doc Ch	GIS Document Storage Char		84.00-
	12/21/2005	505335	RA	Rec-GIS DS	Recorder-GIS Doc Storage		146.00-
		505335	RA	GIS Doc Ch	GIS Document Storage Char		84.00-
	12/22/2005	505362	RA	Rec-GIS DS	Recorder-GIS Doc Storage		96.00-
		505362	RA	GIS Doc Ch	GIS Document Storage Char		389.00-
	12/23/2005	505385	RA	Rec-GIS DS	Recorder-GIS Doc Storage		139.00-
		505385	RA	GIS Doc Ch	GIS Document Storage Char		18.00-
	12/27/2005	505404	RA	Rec-GIS DS	Recorder-GIS Doc Storage		178.00-
	12/28/2005	505440	RA	Rec-GIS DS	Recorder-GIS Doc Storage		195.00-
		505440	RA	GIS Doc Ch	GIS Document Storage Char		2.00-
	12/29/2005	505465	RA	Rec-GIS DS	Recorder-GIS Doc Storage		192.00-
		505465	RA	GIS Doc Ch	GIS Document Storage Char		1.00-
	12/30/2005	505468	RA	Rec-GIS DS	Recorder-GIS Doc Storage		183.00-
		505468	RA	GIS Doc Ch	GIS Document Storage Char		1.00-
		505488	JE	pw010305	2005 Revenue Rec in 06		177.00-
	MONTH TOTAL: DECEMBER 2006					.00	3,898.00-
	1/03/2006	600036	RA	GIS Doc Ch	GIS Document Storage Char		7.00-
	MONTH TOTAL: JANUARY 2006					.00	7.00-
	Base Acct#/Detl Acct# TOTAL: GIS Doc Fe					.00	39,292.00-
	Sub-Dept. TOTAL : LEGAL REC					.00	39,292.00-
	Department TOTAL : CO.RECORDR					.00	39,292.00-
	Fund TOTAL : RECORD DOC					.00	39,292.00-

PROJECT #	G/L DATE	JOURNAL	TYPE	SOURCE	TRANSACTION DESCRIPTION	BUDGET	REVENUES
G/L ACCOUNT NUMBER: 0167-0006-0008 0410-0181							
					DESCRIPTION: GIS Document Fees		
					BEGINNING BALANCE		
	12/01/2005	504985	RA	Rec GIS Fu	Recorder-GIS Fund	100,000.00	108,325.00-
	12/02/2005	505013	RA	Rec GIS Fu	Recorder-GIS Fund		640.00-
	12/05/2005	505049	RA	Rec GIS Fu	Recorder-GIS Fund		730.00-
		505049	RA	GIS Fd Ch	GIS Fund Charges		570.00-
	12/06/2005	505081	RA	Rec GIS Fu	Recorder-GIS Fund		6.00-
	12/07/2005	505119	RA	Rec GIS Fu	Recorder-GIS Fund		965.00-
		505119	RA	GIS Fd Ch	GIS Fund Charges		680.00-
	12/08/2005	505146	RA	Rec GIS Fu	Recorder-GIS Fund		4.00-
	12/09/2005	505156	RA	Rec GIS Fu	Recorder-GIS Fund		855.00-
	12/12/2005	505167	RA	Rec GIS Fu	Recorder-GIS Fund		585.00-
	12/13/2005	505186	RA	Rec GIS Fu	Recorder-GIS Fund		610.00-
		505186	RA	GIS Fd Ch	GIS Fund Charges		815.00-
	12/14/2005	505220	RA	Rec GIS Fu	Recorder-GIS Fund		16.00-
		505220	RA	GIS Fd Ch	GIS Fund Charges		825.00-
	12/15/2005	505256	RA	Rec GIS Fu	Recorder-GIS Fund		38.00-
	12/16/2005	505263	RA	Rec GIS Fu	Recorder-GIS Fund		645.00-
	12/19/2005	505289	RA	Rec GIS Fu	Recorder-GIS Fund		805.00-
		505289	RA	GIS Fd Ch	GIS Fund Charges		650.00-
	12/20/2005	505299	RA	Rec GIS Fu	Recorder-GIS Fund		2.00-
		505299	RA	GIS Fd Ch	GIS Fund Charges		525.00-
	12/21/2005	505335	RA	Rec GIS Fu	Recorder-GIS Fund		420.00-
		505335	RA	GIS Fd Ch	GIS Fund Charges		730.00-
	12/22/2005	505362	RA	Rec GIS Fu	Recorder-GIS Fund		420.00-
		505362	RA	GIS Fd Ch	GIS Fund Charges		480.00-
	12/23/2005	505385	RA	Rec GIS Fu	Recorder-GIS Fund		1,945.00-
		505385	RA	GIS Fd Ch	GIS Fund Charges		695.00-
	12/27/2005	505404	RA	Rec GIS Fu	Recorder-GIS Fund		90.00-
	12/28/2005	505440	RA	Rec GIS Fu	Recorder-GIS Fund		890.00-
		505440	RA	GIS Fd Ch	GIS Fund Charges		975.00-
	12/29/2005	505465	RA	Rec GIS Fu	Recorder-GIS Fund		10.00-
		505465	RA	GIS Fd Ch	GIS Fund Charges		960.00-
	12/30/2005	505468	RA	Rec GIS Fu	Recorder-GIS Fund		2.00-
		505468	RA	GIS Fd Ch	GIS Fund Charges		915.00-
		505488	JE	pw010305	2005 Revenue Rec in 06		2.00-
							885.00-
MONTH TOTAL: DECEMBER 2006						.00	19,385.00-
	1/03/2006	600036	RA	GIS Fd Ch	GIS Fund Charges		14.00-
MONTH TOTAL: JANUARY 2006						.00	14.00-
Base Acct#/Detl Acct# TOTAL: GIS Doc Fe						100,000.00	127,724.00-
Sub-Dept. TOTAL : LEGAL REC						100,000.00	127,724.00-
Department TOTAL : CO.RECORDR						100,000.00	127,724.00-
Fund TOTAL : GIS FEES						100,000.00	127,724.00-

STATE STAMP INVENTORY AND RECEIPTS TO GENERAL LEDGER FOR DECEMBER 2005		GENERAL LEDGER Acct# 0151-0126-0001	
RECORDER			
Inventory as of 11/30/2005	71,400.15	A	72,705.65
Inventory Purchases for December 2005	65,011.00	B	65,011.00
Less stamps damaged or issued in error for December 2005	(1,650.00)	C	
Less inventory as of 12/30/2005	(59,725.15)	D	(61,375.15)
Total Receipts for December 2005	75,036.00	E=SUM(A:D)	(1,373.00)
Plus 11/30/2005 Receipts	1,305.50	F	
Less 12/30/2005 Receipts	(1,373.00)	G	
Total	74,968.50	H=SUM(E:G)	74,968.50
<p>B = Amount includes an IDOR credit of \$</p> <p>C = Stamps were voided and will be or have been submitted to IDOR for credit</p> <p>F = Receipts for the last business day of previous month</p> <p>G = Receipts for the last business day of report month</p> <p>Adjustments are made by F & G because the Recorder's daily receipts are not turned into the General Ledger until the next business day. These adjustments must be made in order to balance to the General Ledger.</p>			
<p>DON EVERHART CHIEF DEPUTY RECORDER</p>			

PROJECT #	G/L DATE	JOURNAL	TRAN JRN	TYPE	SOURCE	DESCRIPTION	DEBIT AMOUNT	CREDIT AMOUNT	ACTUAL BALANCE
G/L ACCOUNT NUMBER: 0151 0126-0001									
FISCAL YEAR TO DATE:									
	12/01/2005	504985	RA	JE	State	Inventory		1,305.50	72,705.65
	12/02/2005	505013	RA	JE	State	State Rev Stamp Sales		3,434.00	71,400.15
	12/05/2005	505049	RA	JE	State	State Rev Stamp Sales		3,997.00	67,966.15
	12/06/2005	505081	RA	JE	State	State Rev Stamp Sales		4,252.00	63,969.15
	12/07/2005	505119	RA	JE	State	State Rev Stamp Sales		2,510.50	59,717.15
	12/08/2005	505146	RA	JE	State	State Rev Stamp Sales		6,547.00	57,206.65
	12/09/2005	505156	RA	JE	State	State Rev Stamp Sales		2,253.00	50,659.65
	12/12/2005	505167	RA	JE	State	State Rev Stamp Sales		3,227.50	48,406.65
	12/13/2005	505186	RA	JE	State	State Rev Stamp Sales		4,421.50	45,179.15
	12/14/2005	505215	AP	JE	Acct's Paybl	ILLINOIS D RECORDER/REAL	65,011.00		40,757.65
	12/15/2005	505220	RA	JE	State	State Rev Stamp Sales		5,769.00	105,768.65
	12/16/2005	505256	RA	JE	State	State Rev Stamp Sales		1,305.50	99,999.65
	12/19/2005	505263	RA	JE	State	State Rev Stamp Sales		3,065.00	98,694.15
	12/19/2005	505289	RA	JE	State	State Rev Stamp Sales		4,389.50	95,629.15
	12/20/2005	505299	RA	JE	State	State Rev Stamp Sales		2,647.00	91,239.65
	12/21/2005	505335	RA	JE	State	State Rev Stamp Sales		3,096.00	88,592.65
	12/22/2005	505362	RA	JE	State	State Rev Stamp Sales		2,149.50	85,496.65
	12/23/2005	505385	RA	JE	State	State Rev Stamp Sales		4,066.50	83,347.15
	12/27/2005	505404	RA	JE	State	State Rev Stamp Sales		3,900.50	79,280.65
	12/28/2005	505440	RA	JE	State	State Rev Stamp Sales		5,139.50	75,380.15
	12/29/2005	505465	RA	JE	State	State Rev Stamp Sales		4,282.00	70,240.65
	12/30/2005	505468	RA	JE	State	State Rev Stamp Sales		3,210.50	65,958.65
		505488	JE	JE	pw010305	2005 Revenue Rec in 06		1,373.00	62,748.15
MONTH TOTAL: DECEMBER							65,011.00	76,341.50	61,375.15
Base Acct#/Detl Acct# TOTAL: Supplies							65,011.00	76,341.50	61,375.15
Fund TOTAL							65,011.00	76,341.50	61,375.15

Date	End-of-day (EOD) register balance	CREDIT to General Ledger	EOD register +/- (-)	Stamp Purchases
12/01/2005	67,966.15	3,434.00		
12/02/2005	63,969.15	3,997.00		
12/05/2005	59,717.15	4,252.00		
12/06/2005	57,206.65	2,510.50		
12/07/2005	50,659.65	6,547.00		
12/08/2005	48,406.65	2,253.00		
12/09/2005	45,179.15	3,227.50		
12/12/2005	40,757.65	4,421.50		
12/13/2005	34,988.65	5,769.00		
12/14/2005	33,683.15	1,305.50		
12/15/2005	30,618.15	3,065.00		
12/16/2005	26,228.65	4,389.50		
12/19/2005	23,581.65	2,647.00		
12/20/2005	20,485.65	3,096.00		
12/21/2005	18,336.15	2,149.50		
12/22/2005	12,619.65	4,066.50	1,650.00	
12/23/2005	73,730.15	3,900.50		65,011.00
12/27/2005	68,590.65	5,139.50		
12/28/2005	64,308.65	4,282.00		
12/29/2005	61,098.15	3,210.50		
12/30/2005	59,725.15	1,373.00		
December Total:		75,036.00	1,650.00	65,011.00
	Day Average:	3,573.14		

don.everhart:
 Stamp issued in excess. Stamp voided & will be submitted to IDOR for credit.
 File # 2005-38933

CHIEF DEPUTY RECORDER

Date	End-of-day (EOD) register balance	CREDIT to General Ledger	EOD register + / (-)	Stamp Purchases
11/01/2005	86,310.65	2,812.00	177.00	
11/02/2005	80,494.15	5,547.50	269.00	
11/03/2005	78,707.65	1,786.50		
11/04/2005	73,426.65	5,281.00		
11/07/2005	68,413.15	5,013.50		
11/08/2005	66,731.65	1,681.50		
11/09/2005	63,344.15	3,387.50		
11/10/2005	60,862.15	2,482.00		
11/14/2005	57,602.65	3,259.50		
11/15/2005	56,435.65	1,167.00		
11/16/2005	50,469.15	5,966.50		
11/17/2005	45,708.65	4,760.50		
11/18/2005	44,041.65	1,667.00		
11/21/2005	40,921.65	3,120.00		
11/22/2005	16,974.65	23,947.00		
11/23/2005	13,739.65	3,235.00		
11/28/2005	79,923.65	19,630.00		85,814.00
11/28/2005	76,724.65	3,199.00		
11/29/2005	72,705.65	4,019.00		
11/30/2005	71,400.15	1,305.50		
November Total:		103,267.50	446.00	85,814.00
		5,163.38		

Day Average:

CHIEF DEPUTY RECORDER

don.everhart:
Stamp issued in excess. Stamp voided & will be submitted to IDOR for credit.
File # 2005-33269

don.everhart:
Stamp issued in excess. Stamp voided & will be submitted to IDOR for credit.
File # 2005-33436

don.everhart:
File # 2005-35603 (recorded 11/23/05) required a \$19,630.00 PTAX stamp due to PTAX-203-B declaration. Insufficient EOD register balance for same-day issue. Stamp issued after PTAX stamp purchase from IDOR. \$22,865.00 total stamp issues for 11/23/05 recordings.

don.everhart:
\$ 446.00 IDOR credit (Nov. 1-2, 2005)
\$ 85368.00 purchase

don.everhart:
End-of-day register balance for 11/28/05 recordings only.

MONTH OF NOVEMBER

15 Dots

DATE	(A)		TOTAL OF COLUMNS (A), AND, (B)
	ASCENDING REGISTER	DESCENDING REGISTER	
11/1	35736135	8631065	
11/2	36317785	8049415	
11/3	36496455	7830765	
11/4	37024535	7342665	
11/5	37525885	6841315	
11/6	37694035	6673165	
11/7	38032785	6334415	
11/8	38280985	6086215	
11/9	38606935	5760265	
11/10	38723635	5643565	
11/11	39320285	5046915	
11/12	39796335	4530865	
11/13	39963035	4404165	
11/14	40275035	4092165	
11/15	42669735	1697465	
11/16	42993235	9955305	452948600
11/17	42993235	1373965	
11/18	44956235	7992365	
11/19	45276135	7672465	
11/20	45678035	7270565	
11/21	45808585	7140015	

MONTH OF

DECEMBER

19 Dots

DATE	(A)		TOTAL OF COLUMNS (A), AND, (B)
	ASCENDING REGISTER	DESCENDING REGISTER	
12/1	46151985	6796615	
12/2	46551685	6396915	
12/3	46976885	5921715	
12/4	47227935	5720665	
12/5	47882635	5065965	
12/6	48107935	4840665	
12/7	48430685	4517915	
12/8	4872835	4075765	
12/9	4949735	3498865	
12/10	49580285	3368315	
12/11	4986785	3061815	
12/12	50325735	262865	
12/13	50590435	2358165	
12/14	50900035	2048565	
12/15	51114985	1833615	
12/16	51686635	1261965	
12/17	52076685	7373015	
12/18	52590635	6859065	
12/19	53018835	6430865	
12/20	53339885	6109815	
12/21	53477185	5972515	

METER RECORD BOOK (STATE REVENUE STAMPS) FOR NOVEMBER 2005 AND DECEMBER 2005

Recorder's Receivable Reconciliation

December 2005

<u>Date</u>		<u>General</u> <u>0001</u>	<u>Doc Storage</u> <u>0137</u>	<u>GIS</u> <u>0167</u>
12/1/2005	Recorder	1,880.50	1,436.00	718.00
12/2/2005	General Ledger	1,880.50	1,436.00	718.00
	Difference	-	-	-
12/2/2005	Recorder	1,521.50	1,148.00	574.00
12/5/2005	General Ledger	1,521.50	1,148.00	574.00
	Difference	-	-	-
12/5/2005	Recorder	1,490.50	1,124.00	562.00
12/6/2005	General Ledger	1,490.50	1,124.00	562.00
	Difference	-	-	-
12/6/2005	Recorder	1,500.50	1,132.00	566.00
12/7/2005	General Ledger	1,500.50	1,132.00	566.00
	Difference	-	-	-
12/7/2005	Recorder	1,500.50	1,132.00	566.00
12/8/2005	General Ledger	1,500.50	1,132.00	566.00
	Difference	-	-	-
12/8/2005	Recorder	1,500.50	1,132.00	566.00
12/9/2005	General Ledger	1,500.50	1,132.00	566.00
	Difference	-	-	-
12/9/2005	Recorder	1,500.50	1,132.00	566.00
12/12/2005	General Ledger	1,500.50	1,132.00	566.00
	Difference	-	-	-
12/12/2005	Recorder	1,543.50	1,164.00	582.00
12/13/2005	General Ledger	1,543.50	1,164.00	582.00
	Difference	-	-	-
12/13/2005	Recorder	1,638.50	1,240.00	620.00
12/14/2005	General Ledger	1,638.50	1,240.00	620.00
	Difference	-	-	-
12/14/2005	Recorder	1,638.50	1,240.00	620.00
12/15/2005	General Ledger	1,638.50	1,240.00	620.00
	Difference	-	-	-
12/15/2005	Recorder	1,638.50	1,240.00	620.00
12/16/2005	General Ledger	1,638.50	1,240.00	620.00
	Difference	-	-	-
12/16/2005	Recorder	1,628.00	1,240.00	620.00
12/19/2005	General Ledger	1,628.00	1,240.00	620.00
	Difference	-	-	-

Recorder's Receivable Reconciliation

December 2005

<u>Date</u>		<u>General 0001</u>	<u>Doc Storage 0137</u>	<u>GIS 0167</u>
12/19/2005	Recorder	2,636.00	1,576.00	1,040.00
12/20/2005	General Ledger	2,636.00	1,576.00	1,040.00
	Difference	-	-	-
12/20/2005	Recorder	3,644.00	1,912.00	1,460.00
12/21/2005	General Ledger	3,644.00	1,912.00	1,460.00
	Difference	-	-	-
12/21/2005	Recorder	8,312.00	3,468.00	3,405.00
12/22/2005	General Ledger	8,312.00	3,468.00	3,405.00
	Difference	-	-	-
12/22/2005	Recorder	1,676.00	1,256.00	640.00
12/23/2005	General Ledger	1,676.00	1,256.00	640.00
	Difference	-	-	-
12/23/2005	Recorder	1,676.00	1,256.00	640.00
12/26/2005	General Ledger	1,676.00	1,256.00	640.00
	Difference	-	-	-
12/27/2005	Recorder	1,701.25	1,264.00	650.00
12/28/2005	General Ledger	1,701.25	1,264.00	650.00
	Difference	-	-	-
12/28/2005	Recorder	1,682.25	1,260.00	642.00
12/29/2005	General Ledger	1,682.25	1,260.00	642.00
	Difference	-	-	-
12/29/2005	Recorder	1,687.25	1,264.00	644.00
12/30/2005	General Ledger	1,687.25	1,264.00	644.00
	Difference	-	-	-
12/30/2005	General Ledger	1,687.25	1,264.00	644.00
12/31/2005	General Ledger	1,642.25	1,236.00	630.00
	Difference **	45.00	28.00	14.00
Explanation of difference **: Write off of Illinois Department of Public Aid uncollectable Accounts Receivable. Total of \$87.00 This is a carry-over from the previous office holder.				
Don Everhart				
Chief Deputy Recorder				

F I N A N C I A L M A N A G E M E N T
 ACCUMULATED TRANSACTION LISTING

PROJECT #	G/L DATE	JOURNAL	TRAN JRN	DESCRIPTION	DEBIT AMOUNT	CREDIT AMOUNT	ACTUAL BALANCE
G/L ACCOUNT NUMBER:				Due From Recording Chrgs	FISCAL YEAR TO DATE:		
	12/05/2005	0001 0122-0022	RA	JE Record Rec 2840order Receivable		375.00	1,880.50
	12/05/2005	505049	RA	JE Rec FeeCH Recording Fee Charges	16.00		1,505.50
	12/06/2005	505081	RA	JE Record Rec Recorder Receivable		31.00	1,521.50
	12/07/2005	505119	RA	JE Rec FeeCH Recording Fee Charges	10.00		1,490.50
	12/13/2005	505186	RA	JE Rec FeeCH Recording Fee Charges	43.00		1,500.50
	12/14/2005	505220	RA	JE Rec FeeCH Recording Fee Charges	95.00		1,543.50
	12/19/2005	505289	RA	JE Record Rec Recorder Receivable		15.50	1,638.50
	12/20/2005	505299	RA	JE Rec FeeCH Recording Fee Charges	5.00		1,623.00
	12/21/2005	505335	RA	JE Rec FeeCH Recording Fee Charges	1,008.00		1,628.00
	12/22/2005	505362	RA	JE Rec FeeCH Recording Fee Charges	1,008.00		2,636.00
	12/23/2005	505385	RA	JE Record Rec Recorder Receivable	4,668.00		3,644.00
	12/28/2005	505440	RA	JE Rec FeeCH Recording Fee Charges	216.00	6,852.00	8,312.00
	12/29/2005	505465	RA	JE Copy Fee Copy Fee Charges	1.25		1,460.00
	12/30/2005	505468	RA	JE Rec FeeCH Recording Fee Charges	24.00		1,676.00
	12/31/2005	505474	JE	WRITE OFF IDPA UNCOLL A/R		45.00	1,677.25
MONTH TOTAL: DECEMBER					7,104.25	7,342.50	1,642.25
Base Acct#/Detl Acct# TOTAL: From Recrd					7,104.25	7,342.50	1,642.25
Hand TOTAL					7,104.25	7,342.50	1,642.25

Hand TOTAL

PROJECT #	G/L DATE	JOURNAL	TRAN JRN	TYPE	SOURCE	DESCRIPTION	DEBIT AMOUNT	CREDIT AMOUNT	ACTUAL BALANCE
		0137 0122-0022				Due From Recording Chrgs			
	12/05/2005	505049	RA	JE Stg Rec		Storage Receivable		300.00	1,436.00
		505049	RA	JE Doc St Ch		Document Storage Charges	9.00		1,136.00
		505049	RA	JE GIS Doc Ch		GIS Document Storage Char			1,145.00
	12/06/2005	505081	RA	JE Stg Rec		Storage Receivable		24.00	1,148.00
	12/07/2005	505119	RA	JE Doc St Ch		Document Storage Charges	6.00		1,130.00
		505119	RA	JE GIS Doc Ch		GIS Document Storage Char	2.00		1,132.00
	12/13/2005	505186	RA	JE Doc St Ch		Document Storage Charges	24.00		1,156.00
		505186	RA	JE GIS Doc Ch		GIS Document Storage Char	8.00		1,164.00
	12/14/2005	505220	RA	JE Doc St Ch		Document Storage Charges	57.00		1,221.00
		505220	RA	JE GIS Doc Ch		GIS Document Storage Char	19.00		1,240.00
	12/19/2005	505289	RA	JE Stg Rec		Storage Receivable		4.00	1,236.00
		505289	RA	JE Doc St Ch		Document Storage Charges	3.00		1,239.00
		505289	RA	JE GIS Doc Ch		GIS Document Storage Char	1.00		1,240.00
	12/20/2005	505299	RA	JE Doc St Ch		Document Storage Charges	252.00		1,492.00
		505299	RA	JE GIS Doc Ch		GIS Document Storage Char	84.00		1,576.00
	12/21/2005	505335	RA	JE Doc St Ch		Document Storage Charges	252.00		1,828.00
		505335	RA	JE GIS Doc Ch		GIS Document Storage Char	84.00		1,912.00
	12/22/2005	505362	RA	JE Doc St Ch		Document Storage Charges	1,167.00		3,079.00
		505362	RA	JE GIS Doc Ch		GIS Document Storage Char	389.00		3,468.00
	12/23/2005	505385	RA	JE Stg Rec		Storage Receivable		2,284.00	1,184.00
		505385	RA	JE Doc St Ch		Document Storage Charges	54.00		1,238.00
		505385	RA	JE GIS Doc Ch		GIS Document Storage Char	18.00		1,256.00
	12/28/2005	505440	RA	JE Doc St Ch		Document Storage Charges	6.00		1,262.00
		505440	RA	JE GIS Doc Ch		GIS Document Storage Char	2.00		1,264.00
	12/29/2005	505465	RA	JE Stg Rec		Storage Receivable		8.00	1,256.00
		505465	RA	JE Doc St Ch		Document Storage Charges	3.00		1,259.00
		505465	RA	JE GIS Doc Ch		GIS Document Storage Char	1.00		1,260.00
	12/30/2005	505468	RA	JE Doc St Ch		Document Storage Charges	3.00		1,263.00
		505468	RA	JE GIS Doc Ch		GIS Document Storage Char	1.00		1,264.00
	12/31/2005	505474	JE	JE AUD1		WRITE OFF IDPA UNCOLL A/R		28.00	1,236.00
MONTH TOTAL: DECEMBER							2,448.00	2,648.00	1,236.00
Base Acct#/Detl Acct# TOTAL: From Recrd							2,448.00	2,648.00	1,236.00
Fund TOTAL							2,448.00	2,648.00	1,236.00

PROJECT #	G/L DATE	JOURNAL	TRAN	TYPE	SOURCE	DESCRIPTION	DEBIT AMOUNT	CREDIT AMOUNT	ACTUAL BALANCE
	G/L ACCOUNT NUMBER: 0167 0122-0022					Due From Recording Chrgs		FISCAL YEAR TO DATE:	
	12/05/2005	505049	RA	JE	GIS Rec	GIS Receivable		150.00	718.00
	12/06/2005	505049	RA	JE	GIS Pd Ch	GIS Fund Charges	6.00		568.00
	12/07/2005	505081	RA	JE	GIS Rec	GIS Receivable		12.00	574.00
	12/07/2005	505119	RA	JE	GIS Pd Ch	GIS Fund Charges	4.00		562.00
	12/13/2005	505186	RA	JE	GIS Pd Ch	GIS Fund Charges	16.00		566.00
	12/14/2005	505220	RA	JE	GIS Pd Ch	GIS Fund Charges	38.00		582.00
	12/19/2005	505289	RA	JE	GIS Rec	GIS Receivable		2.00	620.00
	12/20/2005	505289	RA	JE	GIS Pd Ch	GIS Fund Charges	2.00		618.00
	12/21/2005	505299	RA	JE	GIS Pd Ch	GIS Fund Charges	420.00		620.00
	12/21/2005	505335	RA	JE	GIS Pd Ch	GIS Fund Charges	420.00		1,040.00
	12/22/2005	505362	RA	JE	GIS Pd Ch	GIS Fund Charges	1,945.00		1,460.00
	12/23/2005	505385	RA	JE	GIS Rec	GIS Receivable		2,855.00	3,405.00
	12/28/2005	505385	RA	JE	GIS Pd Ch	GIS Fund Charges	90.00		550.00
	12/29/2005	505440	RA	JE	GIS Pd Ch	GIS Fund Charges	10.00		640.00
	12/29/2005	505465	RA	JE	GIS Rec	GIS Receivable		10.00	650.00
	12/30/2005	505465	RA	JE	GIS Pd Ch	GIS Fund Charges	2.00		640.00
	12/31/2005	505468	RA	JE	GIS Pd Ch	GIS Fund Charges	2.00		642.00
			JE	JE	AUD1	WRITE OFF IDPA UNCOLL A/R		14.00	644.00
							2,955.00	3,043.00	630.00

MONTH TOTAL: DECEMBER

Base Acct#/Det1 Acct# TOTAL: From Recrd 2,955.00 3,043.00 630.00

Fund TOTAL 2,955.00 3,043.00 630.00

McLean County
 DATE 1/03/06
 TIME 12:48:18

F I N A N C I A L M A N A G E M E N T
 JOURNAL EDIT LISTING - SUMMARY

PAGE 1
 GL1215
 AUD1

JOURNAL TYPE	JOURNAL DATE	DESCRIPTION	SOURCE	TOTAL DEBITS	TOTAL CREDITS	ASSETS/LIABILITIES	REVENUES	EXPENSES
0505474	12/31/2005	Journal Entry	WRITE OFF IDEA UNCOLL A/R AUD1	45.00	45.00	45.00	.00	45.00
		Fund		28.00	28.00	28.00	.00	28.00
		0001		14.00	14.00	14.00	.00	14.00
		0137						
		0167						
		JOURNAL 0505474 TOTAL		87.00	87.00	87.00	.00	87.00

McLean County
 DATE 1/03/06
 TIME 12:48:18

F I N A N C I A L M A N A G E M E N T
 JOURNAL EDIT LISTING - DETAIL

REC #	SOURCE	DESCRIPTION	BANK	QUANTITY	COMMENT	ACCOUNT NUMBER	TRANSFER	Fund & Department	PROJECT/SUB	CONTRACT#	DEBITS	CREDITS
JOURNAL # : 0505474 TYPE: Journal Entry												
1	AUD1	WRITE OFF IDPA UNCOLL A/R				0001	0122-0022				.00	45.00
2	AUD1	WRITE OFF IDPA UNCOLL A/R				0001-0006-0008	0990-0010				45.00	.00
3	AUD1	WRITE OFF IDPA UNCOLL A/R				0137	0122-0022				.00	28.00
4	AUD1	WRITE OFF IDPA UNCOLL A/R				0137-0006-0008	0990-0010				28.00	.00
5	AUD1	WRITE OFF IDPA UNCOLL A/R				0167	0122-0022				.00	14.00
6	AUD1	WRITE OFF IDPA UNCOLL A/R				0167-0006-0008	0990-0010				14.00	.00

JOURNAL DATE: 12/31/2005 DESCRIPTION: WRITE OFF IDPA UNCOLL A/R
 45.00

JOURNAL ENTRIES . . . : 6 JOURNAL 0505474 TOTAL : 87.00

TOTALS BY TYPE : Journal Entries : 87.00

RESOLUTION NO. _____

WHEREAS, on May 18, 1999, this County Board of McLean County, Illinois, entered into a certain written "PROFESSIONAL SERVICE AGREEMENT" with Joseph E. Meyer providing for the creation and administration of a Delinquent Tax Liquidation Program; and

WHEREAS, the costs of conducting said Program, including costs of obtaining title to tax delinquent parcels and conveying such parcels through public auctions, have substantially increased; and

WHEREAS, increasing the minimum auction sale bid to \$600.00 per parcel will recover such increased program costs;

NOW THEREFORE BE IT RESOLVED by the County Board of McLean County, Illinois, that the minimum auction sale bid for parcels sold at public oral or sealed bid auction sales through the Delinquent Tax Liquidation Program shall be, and is hereby, increased to \$600.00 per parcel; and

FURTHER, that the increase in minimum bid hereby effected shall be applied so as to increase by \$100.00, to a total of \$350.00, the minimum fee paid to the said Joseph E. Meyer for his services on account of the sale of any parcel pursuant to said Agreement and to increase the Taxing District's proceeds by an additional \$50.00 per item; and

FURTHER, that the Chairman of this County Board is hereby authorized to enter into and to subscribe, on behalf of this County Board, the written "ADDENDUM TO PROFESSIONAL SERVICE AGREEMENT" presented to this meeting and providing for the increase in minimum auction sale bid hereby effected, and that all other terms and provisions of the said "PROFESSIONAL SERVICE AGREEMENT", as heretofore amended, shall remain in full force and effect.

APPROVED AND ADOPTED at a regular meeting of the County Board of McLean County, Illinois, this ____ day of _____, A.D., 2006.

County Board Chairman

ATTEST:

County Clerk

ADDENDUM TO PROFESSIONAL SERVICE AGREEMENT

THIS AGREEMENT, entered into by and between the County of McLean, Illinois, hereinafter referred to as "County", and Joseph E. Meyer, hereinafter referred to as "Contractor";

WITNESSETH:

WHEREAS, the parties hereto have heretofore entered into a written instrument entitled "PROFESSIONAL SERVICE AGREEMENT" bearing date of May 18, 1999 (hereinafter referred to as "the Agreement"); and

WHEREAS, the parties desire to amend the Agreement as hereinafter set forth;

NOW THEREFORE, for and in consideration of the sum of TEN DOLLARS (\$10.00), and for other good and valuable consideration, the parties agree as follows, to-wit:

1. That Subparagraph B of Paragraph 4 of the Agreement is hereby deleted in full, and the following is hereby substituted therefor:

B. When a tax deed has been taken as to any parcel administered through the Program, and upon conveyance thereof to a new owner through a public oral or sealed bid auction sale, Agent shall receive a minimum of THREE HUNDRED FIFTY DOLLARS (\$350.00) or TWENTY-FIVE PERCENT (25%) of the purchase price, whichever is greater. In event the sale price of any parcel is THREE HUNDRED FIFTY DOLLARS (\$350.00) or less, the Agent shall receive the full sale price as compensation and no additional fee shall be paid on account of the sale of such parcel.

2. All other terms and provisions of the Agreement, as heretofore amended, shall remain in full force and effect between the parties hereto.

Agreed, entered and signed this _____ day of _____, A.D., 2006.

The County of McLean, Illinois
A Body Corporate and Politic

By _____
County Board Chairman

Joseph E. Meyer, Agent

ATTEST:

County Clerk



PeggyAnn Milton
McLean County Clerk
(309) 888-5190
Fax (309) 888-5932
115 E Washington Street, Room 102
PO Box 2400
Bloomington, IL 61702-2400
Website: www.mcleancountyil.gov/countyclerk

DATE: January 17, 2006

TO: Chairman Sorensen
Honorable Members of the Finance Committee

FROM: Katie Flynn, Tax Administrator *Katie Flynn*

RE: County Clerk Monthly Activity Report

Please find enclosed a Monthly Activity Report of the McLean County Clerk's Office for the fourth quarter of last year, 2005, for your information and review.

Beginning with the first quarterly report for the year 2006, we will have an additional column reporting the 2005 year-to-date data for comparison purposes.

Thank you.

cc: John Zeunik

Enclosures

PeggyAnn Milton
McLean County Clerk
2005 Monthly Activity Report
(For Period Ended December 31)

Example	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	2005 YTD	2005 Percent of Budget
	Number Processed Dollar Amount Generated	Number Processed Dollar Amount Generated	Number Processed Dollar Amount Generated	Number Processed Dollar Amount Generated	Number Processed Dollar Amount Generated	Number Processed Dollar Amount Generated	Number Processed Dollar Amount Generated	Number Processed Dollar Amount Generated	Number Processed Dollar Amount Generated	Number Processed Dollar Amount Generated	Number Processed Dollar Amount Generated	Number Processed Dollar Amount Generated	Number Processed Dollar Amount Generated	Number Processed Dollar Amount Generated
Birth Record Requests*	715 \$4,418.00	838 \$5,102.00	782 \$4,990.00	798 \$4,920.00	840 \$5,304.00	835 \$5,060.00	779 \$4,774.00	1,216 \$7,574.00	604 \$3,884.00	610 \$3,716.00	481 \$2,984.00	512 \$3,354.00	9,010 \$56,080.00	103.85%
Marriage Record Requests*	234 \$1,188.00	212 \$1,216.00	227 \$1,234.00	229 \$1,184.00	285 \$1,410.00	445 \$2,030.00	343 \$1,694.00	357 \$1,794.00	336 \$1,632.00	331 \$1,526.00	249 \$1,116.00	235 \$1,160.00	3,483 \$17,184.00	107.40%
Marriage License Applications	47 \$1,034.00	43 \$946.00	54 \$1,188.00	66 \$1,452.00	101 \$2,222.00	140 \$3,080.00	107 \$2,354.00	105 \$2,310.00	99 \$2,178.00	64 \$1,408.00	51 \$1,122.00	55 \$1,210.00	932 \$20,504.00	85.43%
Death Record Requests*	67 \$314.00	59 \$292.00	74 \$344.00	49 \$234.00	84 \$432.00	55 \$262.00	66 \$320.00	56 \$300.00	69 \$322.00	79 \$382.00	70 \$320.00	49 \$254.00	777 \$3,776.00	96.82%
Tax Redemptions	113 \$7,910.00	108 \$7,560.00	150 \$10,500.00	62 \$4,340.00	57 \$3,990.00	42 \$2,940.00	87 \$6,090.00	53 \$3,710.00	34 \$2,380.00	37 \$2,590.00	51 \$3,570.00	126 \$8,820.00	920 \$64,400.00	108.24%
Take Notices	97 \$1,398.74	397 \$5,724.74	204 \$2,941.68	1 \$10.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	1 \$10.00	3 \$33.26	155 \$2,235.10	858 \$12,353.52	107.09%
Assumed Names**	29 \$145.00	36 \$180.00	30 \$150.00	27 \$128.00	32 \$106.50	31 \$91.50	33 \$97.50	22 \$66.00	17 \$51.00	11 \$33.00	23 \$69.00	19 \$57.00	310 \$1,174.50	87.98%
Notary Public Commissions***	41 \$230.00	40 \$260.00	52 \$340.00	65 \$395.00	47 \$265.00	35 \$210.00	52 \$320.00	47 \$278.00	57 \$315.00	52 \$315.00	40 \$255.00	39 \$240.00	567 \$3,423.00	118.03%
Liquor Licenses****	1 \$600.00	0 \$0.00	1 \$25.00	0 \$0.00	9 \$7,100.00	6 \$6,650.00	2 \$50.00	5 \$175.00	0 \$0.00	1 \$25.00	0 \$0.00	0 \$0.00	25 \$14,625.00	105.44%
Voter Registrations/ Address Changes/ Cancellations	714	1,031	1,881	332	986	886	1,047	9,710	820	1,392	835	618	20,252	N/A

*The increase or decrease in number of Birth, Marriage and Death requests may not be consistent with the increase or decrease in the dollar amount generated each month as a result of the difference in fees for the number of original copy requests (prior to December 20th, 2005: \$8.00 each for Birth and Marriage, and \$6.00 each for Death, and on December 20th, 2005 and later: \$10.00 each for Birth and Marriage, and \$8.00 each for Death) and additional copy requests (\$2.00 each)

**The increase or decrease in number of Assumed Name Requests may not be consistent with the increase or decrease in the dollar amount generated each month as a result of the difference in fees for the number of Assumed Name Applications (\$3.00 each) and Assumed Name Changes (\$1.50 each)

***The increase or decrease in number of Notary Public Commissions may not be consistent with the increase or decrease in the dollar amount generated each month as a result of the difference in fees for the number of in-person requests (\$5.00 each) and mail-in requests (\$10.00 each)

****The increase or decrease in number of Liquor Licenses issued may not be consistent with the increase or decrease in the dollar amount generated each month as a result of the difference in fees for issuance of Class A Liquor Licenses (\$1,000.00 each), Class B Liquor Licenses (\$400.00 each), Class C Liquor Licenses (\$650.00 each), Class D Liquor Licenses (\$1,200.00 each), Class E Liquor Licenses (\$45.00/day), and pro-rated liquor licenses.



PeggyAnn Milton
McLean County Clerk
(309) 888-5190
Fax (309) 888-5932
115 E Washington Street, Room 102
PO Box 2400
Bloomington, IL 61702-2400
Website: www.mcleancountyil.gov/countyclerk

Death Record Requests in the County Clerk's Office

The County Clerk is an official custodian of vital records in McLean County. It is our responsibility and duty to:

- Keep current with changes in statutes.
- Protect the integrity of the vital records.
- Insure the proper use and administration of the vital records system, including access to the vital records and their indexes.
- Alphabetize, file in binders, and maintain death records in a safe place.
- Replace coroner's pending records with permanent records when received.
- Search new death records monthly and cover any causes of death which are HIV/AIDS related (see attachment).
- Assist with and provide paperwork for death record corrections (see attachments).
- Make all corrections on death records as provided by the State.
- Check Death Reports for persons born in Mclean County and mark their Birth Records accordingly with their date of death (see attachment).
- Create and maintain a detailed index of all deaths which occurred in McLean County for future genealogical purposes.
- Make the Index of genealogical deaths through 1915 available to the public.
- Issue certified copies of death records (including Medical Certificates of Death, Fetal Certificates of Death, and Medical Examiner's-Coroner's Certificates of Death) upon receipt of request by mail, in person, or via E-Pay.
- Certify searches of records requested and not found in McLean County (see attachment).
- Return all vital record applications received which do not include all of the required information or are from a requestor who does not meet the eligibility requirements for obtaining a specific record (see attachment).
- Collect and send monthly Death Registrar fees to the State of Illinois Department of Public Health.
- Scan all death certificate applications prior to disposing of originals.

Guidelines/Procedures when Issuing Certified Copies

Guidelines established by the Illinois Compiled Statutes (410 ILCS 535/23-25-see copy attached) determine who is able to obtain copies of each type of vital record. Attached is our application for Vital Records which includes, on the reverse side, the guidelines for obtaining each type of record.

A customer requesting a certified copy of a death record from the County Clerk's office must make their request in writing. This may be accomplished in one of three ways:

1. In person at the County Clerk's office where the customer must:
 - Meet the statutory guidelines for who is required to access the record (See reverse side of attached Vital Records Application).
 - Complete the application requiring the date of death on the record, name of deceased person, intended use of record, and written signature.
 - Provide proper identification (a valid, state-issued driver's license, ID card, Federal military ID, or US issued passport in English).

2. Through the mail where the customer must:
 - Meet the statutory guidelines for who is required to access the record.
 - Provide the date of death on the record, name of deceased person, intended use of record, written signature, and copy of a signature ID (i.e., any form of identification with their signature on it).

3. *By fax or e-mail after receiving confirmation of their payment online using our Illinois E-Pay website (see copy attached) where the customer must:
 - Meet the statutory guidelines for who is required to access the record.
 - Provide the date of death on the record, name of deceased person, intended use of record, and a faxed or e-mailed signed confirmation page including a copy of a photo ID that displays their signature (state-issued driver's license or ID, Federal military ID, or US issued passport in English).

*The total number of vital records requested online through the County Clerk's E-Pay website for the fourth quarter of 2005 (October through December) was 193.

Once the guidelines are met the procedures for certifying the death record are as follows:

- Death records from 1878 to 1915 must first be searched in the index files by last name and year of death. The book and page number where the record is located are on the index card. The record is then found in the book and copied, cut down, placed on a template, copied onto plain paper, dated, initialed, sealed, *stamped "for genealogical purposes" (if that is the intended use), and receipted.
- Death records from 1916-1940 are bound in books by year and date of death, first letter of last name, and inside or outside city. The index file is searched first to determine if the record will be found in the inside city or outside city book. The record will be in the book by the first letter of the last name, and date of death. The record is then copied, cut down, attached to the certification template, copied onto plain paper, dated, initialed, sealed, *stamped "for genealogical purposes" (if that is the intended use), and receipted.
- Death records from 1941 to current year are bound in books by year and in alphabetical order. Once the record is found, it is copied, cut down, attached to the certification template, copied onto plain paper, dated, initialed, sealed, *stamped "for genealogical purposes" (if that is the intended use), and receipted.

* Death records must be more than 20 years old to be requested for genealogical purposes.

CERTIFICATE DISTRICT NO. 010
 TEMPORARY CERTIFICATE REGISTERED NUMBER 2005 0708

**MEDICAL EXAMINER'S - CORONER'S
 CERTIFICATE OF DEATH**

Type, or Print in PERMANENT INK. See Coroner's or Funeral Directors Handbook for INSTRUCTIONS

DECEASED-NAME		FIRST	MIDDLE	LAST	SEX	DATE OF DEATH (MONTH, DAY, YEAR)	
1.					2.	3.	
COUNTY OF DEATH		AGE-LAST BIRTHDAY (YRS)	UNDER 1 YEAR		UNDER 1 DAY		DATE OF BIRTH (MONTH, DAY, YEAR)
4.		5a.	5b.	5c.	5d.		
CITY, TOWN, TWP, OR ROAD DISTRICT NUMBER		HOSPITAL OR OTHER INSTITUTION-NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER)				IF HOSP. OR INST. INDICATE D.O.A., OP/EMER, RM, INPATIENT (SPECIFY)	
6a.		6b.				6c.	
BIRTHPLACE (CITY AND STATE OR FOREIGN COUNTRY)		MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (SPECIFY)		NAME OF SURVIVING SPOUSE (MAIDEN NAME, IF WIFE)		WAS DECEASED EVER IN U.S. ARMED FORCES? (YES/NO)	
7.		8a.		8b.		9.	
SOCIAL SECURITY NUMBER		USUAL OCCUPATION		KIND OF BUSINESS OR INDUSTRY		EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED)	
10.		11a.		11b.		12. Elementary/Secondary (0-12) College (1-4 or 5+)	
RESIDENCE (STREET AND NUMBER)		CITY, TOWN, TWP, OR ROAD DISTRICT NO.		INSIDE CITY (YES/NO)		COUNTY	
13a.		13b.		13c.		13d.	
STATE		ZIP CODE		RACE (WHITE, BLACK, AMERICAN INDIAN, etc.) (SPECIFY)		OF HISPANIC ORIGIN? (SPECIFY NO OR YES-IF YES, SPECIFY CUBAN, MEXICAN, PUERTO RICAN, etc.)	
13e.		13f.		14a.		14b. <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES SPECIFY:	
FATHER-NAME		FIRST	MIDDLE	LAST	MOTHER-NAME		FIRST MIDDLE (MAIDEN) LAST
15.		16.					
INFORMANT'S NAME (TYPE OR PRINT)		RELATIONSHIP		MAILING ADDRESS (STREET AND NO. OR R.F.D., CITY OR TOWN, STATE, ZIP)			
17a.		17b.		17c.			

DECEASED

PARENTS

**"INFORMATION Pertaining to CAUSE OF DEATH IS PROHIBITED
 from Disclosure due to the CONFIDENTIALITY Laws of Illinois"**

H
RIF
UNK

CERTIFIER

DISPOSITION

I CERTIFY THAT IN MY OPINION BASED UPON MY INVESTIGATION AND/OR THE INQUISITION, THIS DEATH OCCURRED ON THE DATE, AT THE PLACE AND DUE TO THE CAUSE(S) STATED, AND THAT		THE DECEDENT WAS PRONOUNCED DEAD ON		AT
21a.		21b.		21c.
CORONER'S - MEDICAL EXAMINER'S SIGNATURE		DATE SIGNED		(MONTH, DAY, YEAR)
22a.		22b.		
CORONER'S PHYSICIAN'S NAME (Type or Print)		DATE SIGNED		(MONTH, DAY, YEAR)
23a. s/Bryan R. Mitchell, M.D.		23b.		
BURIAL, CREMATION, REMOVAL (SPECIFY)	CEMETERY OR CREMATORY-NAME	LOCATION	CITY OR TOWN	STATE
24a.	24b.	24c.		24d.
FUNERAL HOME	NAME	STREET AND NUMBER OR R.F.D.		CITY OR TOWN
25a.	FUNERAL DIRECTOR'S SIGNATURE		FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER	
25b.	25c.			
LOCAL REGISTRAR'S SIGNATURE		DATE FILED BY LOCAL REGISTRAR (MONTH, DAY, YEAR)		
26a. Robert J. Keller by nth		26b. April 15, 2005		

VR202 (Rev. 5/89)

Illinois Department of Public Health—Division of Vital Records

(BASED ON 1989 U.S. STANDARD CERTIFICATE)

ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Division Of Vital Records

605 W. Jefferson St.

Springfield, IL 62702-5097

217-782-6553

AFFIDAVIT AND CERTIFICATE OF CORRECTION INSTRUCTIONS

This affidavit and certificate of correction must be completed before this office can amend a birth, stillborn or death record. The only exceptions to this are in cases of a court ordered legal name change or when an amendment must be made due to a voluntary acknowledgment of paternity.

1. Complete the state and county in which this form is being signed and notarized.
2. Indicate if this is a death, stillborn or birth record by circling the correct type of record.
3. Provide the information, as it presently appears, on the record.
4. Indicate what item is to be corrected (e.g., child's name, mother's date of birth, date of death, etc.)
5. List the incorrect information **as it presently appears** on the record.
6. List the way the information should appear on the record.
7. Provide your complete name, relationship to the person on the record in question and address.
8. Take this form to a notary public and sign it in his/her presence. Notary publics are available at most banks, currency exchanges, post offices, etc.
9. The notary public will supply his/her address, date notarized, signature and notary seal or stamp. This entire section must be completed, including the notary seal or stamp.

Once completed, submit the original form to the Division of Vital Records at the above address. If you received this document from the division, return it in the self-addressed envelope provided.

A \$15 fee is required before any amendments can be made to the record. This includes one certified copy of the amended record. Additional certified copies are \$2 each if ordered at the same time. Make check or money order payable to Illinois Department of Public Health or IDPH.

If you have additional questions, please contact this office Monday, Wednesday or Friday between 8:30 a.m. and 4 p.m.

PLEASE NOTE: Most corrections, changes or additions to records require additional supporting documentation. Submitting this form does not guarantee completion of your request.



ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Division Of Vital Records

605 W. Jefferson St.

Springfield, IL 62702-5097

STATE OF ILLINOIS AFFIDAVIT AND CERTIFICATE OF CORRECTION

State of _____ :
County of _____ : SS

Birth
Stillbirth
Death
(Indicate the type of record.)

I, _____, being duly sworn, deposes and says
(name of person making the affidavit)

FIRST; the information below lists the particulars of the record in question

Name currently on record _____

Place of birth or death _____ Date of birth or death _____
(facility, city and county) (month, day and year)

SECOND; the following information is incorrect or missing and should be corrected as follows

Table with 3 columns: Item to be corrected, Incorrect information, Correct information

(If additional room is needed, complete another affidavit.)

THIRD; that the applicant's current address is

Street address including apartment, floor or suite number _____

City, state and ZIP code _____

Relationship _____ Signature _____
(to person listed on record) (of person completing the affidavit)

Subscribed and sworn to before me this _____ day of _____, 20 _____

(Notary Public)

DO NOT WRITE BELOW THIS LINE.

Date made _____
Date made _____
Date made _____
Date made _____
Date made _____

Accepted for filing on the _____ day of _____, 20 _____ By _____
Title _____



ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Division Of Vital Records

605 W. Jefferson St.
Springfield, IL 62702-5097

APPLICATION FOR CORRECTION OF A DEATH CERTIFICATE

Death certificate corrections are \$15 and include one certified copy of the revised death record. Additional certified copies of the same record ordered at the same time are \$2 each. Make check or money order payable to Illinois Department of Public Health or IDPH. Please print or type information clearly.

Decedent's name as presently listed on record

Place of death (facility, city and county) Date of death (month, day and year)

State file number (if known)

I REQUEST THE FOLLOWING CORRECTION(S) TO THE ABOVE DEATH RECORD:

(incorrect information) should read (correct information)
(incorrect information) should read (correct information)
(incorrect information) should read (correct information)
(incorrect information) should read (correct information)

ADDITIONAL COMMENTS

Name (of person making this request) Relationship to decedent

Address (street, apartment and floor) Date
(city, state and ZIP code)

Written signature (of the person making the request)

Report of Deaths: McLean Co Health Dept to Co Clerk2

<u>FIRST_NAME</u>	<u>LAST_NA</u>	<u>ENT_DATE</u>	<u>ETH_DATE</u>	<u>RES_CITY</u>	<u>IN_CITY</u>	<u>RES_COUN</u>
Ethel	Allonge	12/23/2005	2/19/1946	Fairbury		-1
Mary J	Anderson	12/4/2005	5/6/1909	Bloomington		-1
Arthur L	Aylward	12/4/2005	12/23/1923	Bloomington		-1
Ronal R	Bagley	12/12/2005	3/30/1942	Chenoa Twp		0
Dorothy Lou	Bakke	12/3/2005	11/20/1929	Bloomington		-1
Mary	Barnette	12/12/2005	4/26/1938	Bloomington		-1
Laurence Parker	Bell	12/20/2005	3/15/1935	Heyworth		-1
Mary Frances	Bird	12/28/2005	7/22/1919	LeRoy		-1
Sophie Charlotte	Bitterberg	12/29/2005	3/28/1908	Lexington		-1
Robert A	Blessing	12/27/2005	7/8/1932	Bloomington		-1
Ruth I	Bode	12/12/2005	6/23/1911	Danvers Twp		0
Delina	Bolelli	12/10/2005	9/28/1902	Normal		-1
Erman Junior	Bradford	12/23/2005	9/7/1925	Gibson City		-1 Ford
Gerald A	Bradley	12/28/2005	10/15/1927	Bloomington		-1
Mary Maxine	Bridges	12/18/2005	8/31/1915	Anchor		-1
Michael	Bundy	12/23/2005	8/11/1950	Bloomington\		-1
Mary J	Conway	12/28/2005	9/11/1913	Bloomington		-1
Mary I	Craig	12/7/2005	11/29/1910	Bloomington		-1
Cynthia J	Cumpston	12/13/2005	6/15/1950	Bloomington		-1
Eugene	Curtis	12/25/2005	1/16/1925	Bloomington		-1
Clara E	Davis	12/22/2005	12/20/1918	Bloomington		-1
Lawanda Sue	Dawson	12/14/2005	10/21/1932	Bloomington		-1
Essie	Dennison	12/27/2005	4/27/1916	Bloomington		-1
Dolores	Detreick	12/1/2005	9/18/1909	Normal		-1
Alvin Roger	Dickerson	12/9/2005	10/4/1925	Bloomington		-1
Nancy J	Eckert	12/4/2005	7/16/1927	Bloomington		-1
Norman E	Estes	12/23/2005	3/19/1934	Urbana		-1 Champaign
Lettie Mae	Farrell	12/27/2005	2/18/1919	Carlock		-1
Bernadine E	Fell	12/27/2005	5/5/1910	Chenoa Twp		0
Della Doris	Fogle	12/4/2005	12/9/1914	Carlock		0 Woodford
Virginia Rose	Gaines	12/7/2005	9/19/1919	Roberts		-1 Ford
Edwin C	Gerdas	12/12/2005	11/21/1919	Minonk		-1 Woodford

FIRST_NAME LAST_NAME ENT_DATE IRTH_DATE RES_CITY IN_CITY RES_COUN

Paul Herman	Giese	12/27/2005	8/13/2020	Normal		-1
Donald Royden	Graning	12/7/2005	5/29/1928	Bloomington		-1
Ronald	Griffin	12/16/2005	5/31/1936	Old Town twp		0
John M	Heissler	12/28/2005	4/12/1923	Bloomington		-1
John F	Hoffman	12/5/2005	12/2/1935	Bloomington		-1
Hubert Hale	Huff	12/25/2005	6/7/1918	Normal		-1
Pearl Lee	Johnson	12/16/2005	4/12/1929	Bloomington		-1
Jack	Juvinall	12/13/2005	5/9/1926	Bloomington		-1
Lillian R	Keller	12/5/2005	4/12/1926	Bloomington		-1
Lonnie Eugene	Kirby	12/5/2005	5/14/1964	Empire Twp		0
Lorraine G	Krystofiak	12/1/2005	5/10/1926	Normal		-1
Harvey Bishop Jr	Lawton	12/2/2005	1/14/1929	Bloomington		-1
Carl E	Lorentson	12/16/2005	7/24/1926	Normal		-1
Chiu Ha	Lum	12/14/2005	2/1/1926	Bloomington		-1
Louis T	Mannucci	12/27/2005	10/8/1945	St Peters	St Charles	-1
Amber Leann	Manus	12/7/2005	4/24/1979	Lincoln	Logan	-1
Terry L	Maple	12/5/2005	11/25/1950	Clintonia Twp	DeWitt	0
Flora S	Marshall	12/27/2005	8/10/1970	Bloomington		-1
Marilyn	McKinley	12/16/2005	3/27/1926	Bloomington		-1
Mary L	Norton	12/15/2005	3/28/1916	Bloomington		-1
Hilda Vernelle	Oneal	12/5/2005	5/4/1913	LeRoy		-1
Wayne	Otto	12/17/2005	4/15/1912	Bloomington		-1
James Russell	Owen	12/4/2005	11/24/1930	Bloomington		-1
Kaubhai N	Patel	12/17/2005	8/12/1943	Bloomington		-1
Geneva Adalene	Patterson	12/3/2005	8/11/1916	Downs		-1
Dorothy R	Penning	12/6/2005	9/3/1919	Alton	Madison	-1
Kathryn L	Phipps	12/23/2005	9/27/1928	Bloomington		-1
Frances	Pilbean	12/14/2005	5/4/1920	Normal		-1
Mary Louise	Ploussard	12/4/2005	2/12/1921	Decatur		-1
Robert M	Prather	12/4/2005	2/4/1960	Bloomington		-1
Mary C	Riley	12/29/2005	12/16/1930	Bloomington		-1
Wilma Anna	Ringenberg	12/25/2005	10/3/1913	Normal		-1
Ronald B	Ross	12/19/2005	9/21/1936	Bloomington		-1
John M	Salinas	12/10/2005	12/29/1949	Pontiac		-1

<u>FIRST_NAME</u>	<u>LAST_NA</u>	<u>ENT_DATE</u>	<u>IRTH_DATE</u>	<u>RES_CITY</u>	<u>IN_CITY</u>	<u>RES_COUN</u>
Karlheinz	Schmidt	12/29/2005	4/28/1921	Chenoa twp		0
Eleanor Mae	Schroeder	12/31/2005	5/29/1926	Normal		-1
Jane	Scouller	12/7/2005	6/16/1912	Pontiac		-1 Livingston
Rosemond A	Sheets	12/26/2005	7/25/1918	Bloomington		-1
Janice E	Sigler	12/2/2005	8/9/1942	Normal		-1
Geneva P	Sizemore	12/19/2005	2/11/1924	Bloomington		-1
Willis E Sr	Slaughter	12/13/2005	10/31/1931	Hudson		-1
Cassandra J	Smiley	12/27/2005	12/16/1955	Bloomington		-1
Helen Lucille	Smith	12/29/2005	8/29/1920	Bloomington		-1
Samantha Ann	Sparks	12/21/2005	12/14/2005	Heyworth		-1
Iddrise Marie	Swanson	12/31/2005	9/22/1925	Normal		-1
Hubert Wade	Taylor	12/12/2005	6/11/1915	Normal		-1
Bernard A	Theis	12/16/2005	3/20/1940	Hudson		-1
Mary Helen	Thornbrough	12/19/2005	3/18/1909	Normal		-1
Merle I	Toepke	12/4/2005	6/28/1917	Bloomington		-1
Claude Arnold	Troyer	12/25/2005	5/14/1913	Bloomington		-1
Carol K	Tyler	12/5/2005	4/4/1941	Stanford		-1
Lawrence R	Ward	12/7/2005	1/4/1916	Chenoa Twp		0
Gary L	Wey	12/21/2005	12/20/1959	Bloomington		-1
George Richard	Wick	12/26/2005	10/10/1923	Lexington		-1
Alice Faye	Wooten	12/24/2005	9/22/1942	Bloomington		-1
David A	Young	12/5/2005	12/25/1940	Dawson Twp		0
Chia Lun	Yu	12/14/2005	12/8/1927	Bloomington		-1
Ida	Ziehmman	12/24/2005	4/30/1909	Normal		-1



State of Illinois
County of McLean

Certification that Record was not Found

Record requested was: Birth Death Fetal Death Marriage

Under the name(s):

Date:

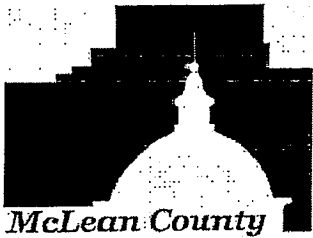
Place: McLean County, Illinois

Other Data: A search was completed from 1952-1958. No record was found using the information listed above.

I hereby certify that I am the official custodian of the vital statistics files which should contain the record requested as described above, but that upon diligent search no record could be found.

Date: July 28, 2005

Signed , McLean County Clerk



PeggyAnn Milton
McLean County Clerk
115 E Washington Street, Room 102, PO Box 2400
Bloomington, IL 61702-2400
(309) 888-5190
Fax: (309) 888-5932
Website: www.mcleancountyil.gov/countyclerk

Date _____

We received your recent Application. In processing this, we found it to be incomplete in one or more of the following areas. We are returning it in its entirety. Please re-submit and include any missing information listed below. If the request was for a Vital Record, enclosed is the application with the legal guidelines for your convenience. Thank you.

- No money enclosed or the amount is incorrect.
- Name on record is missing or incomplete.
- Date of birth not included or invalid.
- Mother's maiden name missing or incomplete.
- Father's name missing or incomplete.
- Date of death missing or incomplete.
- Date of marriage missing or incomplete.
- Groom's name missing or incomplete.
- Bride's maiden name missing or incomplete.
- Not authorized to obtain this record (see guidelines).
- Photocopy of signature I.D. was not enclosed with request (examples of a signature I.D. are: drivers license, state issued I.D., firearms owner card, etc.).
- Signature missing.
- Voter affidavit incomplete.
- Other _____

If you have any questions, please call us at the above telephone number between the hours of 8:00 A.M. and 4:30 P.M.

Sincerely,

Deputy County Clerk

Enclosures

Illinois Department of
**Public
Health**

George H. Ryan, Governor • John R. Lumpkin, M.D., M.P.H., Director

525-535 West Jefferson Street • Springfield, Illinois 62761-0001

August 1, 2001

**IMPORTANT NOTICE
FEE CHANGE EFFECTIVE IMMEDIATELY!!!**

Dear all Local Registrars and County Clerks:

The Governor signed into law P.A. 92-0141 on July 24, 2001. This law took effect upon his signature and **mandates** that your office **immediately** increase your fees by \$2 for all certified copies of death or fetal death records issued. **This \$2 increase is to be collected for the first and for each additional death or fetal death certified copy issued by your office.** If you do not already keep track of the number of certified death copies issued by your office, you are now required to do so.

The new law **requires** that this \$2 increase in your fees be transmitted monthly to the Division of Vital Records, Illinois Department of Public Health and will subsequently be deposited into the Death Certificate Surcharge Fund. The additional revenue created by the law will be used to implement a statewide Electronic Death Certificate (EDC) system.

Please destroy all old VR 360 cards and use only the revised monthly control card VR 360 (a 12-month supply is enclosed). For Local Registrars, along with the previously collected information detailing the number of new records filed, the revised card now requires the report of the total number of certified copies of all death and fetal death records issued each month. The VR 360 was revised to include these separate and distinct reporting figures on one form to simplify these two reporting requirements. We have created a separate VR 360cc card for county clerks who are not local registrars which must be mailed to the Division of Vital Records by the 5th day of the month.

- ▶ The revised VR 360 (VR360cc) is to be sent with your records each month. (See enclosed sample on how to complete).
- ▶ Send a photocopy of the VR 360 (VR 360cc) to your governmental unit accounting office to be returned to the Division of Vital Records with a check for the appropriate amount.

The check, payable to the Illinois Department of Public Health, and copy of the VR 360 (VR 360cc) are to be mailed to:

(over)

FILED
MCLEAN COUNTY, ILLINOIS
AUG 03 2001
Cory Ann Melton
COUNTY CLERK

Local Registrars and County Clerks
August 1, 2001

**Division of Vital Records
Death Certificate Surcharge Fund
Illinois Department of Public Health
605 West Jefferson
Springfield, IL 62702-5097**

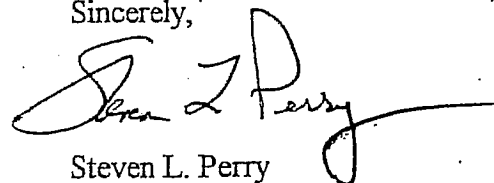
This new initiative should not come as a surprise to many of you since we have been talking about establishing an EDC for many years and actually piloted an electronic prototype in several counties a few years ago. During the hearings for the bill, the County Clerk's Association was also well represented. This extra revenue will no doubt allow us to provide better service to your offices in addition to offering you the opportunity to eventually be connected into this system. It is projected that the system will take 2 years to develop and be fully implemented.

A copy of the Act is enclosed for your review. We strongly recommend you share this bill with your governmental unit accounting office as soon as possible.

Please note that the provision in the law that restricted local registrars and county clerks from charging more than the state registrar has been eliminated. Also, after January 2003, one fourth of all revenue generated by this fee will go back to the local registrars. More on that when we are closer to that date. For now, **the certified copy fee charged by your office for the first and additional copies of any death or fetal death record must be increased by \$2.00 immediately upon receipt of this letter and payment submitted to our department monthly.**

Should you or your accounting department have any questions, please call me or Larry Davis at 1-800-237-1945. Thank you all for your cooperation and support of this new initiative.

Sincerely,



Steven L. Perry
Deputy State Registrar

Enclosures

cc: I.F.D.A.
F.D.S.A.
Illinois Coroner's and
Medical Examiner's Association

County of _____

For Month of _____, 20

Report to State Registrar of Vital Records
for all Certified Death copies issued

KIND OF CERTIFICATE	NUMBER OF CERTIFIED COPIES ISSUED	Pursuant to P.A. 92-0141, fees for all certified copies of death or fetal death records issued must be increased by \$2.00 for each copy. Each month, in addition to current marriage reporting, a VR360cc card must also be submitted to the Division of Vital Records. Please instruct your governmental unit accounting office to remit the monthly dollar total shown on the card, payable to the Illinois Department of Public Health, and a copy of the VR360cc card to: Division of Vital Records Death Certificate Surcharge Fund Illinois Department of Public Health 605 West Jefferson Street Springfield, IL 62702-5097
FETAL DEATH	x \$2.00 =	
DEATH - Medical	x \$2.00 =	
DEATH - Coroner's Temp.	x \$2.00 =	
DEATH - Coroner's Perm.	x \$2.00 =	
TOTAL	x \$2.00 =	

Date: _____

Signed: _____

County Clerk

ions of this record filed on of births, e or record .916, may be provisions of thereto, as ls governing the Depart-

Section after s face; shall de; and shall description of ment shall be r.as an origi- nments from y be returned s submitting egulation the ,the date of ay be made d.

tration estab- s: Act may be only upon the ly established

court order in this State, certificate of

tificate with a lished through administrative ate, the State original record court of this Aid, or upon knowledgment aternity.

this Act, if an nis Section for irth certificate, rtificate if the nce supporting nt if the docu- support of an ted.

ter the birth in istrar of Vital dingly.

later than one nder this Act or administrative or parentage, end the child's rdance with the n to change a on (9).

State Registrar te Registrar of mmary descrip

tion to the custodian of any permanent local records and such records shall be amended accordingly.

Laws 1961, p. 2935, § 22, eff. Jan. 1, 1962. Amended by Laws 1963, p. 3205, § 1, eff. Aug. 19, 1963; P.A. 76-678, § 1, eff. Aug. 7, 1969; P.A. 79-412, § 1, eff. Oct. 1, 1975; P.A. 83-100, § 1, eff. Jan. 1, 1984; P.A. 84-1480, § 4, eff. May 1, 1987; P.A. 89-6, § 33, eff. March 6, 1995; P.A. 89-257, § 5, eff. Jan. 1, 1996; P.A. 89-626, Art. 2, § 2-61, eff. Aug. 9, 1996; P.A. 89-641, § 20, eff. Aug. 9, 1996; P.A. 90-18, § 75, eff. July 1, 1997.

Formerly Ill.Rev.Stat.1991, ch. 111½, ¶ 73-22.

1905 ILCS 5/1-1 et seq.

For emergency rules to implement the amendatory changes of P.A. 90-18, see note following 410 ILCS 535/11.

535/23. Custodians of records

§ 23. The State Registrar of Vital Records, local registrars, and county clerks, are hereby declared official custodians of vital records in this State, and shall maintain such records in a safe place.

Laws 1961, p. 2935, § 23, eff. Jan. 1, 1962. Amended by P.A. 76-678, § 1, eff. Aug. 7, 1969.

Formerly Ill.Rev.Stat.1991, ch. 111½, ¶ 73-23.

535/24. Access to vital records

§ 24. (1) To protect the integrity of vital records, to insure their proper use, and to insure the efficient and proper administration of the vital records system, access to vital records, and indexes thereof, including vital records in the custody of local registrars and county clerks originating prior to January 1, 1916, is limited to the custodian and his employees, and then only for administrative purposes, except that the indexes of those records in the custody of local registrars and county clerks, originating prior to January 1, 1916, shall be made available to persons for the purpose of genealogical research. Original, photographic or microphotographic reproductions of original records of births 100 years old and older and deaths 50 years old and older, and marriage records 75 years old and older on file in the State Office of Vital Records and in the custody of the county clerks may be made available for inspection in the Illinois State Archives reference area, Illinois Regional Archives Depositories, and other libraries approved by the Illinois State Registrar and the Director of the Illinois State Archives, provided that the photographic or microphotographic copies are made at no cost to the county or to the State of Illinois. It is unlawful for any custodian to permit inspection or to disclose information contained in, vital records, or to copy, or permit to be copied, all or part of any such record except as authorized by this Act or regulations adopted pursuant thereto.

(2) The State Registrar of Vital Records, or his agent, and any municipal, county, multi-county, public health district, or regional health officer recognized by the Department may examine vital records for the purpose only of carrying out the public health programs and responsibilities under his jurisdiction.

(3) The State Registrar of Vital Records, may disclose, or authorize the disclosure of, data contained in the vital records when deemed essential for bona fide research purposes which are not for private gain.

This amendatory Act of 1973 does not apply to any home rule unit.

(4) The State Registrar shall exchange with the Illinois Department of Public Aid information that may be necessary

for the establishment of paternity and the establishment, modification, and enforcement of child support orders entered pursuant to the Illinois Public Aid Code, the Illinois Marriage and Dissolution of Marriage Act, the Non-Support of Spouse and Children Act, the Non-Support Punishment Act, the Revised Uniform Reciprocal Enforcement of Support Act, the Uniform Interstate Family Support Act, or the Illinois Parentage Act of 1984. Notwithstanding any provisions in this Act to the contrary, the State Registrar shall not be liable to any person for any disclosure of information to the Illinois Department of Public Aid under this subsection or for any other action taken in good faith to comply with the requirements of this subsection.

Laws 1961, p. 2935, § 24, eff. Jan. 1, 1962. Amended by Laws 1967, p. 2514, § 1, eff. July 31, 1967; P.A. 76-678, § 1, eff. Aug. 7, 1969; P.A. 78-633, § 1, eff. Oct. 1, 1973; P.A. 85-232, § 1, eff. Jan. 1, 1988; P.A. 86-572, § 1, eff. Jan. 1, 1990; P.A. 87-1058, § 2, eff. Jan. 1, 1993; P.A. 90-18, § 75, eff. July 1, 1997; P.A. 91-613, § 940, eff. Oct. 1, 1999.

Formerly Ill.Rev.Stat.1991, ch. 111½, ¶ 73-24.

1 305 ILCS 5/1-1 et seq.

2 750 ILCS 5/101 et seq.

3 750 ILCS 15/1 et seq.

4 750 ILCS 16/1 et seq.

5 750 ILCS 20/1 et seq.

6 750 ILCS 22/100 et seq.

7 750 ILCS 45/1 et seq.

535/24.1. Vital records information; availability

§ 24.1. Any information contained in the vital records shall be made available to the Department of Public Health pursuant to the Illinois Health and Hazardous Substances Registry Act.

Laws 1961, p. 2935, § 24.1, added by P.A. 83-1361, Art. II, § 5, eff. Sept. 10, 1984.

Formerly Ill.Rev.Stat.1991, ch. 111½, ¶ 73-24.1.

1 410 ILCS 525/1 et seq.

535/25. Search of files; certification of records; fee; conditions

§ 25. In accordance with Section 24 of this Act, and the regulations adopted pursuant thereto:

(1) The State Registrar of Vital Records shall search the files of birth, death, and fetal death records, upon receipt of a written request and a fee of \$10 from any applicant entitled to such search. A search fee shall not be required for commemorative birth certificates issued by the State Registrar. If, upon search, the record requested is found, the State Registrar shall furnish the applicant one certification of such record, under the seal of such office. If the request is for a certified copy of the record an additional fee of \$5 shall be required. If the request is for a certified copy of a death certificate or a fetal death certificate, an additional fee of \$2 is required. The additional fee shall be deposited into the Death Certificate Surcharge Fund. A further fee of \$2 shall be required for each additional certification or certified copy requested. If the requested record is not found, the State Registrar shall furnish the applicant a certification attesting to that fact, if so requested by the applicant. A further fee of \$2 shall be required for each additional certification that no record has been found.

Any local registrar or county clerk shall search the files of birth, death and fetal death records, upon receipt of a written request from any applicant entitled to such search. If upon search the record requested is found, such local registrar or

county clerk shall furnish the applicant one certification or certified copy of such record, under the seal of such office, upon payment of the applicable fees. If the requested record is not found, the local registrar or county clerk shall furnish the applicant a certification attesting to that fact, if so requested by the applicant and upon payment of applicable fee. The local registrar or county clerk must charge a \$2 fee for each certified copy of a death certificate. The fee is in addition to any other fees that are charged by the local registrar or county clerk. The additional fees must be transmitted to the State Registrar monthly and deposited into the Death Certificate Surcharge Fund. The local registrar or county clerk may charge fees for providing other services for which the State Registrar may charge fees under this Section.

A request to any custodian of vital records for a search of the death record indexes for genealogical research shall require a fee of \$10 per name for a 5 year search. An additional fee of \$1 for each additional year searched shall be required. If the requested record is found, one uncertified copy shall be issued without additional charge.

Any fee received by the State Registrar pursuant to this Section which is of an insufficient amount may be returned by the State Registrar upon his recording the receipt of such fee and the reason for its return. The State Registrar is authorized to maintain a 2 signature, revolving checking account with a suitable commercial bank for the purpose of depositing and withdrawing-for-return cash received and determined insufficient for the service requested.

No fee imposed under this Section may be assessed against an organization chartered by Congress that requests a certificate for the purpose of death verification.

(2) The certification of birth may contain only the name, sex, date of birth, and place of birth, of the person to whom it relates, the name, age and birthplace of the parents, and the file number; and none of the other data on the certificate of birth except as authorized under subsection (5) of this Section.

(3) The certification of death shall contain only the name, Social Security Number, sex, date of death, and place of death of the person to whom it relates, and file number; and none of the other data on the certificate of death except as authorized under subsection (5) of this Section.

(4) Certification or a certified copy of a certificate shall be issued:

(a) Upon the order of a court of competent jurisdiction; or

(b) In case of a birth certificate, upon the specific written request for a certification or certified copy by the person, if of legal age, by a parent or other legal representative of the person to whom the record of birth relates, or by a person having a genealogical interest; or

(c) Upon the specific written request for a certification or certified copy by a department of the state or a municipal corporation or the federal government; or

(d) In case of a death or fetal death certificate, upon specific written request for a certified copy by a person, or his duly authorized agent, having a genealogical, personal or property right interest in the record.

A genealogical interest shall be a proper purpose with respect to births which occurred not less than 75 years and deaths which occurred not less than 20 years prior to the date of written request. Where the purpose of the request is a genealogical interest, the custodian shall stamp the certification or copy with the words, **FOR GENEALOGICAL PURPOSES ONLY.**

(5) Any certification or certified copy issued pursuant to this Section shall show the date of registration; and copies issued from records marked "delayed," "amended," or "court order" shall be similarly marked and show the effective date.

(6) Any certification or certified copy of a certificate issued in accordance with this Section shall be considered as prima facie evidence of the facts therein stated, provided that the evidentiary value of a certificate or record filed more than one year after the event, or a record which has been amended, shall be determined by the judicial or administrative body or official before whom the certificate is offered as evidence.

(7) Any certification or certified copy issued pursuant to this Section shall be issued without charge when the record is required by the United States Veterans Administration or by any accredited veterans organization to be used in determining the eligibility of any person to participate in benefits available from such organization. Requests for such copies must be in accordance with Sections 1 and 2 of "An Act to provide for the furnishing of copies of public documents to interested parties," approved May 17, 1935, as now or hereafter amended. 1

(8) The National Vital Statistics Division, or any agency which may be substituted therefor; may be furnished such copies or data as it may require for national statistics; provided that the State shall be reimbursed for the cost of furnishing such data; and provided further that such data shall not be used for other than statistical purposes by the National Vital Statistics Division, or any agency which may be substituted therefor, unless so authorized by the State Registrar of Vital Records.

(9) Federal, State, local, and other public or private agencies may, upon request, be furnished copies or data for statistical purposes upon such terms or conditions as may be prescribed by the Department.

(10) The State Registrar of Vital Records, at his discretion and in the interest of promoting registration of births, may issue, without fee, to the parents or guardian of any or every child whose birth has been registered in accordance with the provisions of this Act, a special notice of registration of birth.

(11) No person shall prepare or issue any certificate which purports to be an original, certified copy, or certification of a certificate of birth, death, or fetal death, except as authorized in this Act or regulations adopted hereunder.

(12) A computer print-out of any record of birth, death or fetal record that may be certified under this Section may be used in place of such certification and such computer print-out shall have the same legal force and effect as a certified copy of the document.

(13) The State Registrar may verify from the information contained in the index maintained by the State Registrar the authenticity of information on births, deaths, marriages and dissolution of marriages provided to a federal agency or a public agency of another state by a person seeking benefits or employment from the agency, provided the agency pays a fee of \$10.

(14) The State Registrar may issue commemorative birth certificates to persons eligible to receive birth certificates under this Section upon the payment of a fee to be determined by the State Registrar.

Laws 1961, p. 2935, § 25, eff. Jan. 1, 1962. Amended by Laws 1963, p. 3205, § 1, eff. Aug. 19, 1963; Laws 1965, p. 833, § 1, eff. July 1, 1965; Laws 1965, p. 2362, § 1, eff. Aug. 2, 1965; Laws 1967, p. 227, § 1, eff. July 1, 1967; P.A. 76-678, § 1, eff. Aug. 7, 1969; P.A. 79-412, § 1, eff. Oct. 1, 1975; P.A. 81-652, § 2, eff. Jan. 1, 1980; P.A. 83-100, § 1, eff. Jan. 1, 1984; P.A. 83-345, § 66, eff. Sept. 14, 1983; P.A. 83-1362;

Art. II, § 17, 1985; § 4, eff. P.A. 90-July 30, Formerly 1330 ILCS

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(b) In an shall tion com except a provided When a requester son mak which sh and shal phone nu number ing the c copy the copy the an shall r making t that such informati or any lo county cu ed forms

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§ 25.5. al \$2 fee death cer cate Surc treasury. amendato January 1 until July

Art. II, § 116, eff. Sept. 11, 1984; P.A. 84-491, § 1, eff. Sept. 17, 1985; P.A. 84-1480, § 4, eff. May 1, 1987; P.A. 85-1261, § 4, eff. Aug. 30, 1988; P.A. 87-1058, § 2, eff. Jan. 1, 1993; P.A. 90-144, § 49, eff. July 23, 1997; P.A. 91-382, § 5, eff. July 30, 1999; P.A. 92-141, § 5, eff. July 24, 2001.

Formerly Ill.Rev.Stat.1991, ch. 111½, ¶ 73-25.

1330 ILCS 70/1 and 70/2.

535/25.1. Notation of death in birth certificate record

§ 25.1. (a) When the State Registrar of Vital Records receives or prepares a death certificate the Registrar shall make an appropriate notation in the birth certificate record of that person that the person is deceased. The Registrar shall also notify the appropriate municipal or county custodian of such birth record that the person is deceased, and such custodian shall likewise make an appropriate notation in its records.

(b) In response to any inquiry, the Registrar or a custodian shall not provide a copy of a birth certificate or information concerning the birth record of any deceased person except as provided in this subsection (b) or as otherwise provided in this Act or as approved by the Department. When a copy of the birth certificate of a deceased person is requested, the Registrar or custodian shall require the person making the request to complete an information form, which shall be developed and furnished by the Department and shall include, at a minimum, the name, address, telephone number, social security number and driver's license number of the person making the request. Before furnishing the copy, the custodian shall prominently stamp on the copy the word "DECEASED" and write or stamp on the copy the date of death of the deceased person. The custodian shall retain the information form completed by the person making the request, and note on the birth certificate record that such a request was made. The custodian shall make the information form available to the Department of State Police or any local law enforcement agency upon request. A city or county custodian shall promptly submit copies of all completed forms to the Registrar.

(c) The Registrar shall furnish, no later than 60 days after receipt of a form used to request a birth certificate record of a deceased person, a copy of the form and a copy of the corresponding birth certificate record to the Illinois Department of Public Aid and the Department of Human Services. The Illinois Department of Public Aid and the Department of Human Services shall, upon receipt of such information, check their records to ensure that no claim for public assistance under the Illinois Public Aid Code¹ is being made either by a person purporting to be the deceased person or by any person on behalf of the deceased person.

Laws 1961, p. 2935, § 25.1, added by P.A. 86-503, § 2, eff. Sept. 1, 1989. Amended by P.A. 89-507, Art.90, § 90L-86, eff. July 1, 1997.

Formerly Ill.Rev.Stat.1991, ch. 111½, ¶ 73-25.1.

1305 ILCS 5/1-1 et seq.

535/25.5. Death Certificate Surcharge Fund

§ 25.5. Death Certificate Surcharge Fund. The additional \$2 fee for certified copies of death certificates and fetal death certificates must be deposited into the Death Certificate Surcharge Fund, a special fund created in the State treasury. Beginning 30 days after the effective date of this amendatory Act of the 92nd General Assembly and until January 1, 2003 and then beginning again on July 1, 2003 and until July 1, 2005, moneys in the Fund, subject to appropriate

tion, may be used by the Department for the purpose of implementing an electronic reporting system for death registrations as provided in Section 18.5 of this Act. Before the effective date of this amendatory Act of the 92nd General Assembly, on and after January 1, 2003 and until July 1, 2003, and on and after July 1, 2005, moneys in the Fund, subject to appropriations, may be used as follows: (i) 25% by the Illinois Law Enforcement Training Standards Board for the purpose of training coroners, deputy coroners, forensic pathologists, and police officers for homicide investigations, (ii) 25% for grants by the Department of Public Health for distribution to all local county coroners and medical examiners or officials charged with the duties set forth under Division 3-3 of the Counties Code,¹ who have a different title, for equipment and lab facilities, (iii) 25% by the Department of Public Health for the purpose of setting up a statewide database of death certificates and implementing an electronic reporting system for death registrations pursuant to Section 18.5, and (iv) 25% for a grant by the Department of Public Health to local registrars.

Laws 1961, p. 2935, § 25.5, added by P.A. 91-382, § 5, eff. July 30, 1999. Amended by P.A. 92-16, § 79.5, eff. June 28, 2001; P.A. 92-141, § 5, eff. July 24, 2001; P.A. 93-45, § 5, eff. July 1, 2003.

155 ILCS 5/1-1001 et seq.

535/26. Persons in charge of institutions or funeral directors; records

§ 26. (1) Every person in charge of an institution shall keep a record of personal particulars and data concerning each person admitted or confined to such institution. This record shall include such information as required by the standard certificate of birth, death, and fetal death forms issued under the provisions of this Act. The record shall be made at the time of admission from information provided by such person, but when it cannot be so obtained, the same shall be obtained from relatives or other persons acquainted with the facts. The name and address of the person providing the information shall be a part of the record.

(2) When a dead human body is released or disposed of by an institution, the person in charge of the institution shall keep a record showing the name of the deceased, date of death, name and address of the person to whom the body is released, date of removal from the institution, or if finally disposed of by the institution, the date, place, and manner of disposition shall be recorded.

(3) A funeral director or other person who removes from the place of death or transports or finally disposes of a dead body or fetus, in addition to filing any certificate or other form required by this Act, shall keep a record which shall identify the body, and such information pertaining to his receipt, removal, and delivery of such body as may be prescribed in regulations adopted by the Department.

Laws 1961, p. 2935, § 26, eff. Jan. 1, 1962.

Formerly Ill.Rev.Stat.1991, ch. 111½, ¶ 73-26.

535/27. Violations; punishment

§ 27. (1)(a) Any person who willfully and knowingly makes any false statement in a report, record, or certificate required to be filed under this Act, or in an application for an amendment thereof, or who willfully and knowingly supplies false information intending that such information be used in the preparation of any such report, record, or certificate, or amendment thereof; or

(b) Any person who without lawful authority and with the intent to deceive, makes, alters, amends, or mutilates any

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Application for Certified Copy of Vital Record



Peggy Ann Milton, County Clerk
 Government Center
 115 E Washington Street, Room 102
 PO Box 2400
 Bloomington IL 61702-2400
 Phone: (309) 888-5190
 Fax: (309) 888-5932
 www.mcleancountyil.gov/countyclerk
 E-Mail: peggyann.milton@mcleancountyil.gov

Please Note:

The fee for a vital record is \$12.00 for Birth, Marriage, or Death. This includes the search and the first certified copy. Each additional certified copy of the same record is \$4.00 for Birth or Marriage, and \$6.00 for Death. If the record is searched and not located the original search fee of \$12.00 still applies. Genealogical record fees are the same. Birth Records are available from 1860, Marriage Records from 1831, and Death Records from 1878.

**A COPY OF A SIGNATURE ID IS REQUIRED WITH ALL MAIL REQUESTS
 PLEASE MAKE CHECK PAYABLE TO: McLean County Clerk**

Please Check the Type or Types of Records Requested
 Then Fill out the Appropriate Sections Below

BIRTH: MARRIAGE:
 DEATH:

Birth		Number of Copies:
Name on Record		
Date of Birth		
Mother's Maiden Name		
Father's Name		
Requested By	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Self <input type="checkbox"/> Agent Other _____	

Marriage (License and/or Application)		Number of Copies: Lic. ___ App. ___
Date of Marriage		
Groom's Name		
Bride's Maiden Name		
Requested By	<input type="checkbox"/> Bride <input type="checkbox"/> Groom Other _____	

Death		Number of Copies:
Name on Record		
Date of Death		
Requested By	<input type="checkbox"/> Spouse Other _____ Intended Use _____	

I, the undersigned Applicant, swear or affirm that I have completed the foregoing Application for a Certified Copy of a Vital Record and that my relationship to the individual whose name appears on the record requested is correct as stated in said Application.

 Applicant's Signature

 Driver's License Number, State Issued By, and Expiration Date

 Date

 E-Mail Address

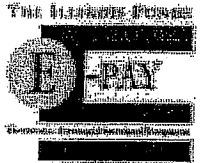
Address to Which Vital Record Should Be Mailed	
Name	
Address	
City, State, Zip	

 Receipt Number (For Office Use Only)

Brought to you by Illinois State Treasurer Judy Baar Topinka and...

McLean County Clerk

PeggyAnn Milton, McLean County Clerk



Welcome from McLean County Clerk PeggyAnn Milton

Under Illinois State law (410 ILCS 535), only specific individuals have legal access to birth, death, and marriage records. Our office will issue certified copies to authorized individuals only.

Our office only accepts Vital Record requests for events that occurred in McLean County, Illinois.

*Please note, the search fees for records are non-refundable.



McLean County Clerk
PeggyAnn Milton

The McLean County Clerk business hours are Monday through Friday from 8:00am to 4:30pm, except for County Holidays.

Requesting a copy of a vital record is easy.

Just follow these simple steps:

1. Click on the type of vital record you are requesting from the Payments list below.
2. Complete the required information on the screens that follow. You will receive a confirmation number once the transaction is successful.
3. Print the confirmation page.
4. Place your photo identification (ex: driver's license, state issued id, etc...) which displays your signature, on the confirmation page and make a photocopy, then sign, date, and fax the form to the McLean County Clerk at (309) 888-5932.

In order for your request to be completed, all required information must be supplied and the fax must be clear and legible. Required information includes: photo identification, required documentation, and the confirmation page. You will receive a confirmation number from E-Pay for your records verifying your transaction was successful. Credit Card payments can be made using Visa, MasterCard, American Express, Discover, or you can pay by electronic check.

There is a convenience fee of \$ 1.75 for each transaction.

This fee is not charged by the McLean County Clerk.

- * Certificates will be sent via United States Postal Service (USPS) regular mail at no charge, or you may request the USPS Priority (\$3.85, 2-3 days) or USPS Express (\$13.65, 1-2 days) mail delivery options at an additional cost.

The USPS Express option offers a one or two day delivery timeframe, please check the USPS website for confirmation of delivery date.

Please enter 61701 as the Origin Zip Code.

Under the Miscellaneous Payments option (green link below), users will also have the ability to submit payment for Notary Public Commissions, Fireworks Permits, and Class E Liquor Licenses using this website.

Please see the important statements pertaining to each of these options below:

Notary Public Commissions

Please be sure to print off the confirmation page that will display at the end of this transaction, sign and date the signature line that appears at the bottom of the page, then fax to the Clerk's office at: (309) 888-5932. If you fail to print the confirmation page, you may print your confirmation e-mail, sign, then fax.

Fireworks Permit Application

The Fireworks Permit Application will not be considered filed until originals of the Application, Bond of License, and Certificate of Insurance are filed in the McLean County Clerk's Office.

See the related links for the Fireworks Permits below:

Information regarding Applying for a Fireworks Permit

The Fireworks Permit Application

Liquor License

The Class E Liquor License Application should be filed with the County Clerk at least 14 days prior to the event. The application will not be considered filed until the original Application and a copy of the Applicant's Certificate of Insurance are filed in the McLean County Clerk's Office.

See the related links for the Class E (One Day) Liquor License Application below:

Information on Obtaining a Class E (One Day) Liquor License

The Class E (One Day) Liquor License Application

If you have any questions, please do not hesitate to contact us as listed below.
Thank you for your payment.

Visit us at our website:

www.mcleancountyil.gov/countyclerk

Payment can be made by:

Visa, MasterCard, American Express, Discover, or E-Check *(for Birth Records)*

Visa, MasterCard, American Express, Discover, or E-Check *(for Marriage Records)*

Visa, MasterCard, American Express, Discover, or E-Check *(for Death Records)*

Visa, MasterCard, American Express, Discover, or E-Check *(for Miscellaneous Payments)*

You may make the following payments via E-PAY to McLean County Clerk:

Birth Records

Marriage Records

Death Records

Miscellaneous Payments

For assistance, please contact us at:

McLean County Clerk

PO Box 2400

Bloomington, IL 61702-2400

(309) 888-5190

peggyann.milton@mcleancountyil.gov

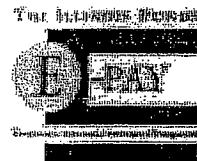
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Illinois E-PAY version 3.0.2

Brought to you by Illinois State Treasurer Judy Baar Topinka and...

McLean County Clerk

PeggyAnn Milton, McLean County Clerk



Welcome from McLean County Clerk PeggyAnn Milton

Under Illinois State law (410 ILCS 535), only specific individuals have legal access to birth, death, and marriage records. Our office will issue certified copies to authorized individuals only.

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*Please note, the search fees for records are non-refundable.

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McLean County Clerk
PeggyAnn Milton

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1. Click on the type of vital record you are requesting from the Payments list below.
2. Complete the required information on the screens that follow. You will receive a confirmation number once the transaction is successful.
3. Print the confirmation page.
4. Place your photo identification (ex: driver's license, state issued id, etc...) which displays your signature, on the confirmation page and make a photocopy, then sign, date, and fax the form to the McLean County Clerk at (309) 888-5932.

In order for your request to be completed, all required information must be supplied and the fax must be clear and legible. Required information includes: photo identification, required documentation, and the confirmation page. You will receive a confirmation number from E-Pay for your records verifying your transaction was successful. Credit Card payments can be made using Visa, MasterCard, American Express, Discover, or you can pay by electronic check.

There is a convenience fee of \$ 1.75 for each transaction.

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Please enter 61701 as the Origin Zip Code.

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Notary Public Commissions

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[Information regarding Applying for a Fireworks Permit](#)

[The Fireworks Permit Application](#)

Liquor License

The Class E Liquor License Application should be filed with the County Clerk at least 14 days prior to the event. The application will not be considered filed until the original Application and a copy of the Applicant's Certificate of Insurance are filed in the McLean County Clerk's Office.

See the related links for the Class E (One Day) Liquor License Application below:

[Information on Obtaining a Class E \(One Day\) Liquor License](#)

[The Class E \(One Day\) Liquor License Application](#)

If you have any questions, please do not hesitate to contact us as listed below.
Thank you for your payment.

Visit us at our website:

www.mcleancountyil.gov/countyclerk

Payment can be made by:

Visa, MasterCard, American Express, Discover, or E-Check *(for Birth Records)*

Visa, MasterCard, American Express, Discover, or E-Check *(for Marriage Records)*

Visa, MasterCard, American Express, Discover, or E-Check *(for Death Records)*

Visa, MasterCard, American Express, Discover, or E-Check *(for Miscellaneous Payments)*

You may make the following payments via E-PAY to McLean County Clerk:

Birth Records

Marriage Records

Death Records

Miscellaneous Payments

For assistance, please contact us at:

McLean County Clerk

PO Box 2400

Bloomington, IL 61702-2400

(309) 888-5190

peggyann.milton@mcleancountyil.gov

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Illinois E-PAY version 3.0.2



RISK MANAGEMENT OFFICE

TEL: (309) 888-5940
104 West Front Street

FAX: (309) 888-5949
P. O. Box 2400

E-MAIL: riskmgt@mclean.gov
Bloomington, IL 61702-2400

Memo To: Matt Sorensen, Chairman
Members, Finance Committee

From: Jen Ho, Risk Manager

Date: January 31, 2006

Subject: Proposed Insurance Program for PY 2006

The Policy Year 2006 insurance program is forwarded for your approval. The proposed program is 1% less than actual PY 2005 actual premiums, with rates for lines of coverages remaining relatively flat or experiencing a small reduction, as indicated by the spreadsheet provided in Attachment #1. In a post-Katrina era, our excess coverages have not experienced the anticipated adverse financial impact on the reinsurance market. We are also renewing our brokerage services with Acordia/IRM with relatively unchanged service fees from PY 2005. We are recommending approval of the proposed programs and service agreement as provided.

As a customary part of the renewal process, the agent was directed to seek proposals from different carriers for each line of coverage. A summary of the program PY 2006 is as follows:

- a). Excess workers compensation insurance – we are into a two-year multi-year contract with our incumbent carrier, Safety National Casualty Corp. Terms of coverages remain unchanged even though we are getting indications that the market is moving towards higher self-insured retentions.
- b). Property insurance coverage - premiums increase reflect an increase in covered property values at constant rates. Property values were increased by 6% to reflect the current inflated construction market. Chubb Insurance Company continues to offer broader coverages than its competition.
- c). Excess liability insurance program – the States Self-insured RRG program remained competitive and the most viable program for the County. The County has an increase of \$ 2.3 M in its underwriting base but benefited from a rate reduction that resulted in a reduction in premiums of 5%.
- d). Nursing home liability insurance – remains relatively flat at a 1% rate increase; market restriction continues.
- e). Theft/Bond Insurance – remains unchanged.
- f). Claims Administration - remains with CCMSI as the last year of a 3 year contract.
- g). Legal representation – rates for attorneys increased from \$ 100 to \$ 175 for principals and from \$ 90 to \$ 135 for associates. This will increase the County's paid legal expenses for current and future cases.

I will be available to answer your questions. Thank you.

Risk Management Program Fy 2006

A. Coverages	DESCRIPTION	Proposed FY 2006	FY 2005	Change 06-05
1. Excess Workers Comp. Ins*: Safety National	Statutory ;SIR: \$ 350,000 EL Limits: \$ 1 Million;	32,407	\$ 30,493	6%
2. Property Insurance/Inland Marine**: Chubb Insurance Co.	61 Million Blkt limits;Ded-\$ 10,000 Flood/Quake - \$25 M; Ded - \$ 25,000	47,188	\$ 45,370	4%
3. Boiler & Machinery:	Coverage Consolidated In Property Cov		INCLD	N/A
4. Theft/Bond Insurance: Zurich Insurance Company	Limits:\$ 500,000; ; Ded: \$ 5,000	3,570	\$ 3,570	0%
5. Excess Liability*** : STATES SELF-INSURED RRG	Limits: \$15 million excess of SIR \$250,000 Occurrence Form	207,590	\$ 217,697	-5%
6. Nursing Home Liability Insurance Health Cap	Limits: \$ 1 M occ/\$3 Magg; Ded- \$50,000 Excess: \$ 1 M occ/\$3 M Agg; Ded \$100,000	124,520	\$ 123,270	1%
B. Brokerage Fees:	IRM/Acordia	28,116	\$ 28,471.00	-1%
C. Claims Administration: CANNON-COCHRAN MSI Danville, IL	Administration of Workers' Compensation claims.	18,645	18,124.00	3%
D. Outside Counsel: COSTIGAN & WOLLRAB, P.C. Bloomington, IL	Partner: \$ 175/ \$ 135hr			
HEYL, ROYSTER, VOELKER & ALLEN Peoria, IL	Partner: \$ 125/hr (WC)			
Total:		462,036	466,995	-1%

Budget - FY 2005

AGREEMENT FOR INSURANCE BROKERAGE SERVICES

This Agreement made and entered into this February 21, 2006 , by and between Insurance Risk Managers/Accordia (hereinafter know as "Agent") and the County of McLean (hereinafter known as "County".)

This agreement is made with regard to the following recitals:

- A. The County has determined that the Agent should continued to be retained as the Broker of Record for insurance brokerage services for the period commencing March 1, 2006 and ending March 1, 2007 for desired brokerage services for its property and casualty insurance coverages;
- B. Agent has been selected by the County as its Agent of Record.
- C. Agent will be compensated on a fee based as stipulated in Exhibit I.

Now, therefore, in consideration of this agreement, and the mutual promises, covenants, and stipulation hereinafter contained, the parties agree as follows:

1. TERM

The term of this Agreement shall be for the period of March 1, 2006 to March 1, 2007, unless earlier terminated as provided in paragraph 4 herein.

2. BROKERAGE SERVICES TO BE PROVIDED

Services to be provided by the Agent in this Agreement includes the following:

2.1 Usual and Customary Brokerage Services

- 2.1.1 Consultation and coordination of activities in the acquisition, enhancement and maintenance of the risk management and insurance program of the County, and as liaison between County and the underwriters.
- 2.1.2 Administration of insurance programs to ensure the timely issuance and accuracy of policies, endorsements, and other coverage amendments.
- 2.1.3 Consultation and coordination of all claim reporting activities to the insurance companies and assistance in the settlement and /or processing of claims until all claim matters under the policies or binds are resolved.
- 2.1.4 Maintenance of current records on reported claims and production of a claim summary not less than annually subject to the availability of internal loss records of the County and the underwriters.
- 2.1.5 Consultation on loss control, inspection and prevention activities. These consultation services are considered to be the type that normally are included within the scope of routine insurance broker servicing. Additional services requested by the County are mentioned in paragraph 2.2.

2.1.6 Participation in meetings with insurance companies and the County to review insurance coverages.

2.1.7 Preparation of all necessary support documents, such as automobile ID cards, filings and/or certificates of insurance, in compliance with local statutes or provisions provided within this agreement.

2.1.8 Consultation and advice on all relevant changes/trends in the insurance industry to keep the County personnel current with market conditions and insurance coverages affecting the County.

2.1.9 Preparation of premium and loss development forecasts as requested.

2.1.10 Deliver to the County on or before July 1, a statement of the industry rating and report of financial status of insurance companies providing coverage to the County.

2.1.11 Provide the County on or before July 1, a report reviewing and developing premiums indications for coverages, based on market trends, for the County's next fiscal year.

2.1.12 Upon consultation with the County, provide alternative proposals from prospective carriers for coverage for the next coverage period.

2.1.13 Other usual and customary insurance consulting services as mutually agreed upon.

2.2 ADDITIONAL SERVICES

Services described in this section include special services or those not within the scope of routine insurance brokerage services. Examples of additional services include special study projects, significant changes in an insurance program requiring extensive marketing activities.

Agent agrees that in each such case to notify the County whether it has the expertise within its staff or whether outside specialists are recommended. The County may then either request the Agent to develop a list of outside specialists for the County to interview or the County may request the Agent to do so and make specific recommendations to the County.

3. COMPENSATION

3.1 In consideration of the brokerage services to be provided hereunder, Agent will be compensated on a fee basis as provided in Exhibit I. Statement of Acceptance of Insurance Service Fee Agreement.

3.2 At the request of the County, the Agent shall disclose the commissions earned on the accounts.

4 TERMINATION

4.1 This Agreement may be terminated by either party upon written notice to the other party, provided such notice specifies an effective date for termination of not less than thirty (30) days from the date of such notice.

4.2 As of the termination date, the Agent shall have no further obligation to perform any of the brokerage services set forth in this Agreement or to provide any servicing with respect to any of the County's insurance coverages, with the exception of the continued coordination of claims activities for claims reported or filed while this agreement is in force.

4.3 The Agent shall also return to the County the originals or file copies, if originals are not available, of all documents and materials supplied by the County upon request by the County.

4.4 Agent shall continue to administer, coordinate the claims activity for any reported or filed claims within the coverage periods of insurance policies procured within the duration of this agreement until such claims are resolved.

5 DISCLOSURE, NON-DISCLOSURE AND NOTICES

5.1 During the term of this Agreement or upon termination of this Agreement, the Agent hereby agrees for itself and on behalf of its officers, agents, attorneys and all others acting on its behalf or in its employ:

- (i) to hold in strict confidence and not disclose any "confidential information" furnished by or on behalf of the County;
- (ii) not to use any such information for any purpose other than the management of and the placement of the County's insurance coverages;
- (iii) to return any and all such information (including all copies) upon request by the County. "Confidential information" means all information regarding the County, including information on its operations, assets, and projected future economic performance and prospects, other than information which has already been disclosed to the public, and
- (iv) to disclose to the County on or before June 1 of each year the total amount of contingency fees received by the Agent during the prior calendar year on the the County's insured coverages.

5.2 All notices to be given pursuant to this Agreement shall be deemed given when mailed by certified mail, return receipt requested, to the following addresses:

If to the Agent

Wally McColloch, Sr. Vice President
Accordia/IRM
205 Landmark Drive
Normal, IL 61761-0968

If to the County

Jennifer Ho, Risk Manager
McLean County
104 West Front St
Bloomington, IL 61702-2400

or such other addresses as the parties may, from time to time, specify in writing.

6. INTEREST OF AGENT

Agent warrants that it presently has no interest and shall not acquire any interest, direct or indirect, which could conflict in any manner or degree with the performance of services required to be performed under this Agreement. Agent warrants that, in performance of this Agreement, Agent shall not employ any person having such interest.

7. INDEPENDENT CONTRACTOR

7.1 All acts of Agent, its agents, officers, and employees and all others acting on behalf of Agent relating to the performance of this Agreement, shall be performed as independent contractors and not as agents, officers, or employees of the County. Agent, by virtue of this Agreement, has no authority to bind or incur any obligation on behalf of the County, save and except to bind insurance coverage for the County in its Agent's capacity as an independent contractor. Agent has no authority or responsibility to exercise any rights or power vested in the County. No Agent, officer, or employee of the County is to be considered an employee of Agent. It is understood by both Agent and the County that this Agreement shall not under any circumstances to be construed or considered to create any employer-employee relationship or joint venture.

7.2 Agent shall determine the method, details and means of performing the work and services to be provided by Agent under this Agreement. Agent shall be responsible to the County only for the requirements and results specified in this Agreement, and, except as expressly provided in this Agreement, shall not be subjected to the County's control with respect to the physical action or activities of the Agent in fulfillment of this Agreement. Agent has control over the manner and means of performing the services under this Agreement. Agent is permitted to provide service to others during the period service is provided to the County under this Agreement.

7.3 The County shall reserve the right to inspect the Agent's work and service during the performance of this contract to ensure that this contract is performed according to its terms.

8. HOLD- HARMLESS AND INDEMNIFICATION PROVISION

As an independent contractor, Agent hereby indemnifies and holds the County harmless from any and all claims that may be made against the County arising out of or in any way connected with the performance of work by Agent, or the Agents' representatives in conjunction with this Agreement.

9. INSURANCE REQUIREMENTS

9.1 The Agent shall provide at its own expense and maintain at all times the following insurance with insurance companies licensed in the State of Illinois and shall provide evidence of such insurance to the County as may be required. The policies or certificates thereof shall provide that, thirty (30) days prior to cancellation or material change in the policy, notices of same shall be given to the Risk Manager of the County by registered mail, return receipt requested, for all of the following stated insurance policies.

9.1.1 **Worker's Compensation** – in compliance with the statutes of the State of Illinois, plus employer's liability with a minimum limit of liability of \$500,000.

9.1.2 **General Liability** insurance with a minimum limit of liability per occurrence of \$1,000,000 for bodily injury and \$100,000 for property damage or \$1,000,000 combined single limit. This insurance shall indicate on the certificate of insurance the following coverages and indicate the policy aggregate limit applying to: premises and operations; broad form contractual; independent contractors and subcontractors; products and completed operations; and/or professional liability.

9.1.3 **Automobile Liability** insurance with a minimum limit of liability per occurrence of \$1,000,000 for bodily injury and \$100,000 for property damage or \$1,000,000 combined single limit. This insurance shall cover any automobile for bodily injury and property damage.

9.1.4 **Professional Errors and Omissions** insurance with a minimum limit of \$ 1,000,000 per occurrence.

Upon failure of the Agent to furnish, deliver or maintain such insurance and certificates as above provided, this Agreement, at the election of the County, may be forthwith declared, suspended, or terminated. Failure of the Agent to obtain and/or maintain any required insurance shall not relieve the Agent from any liability under this Agreement, nor shall the insurance requirements be construed to conflict with or otherwise limit the obligations of the Agent concerning indemnification.

10. GENERAL PROVISIONS

10.1 Neither this Agreement nor any rights thereunder shall be assigned by either party, including any assignment by operation of law, without the prior written consent of the other party first having been obtained.

10.2 No waiver, amendment or modification of any covenant, condition, limitation or provision herein contained shall be valid unless in writing and duly executed by both parties.

10.3 It is agreed that if any provision of this Agreement shall be determined to be void by any court of competent jurisdiction, then such determination shall not affect any other provisions of this Agreement, all of which provisions shall remain in full force and effect; it is the intention of the parties hereto that if any provision of this Agreement is capable of two (2) constructions, one of which would render the provision valid, then the provision shall have the meaning which renders the provision valid.

10.4 This Agreement shall be governed by, and construed in accordance with, the Laws of the State of Illinois. All relevant provisions of the laws of the State of Illinois applicable hereto and required to be reflected or set forth herein are incorporated herein by reference.

10.5 This Agreement shall inure to the benefit of and be binding upon the respective successors and assigns, if any, of the parties hereto, except that nothing contained in this paragraph shall be construed to permit any attempted assignment which would be in violation of any other provision of this Agreement.

10.6 This Agreement constitutes the entire agreement between the parties and supercedes all proposals, prior discussions and representations, oral or written, between the parties relating to this Agreement or any services to be provided to the County. No representation or statement expressly contained in this Agreement shall be relied upon or be binding upon the parties.

10.7 Agent shall pay all current and applicable, city, county, state and Federal taxes, licenses as required by law.

IN WITNESS WHEREOF, the parties have executed this Agreement on the day and year first written above.

ATTEST:

the County

By: _____

Name: _____

Title: _____

ATTEST:

the Agent

By: _____

Name: _____

Title: _____

SERVICE FEE EXPLANATION

In accordance with Illinois Insurance Code, a service fee must be agreed upon in writing by the party to be charged. Therefore, please acknowledge by signing the Statement of Acceptance below.

STATEMENT OF ACCEPTANCE INSURANCE SERVICE FEE AGREEMENT

This service fee agreement is made this 15TH day of MARCH,

2006, between Acordia, hereinafter called "agent" and

 COUNTY OF MCLEAN
(a Corporation, Sole Proprietor, Partnership)

hereinafter called "client."

1. This service fee agreement will apply to types of insurance and/or services as checked below:

- Package Automobile
- Property Umbrella
- General Liability Workers Compensation
- Other CRIME; NURSING HOME LIABILITY INS _____

2. Client agrees to remit the sum of \$28,116.00 as a service fee, payable as follows:

- Flat Charge
- QUARTERLY INSTALLMENTS OF \$7,029.00 PAYABLE 3/1/06;
6/1/06;9/1/06;12/1/06

3. Client understands and agrees that the service fee payable under this agreement is in addition to premiums to be paid on policies to the insurance companies involved.

4. Client acknowledges that in the event coverage is cancelled, the service fee charge is immediately earned.

COUNTY OF MCLEAN

ACORDIA

By: _____

By: _____
G.W. McColloch, Agent



RISK MANAGEMENT OFFICE

TEL: (309) 888-5940
104 West Front Street

FAX: (309) 888-5949
P. O. Box 2400

E-MAIL: riskmgt@mclean.gov
Bloomington, IL 61702-2400

Memo to: Matt Sorensen, Chairman
Members, Finance Committee

From: Jennifer Ho

Date: January 31, 2006

Subject: Fourth Quarter Risk Management Fund Report

For FY 2005, the County experienced a spike in its overall claims experience as compared to its claims experience for the 5-year period from FY 2001 to FY 2005. Auto physical damage claims and workers compensation claims stand out in terms of incurred dollars, while auto liability and general liability claim remain stable. The cumulative loss experience of the County as of December 31, 2005 is summarized in Table 1 for your perusal and a summary of the immature loss experience of the first twelve months of the past five years from 2001 to 2005 is provided in Table 2.

The increase in incurred losses for auto physical damage claims are in part due to increased costs of repairs and the aberrant loss of three squad cars. We are currently in the process of salvaging the totalled vehicles, the recovery of which will reduce the incurred loss. For workers compensation claims, we have 6 indemnity cases that accounted for 81% of incurred dollars. However, a significant trend in our workers compensation claims is the reduction for indemnity cases from 17 indemnity claims in 2001 to 6 indemnity claims in 2005.

When viewed from a historical perspective since 1992, the cost of risks for the County (COR) as a percentage of operating budget, with COR as measured by the sum of incurred loss dollars, premiums, and administrative fees, the County's average COR is 1.52 % of operating budget. For FY 2005, COR as a percentage of operating budget is 1.326. Historically, for every COR dollar, \$ 0.57 was spent on claims, \$0.40 was spent on premiums, and \$ 0.03 was spend on administrative fees for claims administration and brokerage services. From 1992 to 2005, the County's operating budget has approximately tripled from \$ 27.82 million (FY 1992) to \$ 64.17 million (FY 2005).

	1992	2005	Average (1992- 2005)
Claims (% of COR)	0.513	0.4969	0.57
Premiums (% of COR)*	0.460	0.4456	0.40
Fees (% of COR)**	0.273	0.0574	0.03
COR	1.00	1.00	1.00
COR (% of Budget)	2.105	1.326	1.52

Year with Highest COR % of Budget – 1993 (3.647)

Year with Lowest COR as a % of budget – 1995 (1.034)

*Premiums portion increased due to purchase of Nursing Home Liability Insurance on standalone basis in PY 2004

** Fees portion include brokerage fees when County switched to brokerage fees instead of commissions

Another close benchmark is based on a 2004 study by Marsh, the largest insurance broker. According to its study, *Casualty Cost of Risk 2004*, government entities spent \$ 8.25 per \$1,000 of revenue on workers compensation claims, and \$ 2.31 per \$ 1,000 of revenue on general liability claims for a total of \$ 10.56 per \$ 1,000 revenue.

While the County's losses may appear to be within acceptable limits due to growth, we remain cautious and remain diligent in managing our risks. Should you have questions with respect to this report, please contact me at 888-5940. Thank you.

McLEAN COUNTY RISK MANAGEMENT FUND
AS OF December 31,
2005

TABLE 1: CUMULATIVE CLAIMS SUMMARY BY LINE:

CLAIM TYPE	ALL	OPN	PD LOSSES	RESERVES	RECOVRS	INCRD LOSSES
A. AUTO PHYSICAL DAMAGE:						
PY 1992 - 2000	109	0	\$ 159,520	\$ -	16,889	\$ 92,529
PY 2001	6	0	8,915	0	846	8,069
PY 2002	8	0	52,866	0	32,046	20,820
PY 2003	11	0	33,596	0	700	32,896
PY 2004	13	0	31,720	0	3,489.58	28,230
PY 2005	15	3	43,370	0	9,653	33,717
B. AUTO LIABILITY:						
PY 1992 - 2000	41	0	\$ 92,393	\$ -	11,387	\$ 98,780
PY 2001	4	0	3,301	0	-	3,301
PY 2002	3	0	2,474	0	-	2,474
PY 2003	5	0	22,476	0	-	22,476
PY 2004	2	0	15,415	0	200	15,215
PY 2005	3	0	10,064	0	-	10,064
C. GENERAL LIABILITY:						
PY 1992 - 1999	69	0	248,054	-	-	\$ 248,054
PY 2000	11	1	8,548	1,756	-	10,304
PY 2001	8	1	70,771	5,000	-	75,771
PY 2002	7	0	3,304	-	-	3,304
PY 2003	15	3	26,687	24,448	-	51,135
PY 2004	8	3	20,898	16,768	-	37,667
PY 2005	11	1	3,118	6,600	-	\$9,718
D. WORKER'S COMPENSATION:						
PY 1992 - 1996*	450	1	\$ 3,859,992	\$ 38,377	1,993,479	\$ 1,904,890
PY 1997**	76	1	263,956	17,907	10,520	271,343
PY 1998	105	1	311,995	1	-	311,996
PY 1999	73	2	349,970	254,924	-	604,894
PY 2000	64	2	258,408	101,182	-	359,590
PY 2001	71	3	265,000	36,685	8,500	293,185
PY 2002	76	1	340,736	108,646	-	449,382
PY 2003	65	3	111,690	177,114	659	288,145
PY 2004	67	6	139,513	107,128	1,216	245,425
PY 2005	63	19	107,552	138,652	-	246,204

* Includes catastrophic incident of 2/16/93 ** Includes Fatality of 8/15/97

Table 2: Historical Fourth Quarter experience FY 2001 – FY 2005

COVERAGES:	FY 2001		FY 2002		FY 2003		FY 2004		FY 2005	
	#	INCRD \$	#	INCRD \$	#	INCRD \$	#	INCRD \$	#	INCRD \$
Auto Physical Damage	6	8,069	8	20,820	11	32,896	13	30,863	15	33,717
Auto Liability	4	3,301	1	724	4	9,391	1	8,300	3	10,064
General Liability	5	1,499	1	489	10	14,085	4	2,583	10	9,718
Worker's Compensation	64	196,966	73	249,822	61	98,074	67	48,506	63	246,204
TOTAL:	79	209,835	83	271,855	86	154,446	85	90,252	91	299,703

An Ordinance
Of the McLean County Board
Amending the 2006 Combined
Annual Budget and Appropriation Ordinance

WHEREAS, it has become necessary to reappropriate the unliquidated encumbrances of the prior Fiscal Year 2005 budget, and

WHEREAS, reappropriations in the amount of \$238,233.29 for the Fiscal Year 2005 would be added; and

WHEREAS, the Executive Committee has deemed it necessary and advisable to reappropriate the unliquidated encumbrances outstanding at the close of the 2005 Fiscal Year, now therefore,

BE IT ORDAINED, by the County Board of McLean County, Illinois, that the Fiscal Year 2006 budget is amended by reappropriation of the outstanding purchase orders at the close of the 2005 Fiscal Year as follows:

COUNTY GENERAL FUND/0001

COURT SERVICES - JUVENILE DETENTION

05-0000157	Bob Barker Company	\$1,234.38
TOTAL COURT SERVICES/JUVENILE DETENTION		\$1,234.38

SHERIFF

05-0000144	Ray O'Herron Co., Inc.	\$ 4,682.87
05-0000149	Identix, Inc.	\$19,135.00
05-0000158	D. M. Mattson, Inc.	\$52,700.00
05-0000175	Identix, Inc.	\$ 3,543.00
TOTAL SHERIFF		\$80,060.87

BUILDING AND ZONING

05-0000138	Sidwell Company, Inc.	\$ 5,896.00
TOTAL BUILDING AND ZONING		\$ 5,896.00

FACILITIES MANAGEMENT

05-0000133	Lincoln Office	\$11,250.00
05-0000177	Hunzeker Service Agency	\$ 6,000.00
TOTAL FACILITIES MANAGEMENT		\$17,250.00

INFORMATION SERVICES

05-0000038	IBM Corporation	\$7,064.00
05-0000161	Dell Computer	\$ 319.50
05-0000168	CDW Government , Inc.	\$25,000.00
05-0000171	CDW Government, Inc.	\$7,448.62
TOTAL INFORMATION SERVICES		\$39,832.12

TOTAL COUNTY GENERAL FUND		\$144,273.37
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HOMELAND SECURITY GRANT FUND/0005

05-0000110	Bob Ridings, Inc.	\$46,965.00
05-0000111	Bob Ridings, Inc.	\$ 5,500.00
05-0000128	Defense Group, Inc.	\$ 1,354.00

TOTAL HOMELAND SECURITY GRANT FUND/0005		\$53,819.00
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AIDS/COMM.DISEASE/FUND 0107

05-0000145	U. S. Postmaster	\$1,778.17
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TOTAL AIDS/COMM.DISEASE/FUND 0107		\$1,778.17
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T.B. CARE & TREATMENT/FUND 0111

05-0000162	Merle Pharmacy	\$3,000.00
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TOTAL T.B. CARE & TREATMENT/FUND 0111		\$3,000.00
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HEALTH DEPARTMENT FUND/0112

05-0000163	Rogers Supply Company, Inc.	\$4,300.00
05-0000164	Heyworth Printing	\$2,500.00
05-0000165	City of Bloomington	\$1,200.00
05-0000166	George T. Schmidt, Inc.	\$1,210.00
05-0000167	4 Imprint	\$1,000.00
05-0000176	All Forms & Checks, Inc.	\$2,738.80
TOTAL HEALTH DEPARTMENT/FUND 0112		\$12,948.80

BRIDGE MATCHING/FUND 0120

05-0000142	Wissmiller and Evans	\$8,002.00
TOTAL BRIDGE MATCHING/FUND 0120		\$8,002.00

TORT JUDGEMENT/FUND 0135

05-0000148	Atrium Pharmacy, The	\$3,000.00
TOTAL TORT JUDGEMENT/FUND 0135		\$3,000.00

RECORDER DOCUMENT STORAGE/FUND 0137

05-0000174	Dell Computer Corporation	\$ 718.20
TOTAL RECORDER DOCUMENT STORAGE/FUND 0137		\$ 718.20

CIRCUIT CLERK/COURT DOCUMENT STORAGE/FUND 0142

05-0000139	Byers Printing	\$8,793.75
05-0000146	Byers Printing	\$1,900.00
TOTAL CIRCUIT CLERK/FUND 0142		\$10,693.75

GRAND TOTAL COMBINED FUNDS		\$238,233.29
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Adopted by the McLean County Board of McLean County, Illinois this 21st day of February 2006.

Michael F. Sweeney, Chairman
McLean County, Illinois

Attest: _____
Peggy Ann Milton, County Clerk
McLean County, Illinois

Assessment Status Report

Township	Book to		To		To		Publisher	Newspaper	Date of		Final		2004		2005		Complaints		Books	
	S/A	Primer	Primer	Publisher	Publication	Filing Date			Factor	Factor	Filed	Closed								
Allin	10/10/05	11/10/05	11/11/05	11/11/05	11/16/05	12/16/05	1.0000	1.0341	6	1/27/2006										
Anchor	10/24/05	11/25/05	11/25/05	11/25/05	12/01/05	01/03/06	1.0322	1.0491	2	1/27/2006										
Arrowsmith	07/25/05	10/05/05	10/04/05	10/04/05	10/11/05	11/10/05	1.1189	1.0000	5	1/27/2006										
Bellflower	08/31/05	10/05/05	10/05/05	10/05/05	10/12/05	11/14/05	1.0000	1.0000	1	1/27/2006										
Bloomington	09/12/05	11/10/05	11/11/05	11/11/05	11/16/05	12/16/05	1.0000	1.0128	40	1/27/2006										
Blue Mound	08/08/05	08/25/05	08/25/05	08/25/05	09/01/05	10/03/05	1.0704	1.1040	32	1/27/2006										
Cheney's Grove	09/02/05	10/10/05	10/10/05	10/10/05	10/13/05	11/14/05	1.0417	1.0000	13	1/27/2006										
Chenoca	09/26/05	11/25/05	11/25/05	11/25/05	12/01/05	01/03/06	1.0000	1.0297	7	1/27/2006										
City	10/24/05	11/11/05	11/11/05	11/11/05	11/16/05	12/16/05	1.0406	1.0300	333	1/27/2006										
Cropsey	10/24/05	11/25/05	11/25/05	11/25/05	12/01/05	01/03/06	1.0000	1.1033	2	1/27/2006										
Dale	10/17/05	11/10/05	11/10/05	11/10/05	11/16/05	12/16/05	1.0514	1.0158	16	1/27/2006										
Danvers	09/30/05	11/15/05	11/15/05	11/15/05	11/24/05	12/27/05	1.0420	1.0044	5	1/27/2006										
Dawson	09/13/05	10/07/05	10/07/05	10/07/05	10/13/05	11/14/05	1.1189	1.0732	21	1/27/2006										
Downs	08/29/05	09/01/05	09/01/05	09/01/05	09/07/05	10/07/05	1.0498	1.0000	7	1/27/2006										
Dry Grove	10/24/05	11/10/05	11/10/05	11/10/05	11/17/05	12/19/05	1.0729	1.0000	14	1/27/2006										
Empire	11/17/05	11/28/05	11/28/05	11/28/05	11/30/05	12/30/05	1.0286	1.0210	26	1/27/2006										
Funk's Grove	11/28/05	11/28/05	11/28/05	11/28/05	12/01/05	01/03/06	1.0000	1.0000	8	1/27/2006										
Gridley	10/40/05	11/08/05	11/08/05	11/08/05	11/10/05	12/12/05	1.0432	1.0590	30	1/27/2006										
Hudson	09/12/05	10/17/05	10/17/05	10/17/05	10/20/05	11/21/05	1.0248	1.0603	43	1/27/2006										
Lawndale	10/25/05	11/25/05	11/25/05	11/25/05	12/01/05	01/03/06	1.0450	1.0157	0	1/27/2006										
Lexington	10/06/05	11/25/05	11/25/05	11/25/05	12/01/05	01/03/06	1.0405	1.0315	9	1/27/2006										
Martin	08/05/05	08/24/05	08/24/05	08/24/05	09/01/05	10/03/05	1.0000	1.0000	3	1/27/2006										
Money Creek	10/05/05	11/18/05	11/18/05	11/18/05	11/24/05	12/27/05	1.0057	1.0815	18	1/27/2006										
Mount Hope	11/28/05	11/28/05	11/28/05	11/28/05	12/01/05	01/03/06	1.0151	1.0277	19	1/27/2006										
Normal	08/31/05	09/20/05	09/20/05	09/20/05	09/29/05	10/31/05	1.0122	1.0422	420	1/27/2006										
Old Town	09/14/05	10/12/05	10/12/05	10/12/05	10/19/05	11/18/05	1.0432	1.0327	26	1/27/2006										
Randolph	07/05/05	10/11/05	10/11/05	10/11/05	10/20/05	11/21/05	1.0400	1.0073	17	1/27/2006										
Towanda	09/19/05	10/20/05	10/20/05	10/20/05	10/26/05	11/28/05	1.0361	1.0350	26	1/27/2006										
West	08/29/05	09/02/05	09/02/05	09/02/05	09/07/05	10/07/05	1.1160	1.1036	4	1/27/2006										
White Oak	08/30/05	09/29/05	09/29/05	09/29/05	10/06/05	11/07/05	1.0538	1.0731	17	1/27/2006										
Yates	10/25/05	11/25/05	11/25/05	11/25/05	12/01/05	01/03/06	1.0377	1.0319	5	1/27/2006										
									1175											

TRANSFER AGREEMENT

EFFECTIVE DATE: February 21, 2006

BY AND BETWEEN

Lutheran Senior Living of Illinois, Inc., an Illinois not-for-profit corporation
(hereinafter referred to as "Lutheran Senior Living");

AND

McLean County Nursing Home, an Illinois not-for-profit corporation;

WITNESSETH:

WHEREAS, Lutheran Senior Living is in the process of developing Luther Oaks
Senior Living Community in Bloomington, Illinois; and

WHEREAS, McLean County Nursing Home currently owns and operates a
licensed nursing facility in Normal, Illinois; and

WHEREAS, a key component of Luther Oaks, the senior living community being developed, is the availability of nursing facility services to residents of Luther Oaks; and

WHEREAS, McLean County Nursing Home possesses the capabilities of providing such services to residents of Luther Oaks; and

WHEREAS, both parties would mutually benefit from the provision of nursing facility services by McLean County Nursing Home to residents of Luther Oaks;

NOW THEREFORE, in consideration of the mutual covenants contained herein, and intending to be legally bound hereby, the parties hereto agree as follows:

1. McLean County Nursing Home shall give residents of Luther Oaks who meet McLean County Nursing Home's admission criteria access to any of its available nursing facilities. McLean County Nursing Home agrees that it will accept the transfer of such residents from Luther Oaks on a "next bed available" basis subject to the Admission Priority Policy of the nursing home.

2. Luther Oaks and McLean County Nursing Home agree to coordinate all discharge planning efforts and activities with respect to the transfer of residents from Luther Oaks to McLean County Nursing Home and from McLean County Nursing Home to Luther Oaks. In this regard, all information concerning the condition of such residents necessary to provide for their proper care upon discharge or transfer shall be shared by the parties hereto.

3. Luther Oaks shall inform its residents who meet the criteria for admission to McLean County Nursing Home's nursing facilities of the availability of services at said facilities pursuant to this Agreement.

4. All applicable statutes, rules, regulations and standards of any and all governmental authorities and regulatory and accreditation bodies relating to the activities of the nursing facility shall be fully complied with by the parties hereto.

5. McLean County Nursing Home shall permit Luther Oaks to use McLean County Nursing Home's name in Luther Oaks's marketing brochures, advertisements and similar materials, and in information given to residents of Luther Oaks. It is further understood and agreed that all proprietary information, as well as all trade or service marks used by each party of any logos or variants thereof are the exclusive property of that party, and that neither shall the other party obtain any right thereto or therein, nor shall the other party at any time use trade or service marks, tradenames, logos, or other commercial symbols of the other party unless specifically consented to by the other party, except as provided for herein.

6. Neither party shall be liable to the other party for any loss, injury, delay, damages or other casualty suffered or incurred by such other party due to strikes, riots, storms, fires, explosions, acts of God, war, or any other cause similar thereto which is beyond the reasonable control of a party hereto. Any failure or delay by a party hereto in performance of any of its obligations under this Agreement due to one or more of the foregoing causes shall not be considered as a breach of this Agreement.

7. Both parties represent that they maintain reasonable and necessary insurance, including general liability insurance, and hereby agree to provide proof of such coverage upon request.

8. This Agreement may not be assigned by either party, without the express written consent of the other.

9. This Agreement may be amended at any time by mutual agreement of the parties, provided that before any amendment shall be operative or valid it shall have been reduced to writing and signed by both parties.

10. No failure by either party to insist upon the strict performance of any covenant, agreement, term or condition of this Agreement or to exercise a right or remedy shall constitute a waiver. No waiver of any breach shall affect or alter this Agreement, but each and every covenant, condition, agreement and term of this Agreement shall continue in full force and effect with respect to any other existing or subsequent breach.

11. This Agreement constitutes the entire agreement between the parties and contains all the agreements between the parties with respect to the subject matter hereof. The invalidity or unenforceability of any particular provision of this Agreement shall not affect the other provisions hereof, and this Agreement shall be construed in all respects as if such invalid or unenforceable provisions were omitted.

12. This Agreement shall be construed and enforced under and in accordance with the laws of the State of Illinois.

13. Nothing in this Agreement is intended to nor shall it be construed as creating or giving rise to any rights in any third parties or any persons other than the parties hereto.

14. This Agreement shall continue in effect until terminated by mutual written consent of both parties or by either party upon giving 120 days advance written notice to the other party of its intention to terminate.

IN WITNESS THEREOF, the parties have caused this Agreement to be effective
the day and year first written above.

DATE: _____ LUTHERAN SENIOR LIVING OF ILLINOIS, INC.

WITNESS: _____ By: _____
President

DATE: _____ MCLEAN COUNTY NURSING HOME

WITNESS: _____ By: _____
Chairman, McLean County Board

McLEAN COUNTY NURSING HOME

ACCRUED EXPENDITURE

Prt Date January 30, 2006

	2005 BUDGET	2005 MONTHLY ALLOC	DEC,2005 ACCRUED EXPENSE	ADJUSTED YTD EXPENSE	REMAINING BUDGET	YTD VARIANCE AMOUNT	PER CENT OF BUDGET SPENT	PROJECTED EXPENSE 12/31/05
SALARIES	3,147,045	267,283	290,664	3,472,767	(325,722)	(325,722)	110.35%	3,472,767
IMRF	204,558	17,373	18,893	225,730	(21,172)	21,172	110.35%	225,730
MED/LIFE	365,085	11,643	31,007	365,061	24	(24)	99.99%	365,061
SOC/SEC	240,749	20,447	22,236	265,667	(24,918)	24,918	110.35%	265,667
VAC LIAB	(1,418)	(120)	(120)	(1,417)	(1)	1	99.93%	(1,417)
SELLBACK	0	0	0	0	0	0	0.00%	#DIV/0!
PERSONNEL	3,956,019	316,626	362,680	4,327,807	(371,789)	371,789	109.40%	4,327,807
COMMODITIES	642,965	54,608	47,249	614,818	28,147	(28,147)	95.62%	614,818
CONTRACTUAL	1,297,036	109,395	93,954	1,090,963	206,073	(206,073)	84.11%	1,090,963
CAPITAL	189,438	16,089	9,607	100,555	88,883	(88,883)	53.08%	100,555
GRAND TOTAL	6,085,457	496,718	513,490	6,134,143	(48,686)	48,686	100.80%	6,134,143

McLEAN COUNTY NURSING HOME

ACCRUED REVENUE

Prt Date January 30, 2006

	2005 BUDGET	2005 MONTHLY ALLOC	DEC,2005 ACCRUED REVENUE	ADJUSTED YTD REVENUE	REMAINING BUDGET	YTD VARIANCE AMOUNT	PER CENT OF BUDGET SPENT	PROJECTED REVENUE 12/31/05
MEDICARE REVENUE	775,400	65,856	48,300	667,611	107,789	(107,789)	86.10%	667,611
IDPA REVENUE	2,581,280	219,232	300,306	3,273,331	(692,051)	692,051	126.81%	3,273,331
SCHOOLING REIMB	0	0	0	265	(265)	265	#DIV/0!	265
JDC LAUNDRY	7,100	603	626	7,062	38	(38)	99.46%	7,062
JDC FOOD	31,501	2,675	2,678	30,441	1,060	(1,060)	96.64%	30,441
MEALS	500	42	68	665	(165)	165	133.05%	665
PVT PAY REVENUE	1,862,960	158,224	146,372	1,952,199	(89,239)	89,239	104.79%	1,952,199
UNCLASS	7,300	620	60	3,868	3,432	(3,432)	52.99%	3,868
INTEREST EARNED	41,604	3,533	38,796	112,866	(71,262)	71,262	271.29%	112,866
SALE OF ASSETS	0	0	0	0	0	0	#DIV/0!	0
TRANSFER IN	424,373	36,043	41,878	496,181	(71,808)	71,808	116.92%	496,181
TELEPHONE REIMB	0	0	1,050	13,140	(13,140)	13,140	#DIV/0!	13,140
TOTAL ACC REVENUE	5,732,018	486,829	580,134	6,557,630	(825,612)	825,612	114.40%	6,557,630
TOTAL ACC REVENUE	5,732,018	486,829	580,134	6,557,630	(825,612)	825,612	114.40%	6,557,630
LESS ACCRUED EXPENSE	(6,085,457)	(496,718)	(513,490)	(6,134,143)	48,686	(48,686)	100.80%	(6,134,143)
ACC REV - (ACC EXP)	(353,439)	(9,889)	66,644	423,487	(776,926)	776,926		423,487
PLUS CAP EXP	189,438	16,089	9,607	100,555	88,883	(88,883)		100,555
ACC BALANCE	(164,001)	6,200	76,251	524,042	(688,043)	688,043		524,042

McLEAN COUNTY NURSING HOME

CENSUS Report - 2005

MONTH	AVG MEDICARE	AVG PVT PAY	AVG IDPA	AVG IN HOUSE	AVG BED HOLD	AVG CENSUS	AVG VACANT
JANUARY	10.94	46.48	87.16	144.58	2.45	147.03	2.97
FEBRUARY	9.36	46.64	88.68	144.68	0.68	145.36	4.64
MARCH	6.16	50.26	90.61	147.03	1.26	148.29	1.71
APRIL	4.43	45.50	90.37	140.30	1.23	141.53	8.47
MAY	5.45	43.39	89.32	138.16	1.19	139.35	10.65
JUNE	5.27	45.57	92.07	142.90	1.77	144.67	5.33
JULY	4.03	46.90	92.13	143.06	1.35	144.42	5.58
AUGUST	4.26	43.97	93.23	141.45	1.23	142.68	7.32
SEPTEMBER	5.47	41.73	97.90	145.10	1.07	146.17	3.83
OCTOBER	4.23	39.94	98.48	142.65	0.81	143.45	6.55
NOVEMBER	4.60	39.83	101.77	146.20	1.40	147.60	2.40
DECEMBER	5.45	40.77	99.32	145.55	0.74	146.29	3.71

YTD AVERAGE 5.80 44.25 93.42 143.47 1.26 144.74 5.26
 % OF CAPACITY 3.87% 29.50% 62.28% 95.65% 0.84% 96.49% 3.51%

**A RESOLUTION TRANSFERRING MONIES FROM THE
 WORKING CASH FUND 0002
 TO THE PERSONS WITH DEVELOPMENTAL DISABILITIES FUND 0110,
 CHILDREN'S ADVOCACY CENTER 0129,
 F.I.C.A./SOCIAL SECURITY FUND 0130 AND
 TO THE I.M.R.F. FUND 0131
 FISCAL YEAR 2006**

WHEREAS, the County Board of McLean County heretofore appropriated monies for the purposes set forth in the Persons with Developmental Disabilities Fund 0110, the Children's Advocacy Center Fund 0129, the F.I.C.A./Social Security Fund 0130 and the I.M.R.F. Fund 0131 in the Fiscal Year 2006 Combined Annual Appropriation and Budget Ordinance; and,

WHEREAS, it is necessary to provide sufficient monies to meet ordinary and necessary expenses that have been budgeted; and,

WHEREAS, the County has heretofore established a Working Cash Fund and has accordingly collected a special tax therefore pursuant to statute; and,

WHEREAS, it is desirable to transfer to said funds, monies from said Working Cash Fund; and,

WHEREAS, the County Administrator has recommended the need for borrowing and transferring up to \$582,184.00 from the Working Cash Fund to the Persons with Developmental Disabilities Fund 0110, the Children's Advocacy Center Fund 0129, the F.I.C.A./Social Security Fund 0130 and the I.M.R.F. Fund 0131; and,

WHEREAS, the Finance Committee concurs with the County Administrator's recommendation and so recommends this resolution to the McLean County Board; now, therefore,

BE IT RESOLVED by the McLean County Board in regular session that the sum of up to \$582,184.00 be and the same is hereby ordered transferred on an as needed basis from the Working Cash Fund 0002 to the following funds as follows:

FROM:	Working Cash Fund 0002	<u>\$582,184.00</u>
TO:	Persons with Developmental Disabilities Fund 0110	\$159,161.00
	Children's Advocacy Center Fund 0129	\$ 8,769.00

(2)

F.I.C.A./Social Security Fund 0130 \$168,948.00

I.M.R.F. Fund 0131 \$245,306.00

Total: \$582,184.00

BE IT FURTHER RESOLVED that the Treasurer of McLean County be and is hereby directed to make such transfer of up to \$582,184.00 accordingly.

BE IT FURTHER RESOLVED that said County Treasurer be directed to immediately reimburse said Working Cash Fund on or before October 1, 2006, upon receipt of general property taxes until the full amount so transferred has been returned to the Working Cash Fund 0002.

BE IT FURTHER RESOLVED that the County Clerk transmit certified copies of this Ordinance to the County Administrator, County Auditor, and the County Treasurer.

ADOPTED by the County Board of McLean County, Illinois this 21st day of February, 2006.

ATTEST:

APPROVED:

Peggy Ann Milton, Clerk of the McLean County Board
McLean County, Illinois

Michael F. Sweeney, Chairman
McLean County Board

**AN ORDINANCE TRANSFERRING MONIES FROM THE
COUNTY GENERAL FUND 0001
TO THE TORT JUDGMENT FUND 0135
FISCAL YEAR 2006**

WHEREAS, the County Board of McLean County heretofore appropriated monies for the purposes set forth in the Tort Judgment Fund 0135 in the Fiscal Year 2006 Combined Annual Appropriation and Budget Ordinance; and,

WHEREAS, it is necessary to provide sufficient monies to meet ordinary and necessary expenses that have been budgeted; and,

WHEREAS, there are sufficient monies available in the County General Fund 0001 that may be drawn upon temporarily to meet this projected shortfall; and,

WHEREAS, it is desirable to transfer said monies; and,

WHEREAS, the County Administrator has recommended the need for borrowing and transferring up to \$1,349,107.00 from the General Fund 0001 to the Tort Judgment Fund 0135; and,

WHEREAS, the Finance Committee concurs with the County Administrator's recommendation and so recommends this Ordinance to the McLean County Board; now, therefore,

BE IT ORDAINED by the McLean County Board in regular session that the sum of up to \$114,792.00 be and the same is hereby ordered transferred on an as needed basis as follows:

FROM:	County General Fund 0001	<u>\$1,349,107.00</u>
TO:	FICA/Social Security Fund 0130	<u>\$1,349,107.00</u>

BE IT FURTHER ORDAINED that the Treasurer of McLean County be and is hereby directed to make such transfer of up to \$1,349,107.00 accordingly.

BE IT FURTHER ORDAINED that said County Treasurer be directed on or before October 1, 2006 to reimburse said County General Fund 0001 after receipt of general property taxes until the full amount so transferred has been returned to these funds.

BE IT FURTHER ORDAINED that the County Clerk transmit certified copies of this Ordinance to the County Administrator, County Auditor, and the County Treasurer.

(2)

ADOPTED by the County Board of McLean County, Illinois this 21st day of February, 2006.

ATTEST:

APPROVED:

Peggy Ann Milton, Clerk of the McLean County Board
McLean County, Illinois

Michael F. Sweeney, Chairman
McLean County Board

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PROJECTED CASH FLOW FOR FISCAL YEAR 2005
 JANUARY 1, 2006 - MAY 31, 2006

COUNTY FUND	CASH BALANCE AS OF 12/31/05		ACTUAL REVENUE AS OF 5/31/05		EST. REVENUE AS OF 5/31/06		TOTAL REVENUE EST. 5/31/06		EXPENDITURES		
	6,304,246	39,973	7,794,639	60,791	7,950,532	39,974	14,254,778	79,947	ACTUAL AS OF 5/31/05	EST. AS OF 5/31/06	EST. AS OF 5/31/06
General Fund 0001	6,304,246	39,973	7,794,639	60,791	7,950,532	39,974	14,254,778	79,947	10,438,310	10,855,842	3,398,935
Sub-Total	6,304,246	39,973	7,794,639	60,791	7,950,532	39,974	14,254,778	79,947	10,438,310	10,855,842	3,398,935
Persons Devel. Disabilities Fund 0110									234,423	239,108	(159,161)
TB Care & Treatment Fund 0111	196,020		30,125		30,657		226,677		101,027	103,577	123,100
Health Department Fund 0112	1,150,250		798,777		713,115		1,863,365		1,335,213	1,462,469	400,896
Highway Department Fund 0120	1,288,819		280,875		65,200		1,354,019		1,116,838	1,028,350	325,669
Bridge Matching Fund 0121	1,911,918		146,175		-		1,911,918		171,533	1,212,200	699,718
County Matching Fund 0122	1,256,672		109,700		-		1,256,672		95,074	362,500	894,172
Children's Advocacy Center Fund 0129	(9,308)		168,085		176,100		166,792		169,274	175,561	(8,769)
FICA - Social Security Fund 0130	304,835		210,006		318,600		623,435		761,907	792,383	(168,948)
IMRF Fund 0131	181,004		191,623		274,500		455,504		673,856	700,810	(245,306)
Tort Judgment Fund 0135	(514,008)		220,284		325,800		(188,208)		1,116,249	1,160,899	(1,349,107)
Veterans Assistance Commission 0136	70,814		15,474		24,500		95,314		49,558	51,540	43,774
Sub-Total	5,876,989		2,231,915		1,968,446		7,845,435		5,824,952	7,289,398	556,037
TOTAL	12,181,235		10,026,554		9,918,978		22,100,213		16,263,262	18,145,240	
Working Cash Fund	742,423						742,423				
TOTAL AVAILABLE	12,923,658						22,842,636				