



Joe Shirley, Jr.
Supervisor, District I

Tom M. White, Jr.
Chairman, District II

Barry Weller
Vice Chairman, District III

**NOTICE OF A PUBLIC MEETING AND AGENDA OF THE
APACHE COUNTY BOARD OF SUPERVISORS,
THE APACHE COUNTY PUBLIC HEALTH SERVICES DISTRICT
AND THE APACHE COUNTY JAIL DISTRICT**

**October 15, 2013
Board of Supervisors' Hearing Room, First Floor
75 West Cleveland Street
St. Johns, Arizona
8:30 a.m. MST**

Invocation by Invitation.
Pledge of Allegiance.

**NOTICE OF PUBLIC MEETING AND AGENDA OF THE
APACHE COUNTY PUBLIC HEALTH SERVICES DISTRICT
HELD IN CONJUNCTION WITH THE
BOARD OF SUPERVISORS MEETING
October 15, 2013**

1. Discussion and possible approval of the contract with Karen Stokes, RN, to provide clinical services as a subcontractor at \$30.00 per hour, not to exceed 32 hours per week.

**NOTICE OF PUBLIC MEETING AND AGENDA OF THE
APACHE COUNTY JAIL DISTRICT
HELD IN CONJUNCTION WITH THE
BOARD OF SUPERVISORS MEETING
October 15, 2013**

1. Discussion and possible approval to remove Estevaun Madrid, effective 9/10/13, Verlyn Walker, effective 9/24/13, Charles Shreeve, effective 10/1/13, and Vera Spencer-Joe, effective 10/02/13 from probation, with the 2.5% end of probation increase.

**NOTICE OF A PUBLIC MEETING AND AGENDA OF
THE APACHE COUNTY BOARD OF SUPERVISORS
October 15, 2013**

1. **Call to the Public:** Individuals may address the Board on any relevant issue for an amount of time determined by the Chairman. At the close of the call to the public, Board members may not respond to any comments but may respond to criticism, ask staff to review a matter or ask that a matter be placed on a future agenda.
2. **Discussion and possible approval of CONSENT ITEMS:** All items indicated by an asterisk (*) will be handled by a single vote as part of the consent agenda, unless a Board Member, County Manager or member of the public objects at the time the agenda item is called.

County Manager/Clerk of the Board:


- *A. Request approval of minutes dated October 1, 2013.
- *B. Request approval of demands dated October 1, 2013 to October 15, 2013. Demands are payments made by the County. Specific details of the demands may be requested through the County public record request process.
- *C. Concho Fire Department: Request approval of a Fireworks Display Permit for November 9, 2013 (Veteran's Day) located at Cinder Mountain, in Concho, Arizona.
- *D. Request approval of the Board of Equalization Hearing Officer's recommendations for the 2014 Residential Petition for Review of Valuation appeals.

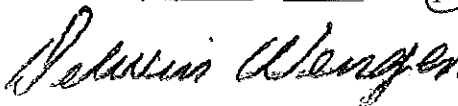
Personnel Items:

- *E. Round Valley Road Yard: Discussion and possible approval to hire Tyson Koch in the Round Valley Road Yard, Mr. Koch will be assigned the duties of Road Worker II. Mr. Koch is the husband of road yard secretary Susan Koch. Mr. and Mrs. Koch will not supervise each other, so there will not be an issue of violation of statutes with this hiring.
 - *F. District II: Request authorization to create a Facility Construction Worker II position and fill the vacancy.
 - *G. Round Valley Road Yard: Request approval to remove Kenny Calloway from probationary status with the 2.5% end of probation increase, effective October 8, 2013.
3. **Engineering Department:** Discussion and possible approval to award contract for District II janitorial services.

4. Engineering Department: Discussion and possible approval to enter into an Intergovernmental Agency Agreement between Apache County and Pinal County for their annual safety rodeo event on November 7, 2013.
5. Sheriff's Office: Discussion and possible ratification of an Intergovernmental Agreement between the City of St. Johns and the Apache County Sheriff's Office to provide law enforcement services for the City of St. Johns, pursuant to A.R.S. 9-498, at no cost to the County.
6. Sheriff's Office: Discussion and possible approval to solicit bids for lease/purchase agreement on 12 fully equipped patrol vehicles.
7. Chairman White: Discussion and possible approval of deferring all requests for merit increases to the budget process for fiscal year 2014/2015. All requests would be considered in conjunction with the budget for each Department or Elected Official. The Board of Supervisor's would approve/disapprove these requests during the public hearing for the approval of the Final Budget in August of 2014.
8. Notification of the County Supervisors Association Annual Legislative Summit on October 14-16, 2013 at the Mazatzal Hotel and Conference Center, Highway 87, Mile Marker 251, Payson, Arizona where two or more members of the Apache County Board of Supervisors may be in attendance.
9. Notification of the Small Counties Forum meeting on October 16, 2013 at 7:00 a.m. in the Fireside Room at the Mazatzal Hotel, Highway 87, Mile Marker 251, Payson, Arizona where two or more members of the Apache County Board of Supervisors may be in attendance.
10. Notification of the Emergency Management Summit on October 18, 2013 at 2:00 p.m. (DMST) held at St. Jude Church's Parish Hall located at 100 Aspen Drive, In Tuba City, Arizona where two or more members of the Apache County Board of Supervisors may be in attendance.

Pursuant to the Americans with Disabilities Act, the Apache County Board of Supervisors endeavors to ensure the accessibility of its meetings to all persons with disabilities. If you need an accommodation for a meeting, please contact the Clerk of the Board's office at (928)337-7503, TDD (928)-337-4402 at least 48 hours prior to the meeting (not including weekends or holidays) so that an accommodation can be arranged. One or more members of the Board of Supervisors may participate telephonically or through video communication.

Posted: 10/9/13 at 1:00 a.m. (p.m.) by 


Delwin Wengert, Clerk of the Board



BOARD OF SUPERVISORS' AGENDA ITEM REVIEW FORM

Submitter's Name: **Chris Sexton, Health District Director**

Date/Signature: **08/15/13**

Describe in detail what you want to say to the Board and what action you want the board to Take:

ACPHSD requests discussion and possible approval of the contract with Karen Stokes, CN, to provide clinical services as a subcontractor.

Date & Time Needed: _____

=====PRE-AGENDA ITEM REVIEW=====

Review Routing: Legal Finance Purchasing Human Resources Other

Legal Review:

Signature: _____

Finance Review:

Signature: _____

Purchasing Review:

Signature: _____

Human Resources Review:

Signature: _____

Health Department Director:

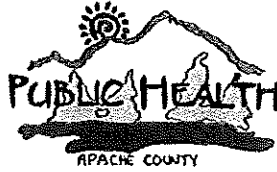
Signature: _____

Reviews completed, item approved for Agenda. Supervisor/Board Clerk's Initials: _____

=====BOARD ACTION TAKEN=====

Approved Disapproved Deleted Continued To: _____

Signature Clerk of the Board



APACHE COUNTY HEALTH SERVICES DISTRICT
AND
Karen Stokes

This agreement is entered into between the Apache County Public Health Services District, hereafter referred to as Department and Karen Stokes hereafter referred to as Subcontractor as follows:

NOW THEREFORE, the county and the subcontractor agree on the following terms and conditions.

SERVICES/SCOPE OF WORK

- Travel to clinics within Apache County.
- Assist in setting up and tearing down clinics.
- Screen patients for contraindications to receiving vaccination.
- Oversee the vaccination/prophylaxis process.
- Administer the vaccine/prophylaxis.
- Sign the clinic record.
- Observe vaccine/prophylaxis recipients for immediate reaction or complications.
- Distribute birth control methods such as Intramuscular and oral contraceptives.
- Administer pregnancy, HIV, and SDT tests and document.
- Administrative duties include audit patient medical records, filing, and data entry.
- Administer, document, and read TB tests.
- Administer STD screenings.
- Sexual health and Family Planning screening and counseling.
- Appropriate and effective documentation as required on each patient encounter.

Qualifications

Subcontractors must have a current license by the State of Arizona as a physician, physician's assistant, nurse practitioner, nurse, or paramedic.

FINANCIAL

As full and complete compensation for the services to be provided hereunder, the Department shall pay to the Subcontractor a fixed rate fee of **\$30.00 per hour**, an amount agreed upon by all parties. The contractor will participate in clinics throughout Apache County not to exceed 32 hours per week.

At the end of the first month that this agreement is in effect and at the end of each month when services are provided, the Subcontractor will submit to the Department a record of services provided. The record of services will include specific time worked each day and shall be dated and signed by the Subcontractor. The Department will submit an Authorization for Payment to the Apache County Finance Department. Payment will be made directly to the Subcontractor in accordance with Apache County's standard procedures for processing payments. If the subcontractor attends training required by the contract, travel time will be reimbursed at the hourly rate, in excess of one half hour for one way travel only, as well as actual time in attendance in a training session.

GENERAL REQUIREMENTS

1. General Requirements

This agreement is entered into in accordance with Arizona Revised Statutes §11-251 paragraph 18 and the following general requirements.

- a. The Subcontractor shall maintain all licenses, permits and authority necessary to do business and render services under this agreement throughout the term of this Agreement. The Subcontractor shall provide the Department with documentation of any and all required license, permit and accreditation. The Subcontractor shall notify the Department and shall immediately cease performance hereunder if any such license, permit or accreditation is suspended or revoked.
- b. In providing services hereunder, the Subcontractor is an independent service provider. The Subcontractor shall not be deemed an employee of the Department and shall not be entitled to any benefits provided to Department employees. Taxes, Social Security and other amounts customarily withheld from the earnings of employees shall not be withheld from the compensation paid to the Subcontractor.
- c. The Subcontractor shall comply with all federal and state statutes, regulations and orders applicable to the services provided hereunder. All federal and state laws, required to be incorporated into this Agreement, shall be enforced as though fully set forth herein.

2. Other contracts

The Department may perform additional work related to this contract or award other contracts for such work. The Subcontractor shall cooperate fully with such other Subcontractors and /or Department employees in the scheduling of and coordination of its own work with such additional work. The Subcontractor shall afford other Subcontractors reasonable opportunity for the execution of their work and shall not commit or permit any act which will interfere with the performance of work as scheduled by any other Subcontractor or by Department employees. This section shall be included in all contracts with which this Subcontractor will be required to cooperate. The Department shall equitably enforce this Section as to all

Subcontractors to prevent the imposition of unreasonable burdens on any Subcontractor.

3. Disputes

- a. In the event of a dispute under this contract, the parties agree to make a good faith attempt to resolve the dispute prior to taking formal action.
- b. The parties agree to make use of arbitration in all contracts subject to mandatory arbitration pursuant to rules adopted under A.R.S. §12-133.
- c. This contract shall be construed in accordance with Arizona law and any legal action thereupon shall be initiated in an appropriate court of the State of Arizona.

4. Termination of Contract

The Department and the Subcontractor may terminate this contract under the following conditions:

- a. The Apache County Public Health Services Department Director, hereafter referred to as Director, in addition to other rights set forth elsewhere in the contract, reserves the right to terminate this contract in whole or in part without cause effective thirty (30) days after mailing written notice of termination by certified mail, return receipt requested to the Subcontractor.
 1. In the event of termination as provided in this Section, the Subcontractor shall stop all work as specified in the notice of termination.
 2. The Subcontractor shall be paid the contract price for all services and terms completed. Upon such termination, the Subcontractor shall deliver to the Department a complete set of all documents, programs and other information created pursuant to this contract.
- b. Subcontractor may terminate this contract at any time with ninety (90) days notice in writing to the Department. Such notice shall be given by personal delivery or by certified mail, return receipt requested.
- c. This contract may be terminated by mutual written agreement of the parties specifying the termination date therein.
- d. The termination, or renewal, date of this contract is June 30, 2014.
- e. Subcontractor agrees to return any unused materials, purchased under this contract, to the Department in case of contract termination.

5. Default

- a. The Director, in addition to other rights set forth elsewhere in the contract, may at any time terminate this contract in whole or in part if the Director determines that the Subcontractor has failed to perform any requirement.
- b. The Subcontractor shall continue the performance of this contract to the extent not terminated.
- c. If this contract is terminated as provided herein, the Director, in addition to any other rights provided in this Section, may require the Subcontractor to transfer

title and deliver to the county, in the manner and to the extent directed by the Director, such partially completed reports or other documentation as the Subcontractor has specifically produced or specifically acquired for the performance of such part of this contract which has been terminated. Payments for completed reports and other documentation delivered to and accepted by the Director shall be at the contract price. Payment for partially completed reports and other documentation delivered to and accepted by the Director shall be in an amount agreed upon by the Subcontractor and the Director.

- d. The rights and remedies of the Department enumerated in this Section shall be in addition to any other rights and remedies provided by or under this contract by law.

6. Confidentiality of Records

The Subcontractor shall establish and maintain procedures and controls that comply with Arizona Administrative Code (A.A.C.) §R9-1-311 through §R9-1-315 regarding disclosure of information and records. No medical information contained in its records or obtained from the Department or from others in carrying out its functions under this contract shall be used or disclosed by it, its agents, officers, employees of Subcontractors except as is essential to the performance of the contract. Neither medical information nor names or other information regarding any person applying for, claiming, or receiving items or services contemplated in this contract, or of any employer of such person shall be made available for any political or commercial purpose. Information, the source of which is a Federal agency, or from any person or provider acting under the Federal agency pursuant to Federal law, shall be disclosed only as provided by Federal law.

7. Non-Discrimination

Subcontractor agrees to comply with all Federal and State laws that deal with civil rights and discrimination and are applicable to the services provided under this agreement.

8. Record Retention

The Department and Subcontractor shall preserve and make available all records for a period of five years from the date of final payment under this contract or until resolution of any audit by the Arizona Department of Health Services, whichever shall last occur, and for such period as is required by any other paragraph of contract including the following:

- a. If this contract is completely or partially terminated, the records relating to the work terminated shall be preserved and made available for a period of five years from the date of any such termination.
- b. Records which relate to disputes, litigations or the settlement of claims arising out of the performance of this contract, or to cost and expenses of the contract as to which exceptions have been taken by the Director, shall be retained by the

12. The Subcontractor shall not assign any right or interest in this Agreement without the District's prior written approval, nor shall the Subcontractor delegate or subcontract any duty hereunder without the District's prior written approval. Any purported assignment, delegation or subcontract without the District's prior written approval shall be void.

Effective Date: October 1, 2013

Expiration Date: June 30, 2014

In witness whereof, the parties hereto have executed this contract on the day and year specified below.

For and on behalf of the Department:

Tom White, Apache County, Chairman of the Board

Date _____

Chris Sexton, Apache County Health Director

Date _____

Subcontractor:



Karen Stokes

Date 1 OCTOBER 2013

Approved as to form:

County Attorney

Date _____

BOARD OF SUPERVISOR'S AGENDA ITEM REVIEW FORM

date/time stamp

Submitter's Name: (Individual, Organization, or County Department)

Jail District _____

Date/Signature: _____

Describe in detail what you want to say to the Board and what action you want the Board to take:

Request authorization to remove from Probationary status with the standard 2.5% increase Estevaun Madrid, effective 9/10/13, Verlyn Walker, effective 9/24/13, Charles Shreeve, effective 10/1/13, and Vera Spencer-Joe, effective 10/02/13.

_____ BOS Meeting Date Requested Next available

PRE-AGENDA ITEM REVIEW

Review Routing / /Legal / /Finance / /Purchasing / /Human Resource / /Other: _____

Legal Review: _____

Signature: _____

Finance Review: _____

Signature: _____

Purchasing Review: _____

Signature: _____

Human Resources Review: _____

Signature: _____

Other Review: _____

Signature: _____

Reviews completed, item approved for Agenda. Supervisor/Board Clerk's Initials _____

BOARD ACTION TAKEN

/ /Approved / /Disapproved / /Deleted / /Continued to: _____

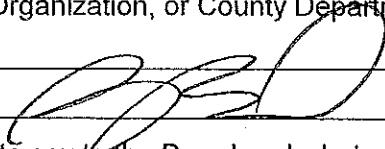
BOARD OF SUPERVISOR'S AGENDA ITEM REVIEW FORM

CSRS Form 800-107

Submitter's Name: (Individual, Organization, or County Department)

COUNTY MANAGER'S OFFICE

Date/Signature:



Describe in detail what you want to say to the Board and what action you want the Board to take:

CALL TO THE PUBLIC

BOS Meeting Date Requested ON-GOING

PRE-AGENDA ITEM REVIEW

Review Routing / /Legal / /Finance / /Purchasing / /Human Resource / /Other:

Legal Review:

Signature:

Finance Review:

Signature:

Purchasing Review:

Signature:

Human Resources Review:

Signature:

Other Review:

Signature:

Reviews completed, item approved for Agenda.

Supervisor/Board Clerk's Initials

BOARD ACTION TAKEN

/ /Approved / /Disapproved / /Deleted / /Continued to:

OFFICIAL PROCEEDINGS OF THE APACHE COUNTY
BOARD OF SUPERVISORS MEETING

October 1, 2013
St. Johns, Arizona

Present were: Chairman Tom M. White, Jr., Supervisor Joe Shirley, Jr., County Manager/Clerk of the Board Delwin Wengert and County Attorney Michael Whiting. Vice Chairman Barry Weller and Attorney Joe Young participated via the telephone.

Chairman White called to order the Apache County Board of Supervisors meeting and the Library District meeting at 8:33 a.m. in the Board of Supervisors chambers, County Annex Building, 75 West Cleveland Street, St. Johns, Arizona and welcomed all in attendance.

Vice Chairman Weller gave the invocation.

Mr. Whiting led the Pledge of Allegiance.

Chairman White called for the Library District items.

Judith Pepple, Library Director, requested approval to remove Danielle Moore from probation with a 2.5% end of probation increase, effective September 25, 2013. **Mr. Weller moved approval, seconded by Mr. Shirley.** Vote was unanimous.

Mr. Shirley moved to adjourn the Library District meeting, seconded by Mr. Weller. Vote was unanimous.

Chairman White called for the regular agenda items.

There was no one wanting to address the Board during call to the Public.

Malena Bazarro, Grants Manager, presented the public hearing regarding the use of Community Development Block Grant (CDBG) State Special Projects funding. Chairman White opened the floor for public comment. Hearing none, Ms. Bazarro stated that the only project so far is the Round Valley Rodeo Grounds and are in the process of an environmental review. Ms. Bazarro provided an overview of the projects that would be eligible, such as water and sewer lines, construction or improvement of ADA facilities such as restrooms, parking as well as emergency preparedness needs. Ms. Bazarro stated that she has not received any other projects and it has been noticed in the paper for the required 16 days prior to today's hearing. Lenora Johnson, County Recorder, asked about using funds for the Navajo Nation Election Office to make their Office ADA compliant and inquired about partnering with the Navajo Nation to assist with making that building compliant. Ms. Bazarro stated that was the type of project that could fit the criteria but she would recommend applying for Navajo Nation CDBG funds because that funding is set aside for projects on the Navajo Nation and she is not sure that if the environmental assessment could be obtained within the required timeframe. Mr. Weller asked if Ms. Bazarro would be available for those who are in unincorporated areas to give input and assistance in applying for funding. Ms. Bazarro stated yes, as long they fall within the criteria of CDBG or

special projects. Mr. Weller and Ms. Bazurto held a discussion regarding the requirements of the application process. **No action was needed or taken.**

Mr. Wengert presented the Consent items A-J. **Mr. Shirley moved approval, seconded by Mr. Weller.** County Manager/Clerk of the Board: A. Request approval of minutes dated September 17, 2013. B. Request approval of demands dated September 17, 2013 to October 1, 2013. Demands are payments made by the County. Specific details of the demands may be requested through the County public record request process. Payee Amount AZ DEPT OF HEALTH SERVICES 1,165.00 BANK OF THE WEST 1,245.83 BARNES, PATRICIA M 4,145.00 BILLS DISCOUNT AUTO PARTS (NAPA) 1,406.86 BLUE HILLS ENVIRONMENTAL 1,323.77 BRADCO 26,339.94 CCS RESENTATION SYSTEMS 7,641.38 CRESCENT ELECTRIC SUPPLY CO 1,023.25 CRISS CANDELARIA LAW OFFICE 2,738.08 DESERT MOUNTAIN CORPORATION 6,857.02 DIAMOND DRUGS INC 4,097.92 DOYLES AUTO BODY INC 2,280.06 ESRI INC 1,404.93 FRANK'S SUPPLY COMPANY INC 1,348.94 FRONTIER 13,470.00 GARY AUSTIN ADVERTISING 2,813.33 GAY, ALLAN CHARLES 2,610.00 GOLIGHTLY TIRE 2,985.77 HEWLETT PACKARD COMPANY 15,570.12 HILLYARD 1,949.05 INGRAM LIBRARY SERVICES 3,878.61 K-LOG 1,055.74 L R INVESTIGATIONS LLC 1,322.92 MCMILLAN, SCOTT 2,700.00 NAVAJO TRIBAL UTILITY AUTHORITY 1,218.38 NAVAJO TRIBAL UTILITY AUTHORITY 1,339.09 NAVOPACHE ELECTRIC COOPERATIVE 20,132.22 PADILLA, DEBBIE L 1,177.21 PATTERSON, DANA BRYCE 8,500.00 QUILL CORP 3,546.99 REDW LLC 16,000.00 SANOFI PASTEUR INC 4,113.47 SECURUS TECHNOLOGIES INC 2,015.47 ST JOHNS CITY 1,208.90 TJP COMMUNICATIONS 1,372.84 UNIVERSAL FLEET CARD 3,716.23 US GEOLOGICAL SURVEY 7,500.00 VERITAS RESEARCH CONSULTING 2,346.64 VERIZON WIRELESS 1,855.01 WELLS FARGO BANK 4,003.51 WHITE MOUNTAIN PUBLISHING CO 1,628.11 WHITING, MICHAEL B 2,810.89 WILLIAMS LAW GROUP PLLC 8,500.00 YOUNG, JOSEPH 7,500.00 BAUMGARTNER, THOMAS M 2,250.00 BLUE HILLS ENVIRONMENTAL 27,606.39 RITCHIE BROS AUCTIONEERS 4,348.25 SOURCECORP 23,908.96 Patterson, Marcellus 1,125.07 Shirley, Joe Junior 1,996.09 Rogers, Kent 1,096.36 Stradling, Reed 1,409.14 Jaramillo, Lori Jo 1,041.80 Nicholson, Julie 1,377.27 King, Walter Scott 1,151.16 Burbank, Lorenzo 1,122.97 Begay, Peter Junior 1,144.05 Bia, Johnnie Senior 1,233.74 Jim, Jack W 1,562.50 APACHE COUNTY MEDICAL 143,598.00 APACHE COUNTY TAX WITHHOLDING 131,987.84 AZ STATE RETIREMENT SYSTEM 86,197.24 COLONIAL LIFE AND ACCIDENT INS 1,291.45 CORRECTIONS OFFICER RET PLAN 8,741.49 CORRECTIONS OFFICER RETIREMENT PLAN 520 4,253.76 MERITAIN HEALTH FLEXIBLE SPENDING 1,194.96 MUTUAL OF OMAHA 1,201.87 NATIONWIDE 1,355.00 PUBLIC SAFETY PERSONNEL 401 14,631.77 PUBLIC SAFETY SHERIFF RET 28,495.91 SECURITY BENEFIT GROUP 1,796.00 SUPPORT PAYMENT CLEARINGHOUSE 2,701.09 ADHS AZ HEALTH CARE COST 22,400.00 AMAZON COM INC 2,815.68 AVAYA COMMUNICATIONS 1,381.19 AZ COUNTIES INSURANCE POOL 5,000.00 BRADCO 26,972.38 BROWN, DEVIN R 1,800.00 CENTRAL ARIZONA SUPPLY 1,129.94 DELL COMPUTER CORPORATION 3,794.36 EMPIRE MACHINERY 2,900.14 FRONTIER 2,821.54 GMCO CORPORATION 18,225.20 GUINN, RICHARD C 1,937.43 HAMBLIN, BRYCE MARK 2,297.50 HILLYARD INC 1,466.98 INGRAM LIBRARY SERVICES 3,491.29 MASIMO AMERICAS INC 2,715.00 NAVOPACHE ELECTRIC COOPERATIVE 2,823.74 PIMA COUNTY

MEDICAL 2,200.00 PITNEY BOWES 4,188.29 PUBLIC AGENCY TRAINING COUNCIL INC 1,115.00 QUILL CORP 6,914.36 ST JOHNS EMERGENCY SERVICES 1,080.42 TWIN CITY HARDWARE - TCH SOUTHWEST 1,564.33 UNIVERSAL FLEET CARD 1,322.19 VERIZON WIRELESS 1,357.72 WHITE MOUNTAIN PUBLISHING CO 1,335.18 WHITING, GARRET LEE 1,800.00 YOUNGS FUTURE TIRE 6,147.84 FRONTIER 1,052.53 VERIZON WIRELESS 2,230.35 MR BUBBLES 3,117.97 C. District III: Request authorization to become a member of the American Lands Council and pay \$5,000 for annual membership dues, utilizing the Board of Supervisor's General Fund. **Personnel Items:** D. Clerk of the Court: Request authorization to remove Ellen Ruth Nielsen and Jewel Lunford from probationary status effective September 10, 2013 with the 2.5% end of probation increase. E. Clerk of the Court: Request authorization to extend the temporary employment for Jennae McQuay for an additional 120 days. F. Probation Services: Request authorization to remove B. Angela Orona from probationary status effective September 3, 2013 with the 2.5% end of probation increase. G. District I: Request authorization to remove Cody Begay from probationary status effective October 1, 2013 with the 2.5% end of probation increase. H. Information Technology: Request authorization to pay the accumulated sick leave balance for Lyle Lefevre as outlined in Human Resources Policy, Section 3.25. I. Recorder's Office: Request authorization to extend the two part time temporary employees; Lucero Mclain, Administrative Assistant I and Mae Clark, Administrative Assistant II for an additional 180 days, utilizing the Recorder's Surcharge Fund. J. District II: Request authorization to extend the temporary employment for David Kinlichee, Sr. for an additional 60 days. Vote was unanimous.

Mr. Wengert requested approval to hire Lyle Lefevre as an Information Technology Consultant at \$50.00 per hour, not to exceed 10 hours per week. A discussion was held regarding the length of the employment. **Mr. Shirley moved approval not to exceed 3 months, seconded by Mr. Weller.** Vote was unanimous.

Chairman White presented the item for discussion and possible approval requiring all promotions or merit increases be deferred to the budget cycle process next year, with the exception of the end of probation increases and the previously Board approved action of up to a 5% increase for in-house position changes. A discussion was held regarding the process. Mr. Shirley asked that this item be deferred to another meeting until the proper wording and purpose was made clear. **Mr. White tabled the item until the County Attorney could assist with the wording.**

Chinle Justice of the Peace Victor Clyde, requested approval for a salary increase of the annual salary of Chief Court Clerk Rolinda Yazzie to \$29,480.83 per year and reflects an increase of \$3,267.60, or 12.46% Mr. Clyde stated that this request is made in light of an increase in additional duties and responsibilities in carrying out the requirements of the Justice Courts filing and reporting of cases filed within the judicial court and further reflects the years of service, experience, and her expertise in meeting the statutory requirements of the Arizona Supreme Court. **Mr. Shirley moved approval, seconded by Mr. Weller. A discussion was held regarding the increase.** Mr. Weller and Karen Houston, Human Resource Director, held a discussion regarding the salary range of the position. Lenora Johnson, County Recorder, stated that she supports this increase for Rolinda Yazzie. Vote was unanimous.

County Attorney Michael Whiting stated that the item to establish a county anti-racketeering revolving fund pursuant to A.R.S. 13-2314.03 meeting statutory mandates and ensuring such funds remain separate and apart from other County funds as mandated by state statute be removed from the agenda. Chairman White removed the item. No action was needed or taken.

Mr. Shirley moved to adjourn, seconded by Mr. Weller. Vote was unanimous.

Approved this 15th day of October, 2013.

Tom M. White, Jr.
Chairman of the Board

Delwin Wengert
Clerk of the Board

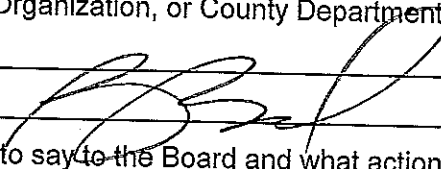
BOARD OF SUPERVISOR'S AGENDA ITEM REVIEW FORM

date/time stamp

Submitter's Name: (Individual, Organization, or County Department)

COUNTY MANAGER'S OFFICE

Date/Signature:



Describe in detail what you want to say to the Board and what action you want the Board to take:

APPROVAL OF DEMANDS

BOS Meeting Date Requested ON-GOING

PRE-AGENDA ITEM REVIEW

Review Routing / /Legal / /Finance / /Purchasing / /Human Resource / /Other;

Legal Review:

Signature:

Finance Review:

Signature:

Purchasing Review:

Signature:

Human Resources Review:

Signature:

Other Review:

Signature:

Reviews completed, item approved for Agenda.

Supervisor/Board Clerk's Initials

BOARD ACTION TAKEN

/ /Approved / /Disapproved / /Deleted / /Continued to:

FX 337-2003
5-9-13.

APPLICATION FOR SUPERVISED FIREWORKS DISPLAY PERMIT

Application is hereby made for the granting of a permit to conduct a supervised fireworks display. The display will be conducted as follows:

Name of Applicant Organization: CONCHO FIRE DEPT
Address of Organization: P.O. BOX 538 CONCHO AZ 85924
Phone Number of Organization: 928 337-2681
Date/Time of Display: NOV 9, 2013 8:30 PM
Address of Display Location: CINDER MOUNTAIN
Name of Property Owner at Site of Display: MIKE SCOTT
Place of Storage of Fireworks: CONCHO F.D. STORAGE CONTAINER

1.) Information Regarding Pyrotechnic Operator:

Name: JOHN BEDWAY
Phone Number: 928-205-8726

Please attach an explanation of the qualifications, training, experience, or certification of the designated Pyrotechnic Operator. Also attach any relevant documentation or certifications.

2.) Information Regarding Fireworks: The following is a list of the numbers and kinds of fireworks intended to be discharged:

- a.) See Exhibit A
- b.) _____
- c.) _____
- d.) _____

3.) This application must be accompanied by proof of a bond in the amount of at least \$1,000,000 or proof of general liability insurance in the same amount. Proof is hereby attached: Yes X No _____

4.) If the display area is within the boundaries of an existing fire district, please attach a letter from the Fire Chief or Fire District Board indicating approval. If the display area is not within the boundaries of a fire district, please attach a letter from an adjacent fire district or department indicating the availability of fire suppression services.

Documentation is attached: Yes X No _____

5.) A map of the display area must be attached to this application designating the proposed seating area for spectators, nearby structures, parking areas, public roads, the fallout zone, overhead lines, and designated fire department access to the area.

Map of display area is hereby attached: Yes X No _____

6.) By signing and submitting this Agreement, the Applicant certifies that the information herein is true and correct to the best of his knowledge, information and belief, and agrees to indemnify Apache County against any and all liability to any person or persons for or by reason of any conditions, whether defective or otherwise, of any fireworks, apparatus, equipment or fixtures furnished by the Applicant in connection with the fireworks display and against any and all liability to any person for or by reason of any act or omission of the Applicant or any of its agents or employees.


Signature of Applicant

Date: 10-3-13

(Do Not Write Below This Line--To Be Filled Out by Sheriff or Designee Only)


CERTIFICATION OF SHERIFF:

Based on my review of the Application and inspection of the display area, I hereby:

Approve of the display with standard conditions.

Approve the display with the following special conditions:

Disapprove the display. My reason for disapproving of the display is as follows:


Sheriff or Designee

Date: 10-9-13

CONCHO FIRE DEPARTMENT

P.O.BOX 538, CONCHO ARIZONA 85924

RESUME OF EXPERIENCE

John Bedway
H.C.30 box 568
Concho AZ. 85924
928-205-8726

1982 to 1999 Mark Bennett and I have been involved with the Concho Fire Department in 9 different fireworks displays on July 4th for the Community of Concho. We both worked in capacities of Shooter, Reloader, Safety Officer and Set up Coordinator.

2007: As Fire Chief, I decided to do it legally and obtain proper training for our Department. I attended Shooters school on 3-31-2007 along with my Asst. Chief Mark Bennett and another Firefighter, Chris Bennett.

7-4-07: 4th of July Fireworks display was set off by our Fire Dept.
No incidences to report, Total of 365 shells were set off, 3" to 6".
I was the head Pyro and Mark Bennett Served in the capacity of safety officer.

4-5-08: 3 more from the Concho Fire Dept and 2 from the Vernon F.D. attended Shooters School, sponsored by Fireworks Productions of Arizona @ Wildhorse Pass, Phx AZ.
Roy Barraza, Ed Fisher and Scott Wright. Vernon F.D. sent Darci Zitar and Dave Swietanski.

07-04-08: 4th of July Fireworks display was set off by our Fire Dept.
Vernon F.D. assisted
No incidences to report, Total of 365 shells were set off, 3" to 10".
I was the head Pyro and Mark Bennett Served in the capacity of safety officer.

07-04-09: 4th of July Fireworks display was set off by our Fire Dept.
Vernon F.D. assisted
No incidences to report, Total of 365 shells were set off, 3" to 8".
I was the head Pyro and Mark Bennett Served in the capacity of safety officer

07-04-10: 4th of July Fireworks display was set off by our Fire Dept.
Vernon F.D. assisted
No incidences to report, Total of 365 shells were set off, 3" to 10".
I was the head Pyro and Mark Bennett Served in the capacity of safety officer

07-04-11: 4th of July Fireworks display was set off by our Fire Dept.
No incidences to report, Total of 636 shells were set off, 3" to 10".
I was the head Pyro and Mark Bennett Served in the capacity of safety officer

07-04-12: 4th of July fireworks display was set off by our Fire Dept.
No incidences to report, Total of 636 shells were set off, 3" to 10".
I was the head Pyro and Mark Bennett Served in the capacity of safety officer

John Bedway, Chief
Concho Fire Department

PERMIT FOR SUPERVISED FIREWORKS DISPLAY

Apache County hereby grants permission for a supervised fireworks display as follows:

GROUP/ORGANIZATION: _____

Date/Time of Event: _____

Location of Fireworks Display: _____

Pyrotechnic Expert: _____

Special Conditions of Permit: _____

Standard Terms of Permit:

* THIS PERMIT IS VALID ONLY IF NO FIRE RESTRICTIONS ARE IN PLACE IN THE GEOGRAPHIC AREA OF THE DISPLAY SITE AT THE TIME IT IS SCHEDULED TO OCCUR.

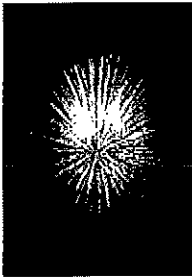
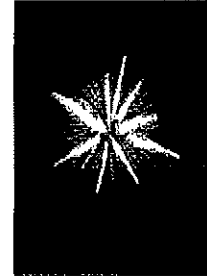
*THE PYROTECHNIC EXPERT RESPONSIBLE FOR THE EVENT SHALL NOT CONDUCT THE DISPLAY UNLESS HE/SHE DEEMS IT SAFE CONSIDERING ALL CONDITIONS AND CIRCUMSTANCES AT THE TIME THE DISPLAY IS SCHEDULED TO OCCUR.

*THE DISPLAY SHALL BE CONDUCTED IN A MANNER CONSISTENT WITH NFPA 1123. CODE FOR FIREWORKS DISPLAY.

*IN THE EVENT THIS EVENT NEEDS TO BE RESCHEDULED FOR WEATHER OR OTHER REASONS, THIS PERMIT IS VALID FOR A PERIOD OF 48 HOURS AFTER THE SCHEDULED DATE AND TIME STATED HEREIN

Clerk of the Board

Exhibit A

**CONCHO FIRE DEPARTMENT****Saturday, July 6, 2013****Total Aerial Effects 636****Opening:**

- 1** – 1 ½" 150 Shot Titanium Salute Basin
- 1** – 135 Shot Red, White and Blue Fan Basin (15 x 9)

Aerial Display:

Your Aerial Display will contain a total of **314** aerial shells.

- 3"** - **144** Chinese Fancy's & Specials
- 4"** - **5** Titanium Salutes
- 4"** - **108** Chinese Fancy's & Specials
- 4"** - **36** Designer Cylinder Specials
- 6"** - **9** Chinese Fancy's & Specials
- 8"** - **9** Chinese Fancy's & Specials
- 10"** - **3** Chinese Fancy's & Specials

Grande Finale:

Your celebration will close in spectacular excitement as multiple styles of brilliantly-colored shells, rocket skyward growing and glowing in breath-taking Blues, Golds, Greens, Silvers, Yellows, Purples and Red.

Grande Finale consists of **37** aerial shells:

- 7** - 3" Titanium Salutes, **14** - 3" shells, **8** - 4" shells, **4** - 6" shells and **4** - 8" shells.

Fireworks Equipment Inventory
2013

PURCHASED			2009 QTY	DESCRIPTION	totals
2007 QTY	2008 QTY				
72	27			3" FIBERGLASS TUBES	99
48	18			4" FIBERGLASS TUBES	66
9	3	2		6" FIBERGLASS TUBES	14
	6	5		8" FIBERGLASS TUBES	11
	4			10" FIBERGLASS TUBES	4
4	6			4" PAPER CLUSTERS	10
6	4			3" PAPER BARRAGE	10

RESIDENTIAL PETITION FOR REVIEW OF VALUATION
PURSUANT TO A.R.S. TITLE 42, Ch. 15, Art. 3 and Ch. 16, Art. 1-5

FOR OFFICIAL USE ONLY
14-3109

FILED FOR TAX YEAR 2014

See instructions for complete filing requirements.

- The County Assessor reserves the right to reject any petition not meeting statutory requirements. Only one petition for each parcel will be accepted. Any duplicate petitions will be returned.
- COMPLETE SECTIONS 1 THROUGH 8 WHERE APPLICABLE. PLEASE TYPE OR PRINT.

1. DATE FILED 4/29/13 COUNTY Apache BOOK 201 MAP 53 PARCEL 128

2. IF THIS PROPERTY IS RENTED TO SOMEONE OTHER THAN A FAMILY MEMBER CHECK HERE

3A. OWNER'S NAME
SE PHILLIPS
6040 E MAIN #165
MESA AZ 85205

3B. MAIL DECISION TO:
Kim Beneh
MC 30 BX 222
Concho AZ 85924

3C. IF OWNERSHIP HAS CHANGED CHECK HERE . ATTACH RECORDED DOCUMENTATION.

4. PETITION COMPLETED BY: (Specify: owner, Agent, Attorney, etc.) AGENT

Kim Beneh TELEPHONE 928/242-0555
NAME
MC 30 BX 222 Concho AZ 5 ADDRESS CITY STATE ZIP CODE
85924

AGENTS ONLY: STATE BOARD OF APPRAISAL NUMBER

5. BASIS FOR THIS PETITION: MARKET SALES APPROACH COST APPROACH OTHER (explain below)
Additional documents submitted must contain the book, map, and parcel number and be attached to the petition in order to be considered by the Assessor. Evidence contained in this appeal could be the basis for either increasing or decreasing the valuation or changing the legal classification.

107-52-023
212-52-069
201-60-114 A/B

2011 MARKET APPRAISAL FOR 20153121 ATTACHED TO IDLE WILD OWNERS PKT

6. VALUE SHOWN ON NOTICE OF VALUE	FULL CASH VALUE	\$ <u>101,275.00</u>	LIMITED PROPERTY VALUE	\$ <u>101,275.00</u>	LEGAL CLASS	<u>M</u>	ASMT RATIO	<u>13.6</u>
7. OWNER'S OPINION OF VALUE	FULL CASH VALUE	\$ <u>56,473.00</u>	LIMITED PROPERTY VALUE	\$ <u>56,473.00</u>	LEGAL CLASS	<u>M</u>	ASMT RATIO	<u>13.6</u>

8. I HEREBY AFFIRM THAT THE INFORMATION INCLUDED OR ATTACHED IS TRUE AND CORRECT.

Kim Beneh
SIGNATURE OF PROPERTY OWNER OR REPRESENTATIVE
928/242-0555 TELEPHONE
_____ EMAIL ADDRESS

TO REQUEST A MEETING WITH THE ASSESSOR CHECK HERE
IN MARICOPA AND PIMA COUNTIES ONLY:
If you want this appeal to be heard "On The Record" check here.
This means that neither you nor the Assessor will appear before the State Board of Equalization to offer testimony. Submit any additional written or typed information with this appeal.

ASSESSOR'S DECISION	FULL CASH VALUE	\$ <u>101,275</u>	LIMITED PROPERTY VALUE	\$ <u>101,275</u>	LEGAL CLASS	<u>M</u>	ASMT RATIO	<u>13.1</u>
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BASIS FOR DECISION: APPRAISAL IS OUT-DATED, WRONG PARCEL. ONLY VALID LAND SALE IS 15 MILES AWAY. NO PAIRED SALES.

4-30-13 DATE RECEIVED
15 AUG 2013 DATE DECISION MAILED
MBeneh REVIEWED BY
Chris J. Hight ASSESSOR OR CHIEF DEPUTY

COUNTY BOARD OF EQUALIZATION DECISION	FULL CASH VALUE	\$	LIMITED PROPERTY VALUE	\$	LEGAL CLASS		ASMT RATIO	
---------------------------------------	-----------------	----	------------------------	----	-------------	--	------------	--

BASIS FOR DECISION: Based on info provided by Assessor w petitions packet set FCV for property at 86,750 for 2014.

9-11-13 DATE RECEIVED
DATE DECISION MAILED
CHAIRMAN OR CLERK OF THE BOARD

FOR OFFICIAL USE ONLY

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PETITION FOR REVIEW OF REAL PROPERTY VALUATION

PURSUANT TO A.R.S. TITLE 42, Ch. 15, Art. 3 and Ch. 16, Art. 1-5

FOR OFFICIAL USE ONLY

FILED FOR TAX YEAR: 2014

See Instructions for complete filing information

14-3030

- In all counties, mail or hand deliver one copy of this completed petition to the County Assessor. Retain a copy for your records (and for use in possible further appeals). Taxpayers receiving a Notice of Value have sixty days from the date the notice was mailed to file this petition. United States Postal Service postmark dates are evidence of the dates petitions were filed and decisions were mailed.
- The County Assessor may reject any petition not meeting statutory requirements. Only one petition for each parcel or economic unit will be accepted. Any duplicate petition(s) will be returned.
- COMPLETE SECTIONS 1 THROUGH 10 WHERE APPLICABLE. TYPE OR PRINT

1. DATE FILED 04/08/13 COUNTY Apache BOOK 106 MAP 23 PARCEL 357
 2. PROPERTY ADDRESS OR LEGAL DESCRIPTION: Park Show Low Unit 1, Lot 357
 3. IF THIS IS A MULTIPLE PARCEL APPEAL CHECK HERE . ATTACH A MULTIPLE PARCEL APPEAL FORM (DOR 82131). SEE INSTRUCTIONS.
 4. USE OF PROPERTY: COMMERCIAL / INDUSTRIAL (SPECIFY TYPE: Apartment, Office, warehouse, etc.) _____
 VACANT LAND AGRICULTURAL OTHER Residential

5A. OWNER'S NAME
George E Walsh and Patricia D Walsh
 NAME
P O Box 33
 ADDRESS
Vernon, AZ 85940
 CITY, STATE, ZIP CODE

5B. MAIL DECISION TO: (IF DIFFERENT THAN 5A)
Julie M Overacker
 NAME
P O Box 161
 ADDRESS
Glenwood, NM 88039-0161
 CITY, STATE, ZIP CODE

5C. IF OWNERSHIP HAS CHANGED CHECK HERE . ATTACH RECORDED DOCUMENTATION.
 6. PETITION COMPLETED BY: (Specify Owner, Agent, Attorney, etc.) Agent
Julie M Overacker (575) 539-2006
 NAME TELEPHONE
P O Box 161 Glenwood, NM 88039-0
 ADDRESS CITY, STATE, ZIP CODE
 AGENTS ONLY: STATE BOARD OF APPRAISAL NUMBER 2010019 STATE BOARD OF EQUALIZATION NUMBER _____

7. BASIS FOR PETITION: MARKET SALES APPROACH COST APPROACH INCOME APPROACH OTHER (explain below)
 Additional documents submitted must contain the book, map, and parcel number and be attached to the petition in order to be considered by the Assessor. Evidence contained in this appeal could be the basis for either increasing or decreasing the valuation or changing the legal classification of the property. There are numerous errors with respect to the improvements and their values as reflected on the 2014 Property Profile. As a result, a meeting at the property is requested to review the actual improvements. The property owner will be represented at that meeting by Barry Weller, so accommodations to his extremely busy scheduled will be greatly appreciated.

8. VALUE SHOWN ON NOTICE OF VALUE	FULL CASH VALUE \$	73,492	LIMITED PROPERTY VALUE \$	26,407	LEGAL CLASS	ASMT RATIO
9. OWNER'S OPINION OF VALUE	FULL CASH VALUE \$	10,712	LIMITED PROPERTY VALUE \$	10,712	LEGAL CLASS	ASMT RATIO

10. I HEREBY AFFIRM THAT THE INFORMATION INCLUDED OR ATTACHED IS TRUE AND CORRECT. TO REQUEST A MEETING WITH THE ASSESSOR CHECK HERE.
 FOR SBOE (IN MARICOPA AND PIMA COUNTIES ONLY): If you want this appeal to be heard "On The Record" check here.
 This means that neither you, the Assessor, your Agent, or Attorney (if applicable) will appear before the State Board of Equalization to offer testimony. Submit any additional written or typed information with this appeal to the SBOE.

X Julie M Overacker
 SIGNATURE OF PROPERTY OWNER OR REPRESENTATIVE
 (575) 539-2006 Julie@AdobeBookkeeping.com
 TELEPHONE EMAIL

ASSESSOR'S DECISION	FULL CASH VALUE \$	30,114	LIMITED PROPERTY VALUE \$	15,563	LEGAL CLASS	03	ASMT RATIO	10%
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BASIS FOR DECISION: Field Meeting Scheduled for Tue, June 4th 10:00 AM / MET at 9:50 AM Re-measured and assessed Value.

4-11-13 DATE RECEIVED Aug 15 2013 DATE DECISION MAILED
 REVIEWED BY [Signature] ASSESSOR OR CHIEF DEPUTY [Signature]

COUNTY BOARD OF EQUALIZATION DECISION	FULL CASH VALUE \$	LIMITED PROPERTY VALUE \$	LEGAL CLASS	ASMT RATIO
---------------------------------------	--------------------	---------------------------	-------------	------------

BASIS FOR DECISION: Based on info provided by the Tax Agent & Assessor FCU for property be set at 18,450 for 2014

9/16/13 DATE RECEIVED 10/15/13 DATE DECISION MAIL FD
 CHAIRMAN OR CLERK OF THE BOARD
P.M. 9/15/13

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RESIDENTIAL PETITION FOR REVIEW OF VALUATION
PURSUANT TO A.R.S. TITLE 42, Ch. 15, Art. 3 and Ch. 16, Art. 1-5

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14-3106

FILED FOR TAX YEAR 2014

See instructions for complete filing requirements.

- The County Assessor reserves the right to reject any petition not meeting statutory requirements. Only one petition for each parcel will be accepted. Any duplicate petitions will be returned.
- COMPLETE SECTIONS 1 THROUGH 8 WHERE APPLICABLE, PLEASE TYPE OR PRINT.

1. DATE FILED 4/29/13 COUNTY Apache BOOK 201 MAP 53 PARCEL 121

2. IF THIS PROPERTY IS RENTED TO SOMEONE OTHER THAN A FAMILY MEMBER CHECK HERE

3A. OWNER'S NAME
Michael L Buckley
HC 30 Bx 222
Concho AZ 85924

3B. MAIL DECISION TO:
Same

3C. IF OWNERSHIP HAS CHANGED CHECK HERE . ATTACH RECORDED DOCUMENTATION.

4. PETITION COMPLETED BY: (Specify: owner, Agent, Attorney, etc.) OWNER
NAME Tom Beneck TELEPHONE 928) 242-0557
ADDRESS HC 30 Bx 222 CITY Concho STATE AZ ZIP CODE 85924

AGENTS ONLY: STATE BOARD OF APPRAISAL NUMBER

5. BASIS FOR THIS PETITION: MARKET SALES APPROACH COST APPROACH OTHER: (explain below)
Additional documents submitted must contain the book, map, and parcel number and be attached to the petition in order to be considered by the Assessor. Evidence contained in this appeal could be the basis for either increasing or decreasing the valuation or changing the legal classification.

107-52-023
212-52-069
201-60-114 A/B

2011 Market Appraisal for 201-53-121 Attached to packet of IDENVID OWNERS

6. VALUE SHOWN ON NOTICE OF VALUE	FULL CASH VALUE	LIMITED PROPERTY VALUE	LEGAL CLASS	ASMT RATIO
	\$ <u>162,617.00</u>	\$ <u>159,884.00</u>	<u>M</u>	<u>12.0</u>
7. OWNER'S OPINION OF VALUE	FULL CASH VALUE	LIMITED PROPERTY VALUE	LEGAL CLASS	ASMT RATIO
	\$ <u>56,551.00</u>	\$ <u>56,551.00</u>	<u>M</u>	<u>12.0</u>

8. I HEREBY AFFIRM THAT THE INFORMATION INCLUDED OR ATTACHED IS TRUE AND CORRECT.

TO REQUEST A MEETING WITH THE ASSESSOR CHECK HERE
IN MARICOPA AND PIMA COUNTIES ONLY:
If you want this appeal to be heard "On The Record" check here.
This means that neither you nor the Assessor will appear before the State Board of Equalization to offer testimony. Submit any additional written or typed information with this appeal.

X Tom Beneck
SIGNATURE OF PROPERTY OWNER OR REPRESENTATIVE
TELEPHONE 928) 242-0557 EMAIL ADDRESS _____

ASSESSOR'S DECISION	FULL CASH VALUE	LIMITED PROPERTY VALUE	LEGAL CLASS	ASMT RATIO
	\$ <u>162,617</u>	\$ <u>159,884</u>	<u>M</u>	<u>12</u>
BASIS FOR DECISION: <u>OUTDATED APPRAISAL, COMPARABLE 107-52-023 IS 15 MILES AWAY. OTHERS SOLD IN 1997 AND 2003.</u>				
DATE RECEIVED	DATE DECISION MAILED	REVIEWED BY	ASSESSOR OR CHIEF DEPUTY	
<u>4-30-13</u>	<u>15 AUG 2013</u>	<u>Chansen</u>	<u>Chris J. [Signature]</u>	
COUNTY BOARD OF EQUALIZATION DECISION	FULL CASH VALUE	LIMITED PROPERTY VALUE	LEGAL CLASS	ASMT RATIO
	\$	\$		
BASIS FOR DECISION: <u>Based on info provided by Assessor's return packet, no change in FCL for 2014 and remain at 162,617 due to Appraisal provided by Petitioner.</u>				
DATE RECEIVED	DATE DECISION MAILED	CHAIRMAN OR CLERK OF THE BOARD		
<u>9/9/13</u>	<u>10/15/13</u>			

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101 69 0201

PETITION FOR REVIEW OF REAL PROPERTY VALUATION

FOR OFFICIAL USE ONLY

FILED FOR TAX YEAR 2014

PURSUANT TO A.R.S. TITLE 42, Ch. 15, Art. 3 and Ch. 16, Art. 1-5

See Instructions for complete filing information

14-2015

- In all counties, mail or hand deliver one copy of this completed petition to the County Assessor. Retain a copy for your records (and for use in possible further appeals). Taxpayers receiving a Notice of Value have sixty days from the date the notice was mailed to file this petition. United States Postal Service postmark dates are evidence of the dates petitions were filed and decisions were mailed.
- The County Assessor may reject any petition not meeting statutory requirements. Only one petition for each parcel or economic unit will be accepted. Any duplicate petition(s) will be returned.
- COMPLETE SECTIONS 1 THROUGH 10 WHERE APPLICABLE. TYPE OR PRINT

1. DATE FILED 3-18-13 COUNTY Apache BOOK 101 MAP 69 PARCEL 0201
 2. PROPERTY ADDRESS OR LEGAL DESCRIPTION: Sec 1 T6N R29E; Gobbler Peak Estates Lot 20
 3. IF THIS IS A MULTIPLE PARCEL APPEAL CHECK HERE . ATTACH A MULTIPLE PARCEL APPEAL FORM (DOR 82131). SEE INSTRUCTIONS.
 4. USE OF PROPERTY: COMMERCIAL / INDUSTRIAL (SPECIFY TYPE: Apartment, Office, warehouse, etc.)
 VACANT LAND AGRICULTURAL OTHER

5A. OWNER'S NAME
Karla Baker
 NAME
109 N. Val Vista Dr Ste 109 Box 101
 ADDRESS
Gilbert, AZ 85234
 CITY, STATE, ZIP CODE

5B. MAIL DECISION TO: (IF DIFFERENT THAN 5A)
 NAME
 ADDRESS
 CITY, STATE, ZIP CODE

5C. IF OWNERSHIP HAS CHANGED CHECK HERE . ATTACH RECORDED DOCUMENTATION.
 6. PETITION COMPLETED BY: (Specify Owner, Agent, Attorney, etc.)
Karla Baker
 NAME
109 N. Val Vista Dr Ste 109 Box 101 Gilbert AZ 85234
 ADDRESS
602-743-8747
 TELEPHONE
 CITY, STATE, ZIP CODE

AGENTS ONLY: STATE BOARD OF APPRAISAL NUMBER _____ STATE BOARD OF EQUALIZATION NUMBER _____

7. BASIS FOR PETITION: MARKET SALES APPROACH COST APPROACH INCOME APPROACH OTHER (explain below)
 Additional documents submitted must contain the book, map, and parcel number and be attached to the petition in order to be considered by the Assessor. Evidence contained in this appeal could be the basis for either increasing or decreasing the valuation or changing the legal classification of the property.
Attached is an Appraisal done on the property by Schubel Appraisals, LLC which values the property at \$43,000. Also attached are comps pulled by a realtor and the average asking price per acre is \$24,896.

8. VALUE SHOWN ON NOTICE OF VALUE	FULL CASH VALUE \$ 115,800	LIMITED PROPERTY VALUE \$ 115,800	LEGAL CLASS 2R	ASMT RATIO 16
9. OWNER'S OPINION OF VALUE	FULL CASH VALUE \$ 43,000	LIMITED PROPERTY VALUE \$ 43,000	LEGAL CLASS 2R	ASMT RATIO 16

10. I HEREBY AFFIRM THAT THE INFORMATION INCLUDED OR ATTACHED IS TRUE AND CORRECT.
 TO REQUEST A MEETING WITH THE ASSESSOR CHECK HERE.
 FOR SBOE (IN MARICOPA AND PIMA COUNTIES ONLY): If you want this appeal to be heard "On The Record" check here.
 This means that neither you, the Assessor, your Agent, or Attorney (if applicable) will appear before the State Board of Equalization to offer testimony. Submit any additional written or typed information with this appeal to the SBOE.
Karla Baker
 SIGNATURE OF PROPERTY OWNER OR REPRESENTATIVE
602-7438747 karla.baker@sonoraquest.com
 TELEPHONE EMAIL

ASSESSOR'S DECISION	FULL CASH VALUE \$ 75,000	LIMITED PROPERTY VALUE \$ 75,000	LEGAL CLASS 2	ASMT RATIO 16
BASIS FOR DECISION: <u>Adjust, Comp 4 is most comparable to subject in location and close in size</u>				
DATE RECEIVED <u>3-20-13</u>	DATE DECISION MAILED <u>8/15/2013</u>	REVIEWED BY <u>BH.</u>	ASSESSOR OR CHIEF DEPUTY <u>Chris J. Hays</u>	
COUNTY BOARD OF EQUALIZATION DECISION	FULL CASH VALUE \$	LIMITED PROPERTY VALUE \$	LEGAL CLASS	ASMT RATIO
BASIS FOR DECISION: <u>Based on info provided by Assessor & petitioners packet, the FCB set \$53,500 for 2014</u>				
DATE RECEIVED <u>9/11/13</u>	DATE DECISION MAILED <u>10/15/13</u>	CHAIRMAN OR CLERK OF THE BOARD		

DOR 82130 (02/2013) PM 9/9/13

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RESIDENTIAL PETITION FOR REVIEW OF VALUATION
PURSUANT TO A.R.S. TITLE 42, Ch. 16, Art. 3 and Ch. 16, Art. 1-5

FOR OFFICIAL USE ONLY

14-3107

FILED FOR TAX YEAR 2014

See instructions for complete filing requirements.

- The County Assessor reserves the right to reject any petition not meeting statutory requirements. Only one petition for each parcel will be accepted. Any duplicate petitions will be returned.

COMPLETE SECTIONS 1 THROUGH 8 WHERE APPLICABLE. PLEASE TYPE OR PRINT.

1. DATE FILED 4/29/13 COUNTY APACHE BOOK 201 MAP 53 PARCEL 122

2. IF THIS PROPERTY IS RENTED TO SOMEONE OTHER THAN A FAMILY MEMBER CHECK HERE

3A. OWNER'S NAME
DAVE & Linda GROBIETSKY
15142 W Cortez ST
SURPRISE AZ 85379

3B. MAIL DECISION TO:
Kim BENELL
HC 30 R# 222
CONCHO AZ 85924

3C. IF OWNERSHIP HAS CHANGED CHECK HERE . ATTACH RECORDED DOCUMENTATION.

4. PETITION COMPLETED BY: (Specify: owner, Agent, Attorney, etc.) AGENT
Kim BENELL
NAME HC 30 R# 222 CITY CONCHO STATE AZ TELEPHONE 928/242-0557 ZIP CODE 85924
ADDRESS

AGENTS ONLY: STATE BOARD OF APPRAISAL NUMBER _____ SBOE NUMBER _____

5. BASIS FOR THIS PETITION: MARKET SALES APPROACH COST APPROACH OTHER (explain below)
Additional documents submitted must contain the book, map, and parcel number and be attached to the petition in order to be considered by the Assessor. Evidence contained in this appeal could be the basis for either increasing or decreasing the valuation or changing the legal classification.

201-60-114 A/B
212-52-069
107-52-023

2011 MARKET LAND APPRAISAL FOR 201-53-121 ATTACHED TO WHOLE PACKET FOLLOWED OWNERSHIP

6. VALUE SHOWN ON NOTICE OF VALUE	FULL CASH VALUE \$ <u>61,899.00</u>	LIMITED PROPERTY VALUE \$ <u>60,589.00</u>	LEGAL CLASS <u>2R</u>	ASMT RATIO <u>16%</u>
7. OWNER'S OPINION OF VALUE	FULL CASH VALUE \$ <u>19,940.00</u>	LIMITED PROPERTY VALUE \$ <u>19,940.00</u>	LEGAL CLASS <u>2R</u>	ASMT RATIO <u>16%</u>

8. I HEREBY AFFIRM THAT THE INFORMATION INCLUDED OR ATTACHED IS TRUE AND CORRECT.

X Kim Benell
SIGNATURE OF PROPERTY OWNER OR REPRESENTATIVE
TELEPHONE 928/242-0557 EMAIL ADDRESS _____

TO REQUEST A MEETING WITH THE ASSESSOR CHECK HERE
IN MARICOPA AND PIMA COUNTIES ONLY:
If you want this appeal to be heard "On The Record" check here:
This means that neither you nor the Assessor will appear before the State Board of Equalization to offer testimony. Submit any additional written or typed information with this appeal.

ASSESSOR'S DECISION	FULL CASH VALUE \$ <u>61,899</u>	LIMITED PROPERTY VALUE \$ <u>61,899</u>	LEGAL CLASS <u>2R</u>	ASMT RATIO <u>16</u>
BASIS FOR DECISION: <u>APPRAISAL IS TO WRONG PARCEL, IS OUT DATED. NO PAIRED SALES. ONLY VALID LAND SALE IS 15 MILES AWAY.</u>				
DATE RECEIVED <u>4-30-13</u>	DATE DECISION MAILED <u>15 AUG 2013</u>	REVIEWED BY <u>CP Jensen</u>	ASSESSOR OR CHIEF DEPUTY <u>Chris J. [Signature]</u>	
COUNTY BOARD OF EQUALIZATION DECISION	FULL CASH VALUE \$	LIMITED PROPERTY VALUE \$	LEGAL CLASS	ASMT RATIO
BASIS FOR DECISION: <u>Based on info provided by Assessor in Petitioner Packet no change for property FCV of 61,899 for 2014.</u>				
DATE RECEIVED <u>9/11/13</u>	DATE DECISION MAILED <u>10/15/13</u>	CHAIRMAN OR CLERK OF THE BOARD		

FOR OFFICIAL USE ONLY

FOR OFFICIAL USE ONLY

RESIDENTIAL PETITION FOR REVIEW OF VALUATION
PURSUANT TO A.R.S. TITLE 42, Ch. 16, Art. 3 and Ch. 16, Art. 1-5

FOR OFFICIAL USE ONLY

14-3108

FILED FOR TAX YEAR 2014

See instructions for complete filing requirements.

- The County Assessor reserves the right to reject any petition not meeting statutory requirements. Only one petition for each parcel will be accepted. Any duplicate petitions will be returned.
- COMPLETE SECTIONS 1 THROUGH 8 WHERE APPLICABLE. PLEASE TYPE OR PRINT.

1. DATE FILED 4/29/13 COUNTY Apache BOOK 201 MAP 53 PARCEL 127

2. IF THIS PROPERTY IS RENTED TO SOMEONE OTHER THAN A FAMILY MEMBER CHECK HERE

3A. OWNER'S NAME
Jane Sandi Casanova, Trust
7826 E. Culver
MESA AZ 85207

3B. MAIL DECISION TO:
Tim Bentel
HC 308X222
Concho AZ 85924

3C. IF OWNERSHIP HAS CHANGED CHECK HERE . ATTACH RECORDED DOCUMENTATION.

4. PETITION COMPLETED BY: (Specify: owner, Agent, Attorney, etc.) AGENT
Tim Bentel
NAME HC 308X222 CITY Concho STATE AZ TELEPHONE 928-242-0557 ZIP CODE 85924
ADDRESS _____ SBOE NUMBER _____

AGENTS ONLY: STATE BOARD OF APPRAISAL NUMBER
5. BASIS FOR THIS PETITION: MARKET SALES APPROACH COST APPROACH OTHER (explain below)
Additional documents submitted must contain the book, map, and parcel number and be attached to the petition in order to be considered by the Assessor. Evidence contained in this appeal could be the basis for either increasing or decreasing the valuation or changing the legal classification.
201-60-114 A/B/C
212-52-069
107-52-023

2011 Market Appraisal for 201-53-127 Attached to FOLEWELL OWNERS packet

6. VALUE SHOWN ON NOTICE OF VALUE	FULL CASH VALUE \$106,469.00	LIMITED PROPERTY VALUE \$106,469.00	LEGAL CLASS <u>M</u>	ASMT RATIO <u>12.6</u>
7. OWNER'S OPINION OF VALUE	FULL CASH VALUE \$59,332	LIMITED PROPERTY VALUE \$59,332	LEGAL CLASS <u>M</u>	ASMT RATIO <u>12.6</u>

8. I HEREBY AFFIRM THAT THE INFORMATION INCLUDED OR ATTACHED IS TRUE AND CORRECT. TO REQUEST A MEETING WITH THE ASSESSOR CHECK HERE.
Tim Bentel
SIGNATURE OF PROPERTY OWNER OR REPRESENTATIVE
HC 308X222 TELEPHONE 928-242-0557
TELEPHONE _____ EMAIL ADDRESS _____

IN MARICOPA AND PIMA COUNTIES ONLY: If you want this appeal to be heard "On The Record" check here. This means that neither you nor the Assessor will appear before the State Board of Equalization to offer testimony. Submit any additional written or typed information with this appeal.

ASSESSOR'S DECISION	FULL CASH VALUE \$106,469	LIMITED PROPERTY VALUE \$106,469	LEGAL CLASS <u>M</u>	ASMT RATIO <u>12.6</u>
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BASIS FOR DECISION: OUTDATED APPRAISAL ON WRONG LOT. NO PAIRED SALES.

DATE RECEIVED 4-30-13 DATE DECISION MAILED 15 AUG 2013 REVIEWED BY C Jensen ASSESSOR OR CHIEF DEPUTY Chris Jensen

COUNTY BOARD OF EQUALIZATION DECISION	FULL CASH VALUE \$	LIMITED PROPERTY VALUE \$	LEGAL CLASS	ASMT RATIO
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BASIS FOR DECISION: Based on info provided by Assessor & Polkman packet in change of FCV for 2014 remain at 106,469

DATE RECEIVED 9-11-13 DATE DECISION MAILED 10/15/13 CHAIRMAN OR CLERK OF THE BOARD _____

FOR OFFICIAL USE ONLY

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PETITION FOR REVIEW OF REAL PROPERTY VALUATION

PURSUANT TO A.R.S. TITLE 42, Ch. 15, Art. 3 and Ch. 16, Art. 1-5

FOR OFFICIAL USE ONLY

14-2071

FILED FOR TAX YEAR 2014

See Instructions for complete filing information

- In all counties, mail or hand deliver one copy of this completed petition to the County Assessor. Retain a copy for your records (and for use in possible further appeals). Taxpayers receiving a Notice of Value have sixty days from the date the notice was mailed to file this petition. United States Postal Service postmark dates are evidence of the dates petitions were filed and decisions were mailed.
- The County Assessor may reject any petition not meeting statutory requirements. Only one petition for each parcel or economic unit will be accepted. Any duplicate petition(s) will be returned.

• COMPLETE SECTIONS 1 THROUGH 10 WHERE APPLICABLE. TYPE OR PRINT /B516-01/05673414/620/60/04/25/13

1. DATE FILED 4/25/13 COUNTY APACHE BOOK 106 MAP 79 PARCEL 046
 2. PROPERTY ADDRESS OR LEGAL DESCRIPTION: THE CLUB AT HIDDEN MEADOW RANCH
 3. IF THIS IS A MULTIPLE PARCEL APPEAL CHECK HERE ATTACH A MULTIPLE PARCEL APPEAL FORM (DOR 82131). SEE INSTRUCTIONS.
 4. USE OF PROPERTY: COMMERCIAL / INDUSTRIAL (SPECIFY TYPE: Apartment, Office, warehouse, etc.) PUC 0013
 VACANT LAND AGRICULTURAL OTHER

5A. OWNER'S NAME
BORUSHKO MARK DANIEL & LYNN D TR
 NAME
 ADDRESS
 CITY, STATE, ZIP CODE

5B. MAIL DECISION TO: (IF DIFFERENT THAN 5A)
PROPERTY TAX PROFESSIONALS, INC.
 NAME 2929 N. 44TH ST., #350
 ADDRESS PHOENIX AZ 85018
 CITY, STATE, ZIP CODE

5C. IF OWNERSHIP HAS CHANGED CHECK HERE ATTACH RECORDED DOCUMENTATION.
 6. PETITION COMPLETED BY: (Specify Owner, Agent, Attorney, etc.) AGENT
PROPERTY TAX PROFESSIONALS, INC.
 NAME PHOENIX TELEPHONE 602-264-7485
2929 N. 44TH ST., #350 ADDRESS AZ 85018-7241
 CITY, STATE, ZIP CODE

AGENTS ONLY: STATE BOARD OF APPRAISAL NUMBER 920008 960135 STATE BOARD OF EQUALIZATION NUMBER 520
 7. BASIS FOR PETITION: MARKET SALES APPROACH COST APPROACH INCOME APPROACH OTHER (explain below)

THE 2013 FCV WAS AN ASSESSOR LEVEL ADJUSTMENT. PLEASE REVIEW.
 PER ARS 42-16002, THE VALUATION AND/OR CLASSIFICATION MUST REMAIN UNCHANGED.
 THE CURRENT VALUATION EXCEEDS MARKET VALUE.
 SALES: 106-23-088 11/2012, 106-28-001 7/2012

8.	VALUE SHOWN ON NOTICE OF VALUE	FULL CASH VALUE \$ <u>160000</u>	LIMITED PROPERTY VALUE \$ <u>160000</u>	LEGAL CLASS	ASMT RATIO <u>16.00%</u>
9.	OWNER'S OPINION OF VALUE	FULL CASH VALUE \$ <u>96000</u>	LIMITED PROPERTY VALUE \$ <u>96000</u>	LEGAL CLASS	ASMT RATIO

10. I HEREBY AFFIRM THAT THE INFORMATION INCLUDED OR ATTACHED IS TRUE AND CORRECT.
 X Judith E Hill
 SIGNATURE OF PROPERTY OWNER OR REPRESENTATIVE
602-264-7485 TELEPHONE judy@ptpaz.com EMAIL code
 TO REQUEST A MEETING WITH THE ASSESSOR CHECK HERE.
 FOR SBOE (IN MARICOPA AND PIMA COUNTIES ONLY):
 If you want this appeal to be heard "On The Record" check here.
 This means that neither you, the Assessor, your Agent, or Attorney (if applicable) will appear before the State Board of Equalization to offer testimony. Submit any additional written or typed information with this appeal to the SBOE.

ASSESSOR'S DECISION	FULL CASH VALUE \$ <u>160,000</u>	LIMITED PROPERTY VALUE \$ <u>160,000</u>	LEGAL CLASS <u>2</u>	ASMT RATIO <u>16</u>
BASIS FOR DECISION: <u>Deny No comps in county given</u>				
<u>4-29-13</u>	<u>8/15/2013</u>	<u>BTA</u>	<u>Cristen J. Hays</u>	
DATE RECEIVED	DATE DECISION MAILED	REVIEWED BY	ASSESSOR OR CHIEF DEPUTY	
COUNTY BOARD OF EQUALIZATION DECISION	FULL CASH VALUE \$	LIMITED PROPERTY VALUE \$	LEGAL CLASS	ASMT RATIO
BASIS FOR DECISION: <u>Based on info provided by Assessor & info within petitioners packet no change of FCV of 160,000 for 2014</u>				
<u>9-5-13</u>	<u>10/15/13</u>	CHAIRMAN OR CLERK OF THE BOARD		
DATE RECEIVED	DATE DECISION MAILED			

PETITION FOR REVIEW OF REAL PROPERTY VALUATION

PURSUANT TO A.R.S. TITLE 42, Ch. 15, Art. 3 and Ch. 16, Art. 1-5

FOR OFFICIAL USE ONLY

14-3080

FILED FOR TAX YEAR 2014

See Instructions for complete filing information

- In all counties, mail or hand deliver one copy of this completed petition to the County Assessor. Retain a copy for your records (and for use in possible further appeals). Taxpayers receiving a Notice of Value have sixty days from the date the notice was mailed to file this petition. United States Postal Service postmark dates are evidence of the dates petitions were filed and decisions were mailed.
- The County Assessor may reject any petition not meeting statutory requirements. Only one petition for each parcel or economic unit will be accepted. Any duplicate petition(s) will be returned.

• COMPLETE SECTIONS 1 THROUGH 10 WHERE APPLICABLE. TYPE OR PRINT
 / B398-01/05364214/620/70/04/25/13

1. DATE FILED 4/25/13 COUNTY APACHE BOOK 101 MAP 70 PARCEL 022
 2. PROPERTY ADDRESS OR LEGAL DESCRIPTION: APACHE CO.
 3. IF THIS IS A MULTIPLE PARCEL APPEAL CHECK HERE . ATTACH A MULTIPLE PARCEL APPEAL FORM (DOR 82131). SEE INSTRUCTIONS.
 4. USE OF PROPERTY: COMMERCIAL / INDUSTRIAL (SPECIFY TYPE: Apartment, Office, warehouse, etc.) PUC 0143
 VACANT LAND AGRICULTURAL OTHER

5A. OWNER'S NAME
 NAME BOHR RONAD W TRUSTEE RONALD W BO
 ADDRESS _____
 CITY, STATE, ZIP CODE _____

5B. MAIL DECISION TO: (IF DIFFERENT THAN 5A)
 PROPERTY TAX PROFESSIONALS, INC.
 NAME 2929 N. 44TH ST., #350
 ADDRESS PHOENIX AZ 85018
 CITY, STATE, ZIP CODE _____

5C. IF OWNERSHIP HAS CHANGED CHECK HERE . ATTACH RECORDED DOCUMENTATION.
 6. PETITION COMPLETED BY: (Specify Owner, Agent, Attorney, etc.) AGENT
PROPERTY TAX PROFESSIONALS, INC. 602-264-7485
 NAME PHOENIX TELEPHONE AZ 85018-7241
2929 N. 44TH ST., #350 CITY, STATE, ZIP CODE _____
 ADDRESS _____

AGENTS ONLY: STATE BOARD OF APPRAISAL NUMBER 920008 960135 STATE BOARD OF EQUALIZATION NUMBER 520
 7. BASIS FOR PETITION: MARKET SALES APPROACH COST APPROACH INCOME APPROACH OTHER (explain below)

FCV EXCESSIVE WHEN COMPARED TO THE FOLLOWING COMPS:
 COMPS: 101-71-041 ON @ \$100 PSF, 101-71-028 ON @ \$108 PSF
Good 1744 .49 Good 1225 .49 ~~SK~~ ~~SK~~ = FCV - SF

8. VALUE SHOWN ON NOTICE OF VALUE	FULL CASH VALUE \$ 248188	LIMITED PROPERTY VALUE \$ 192946	LEGAL CLASS	ASMT RATIO 10.00%
9. OWNER'S OPINION OF VALUE	FULL CASH VALUE \$ 173732	LIMITED PROPERTY VALUE \$ 135062	LEGAL CLASS	ASMT RATIO

10. I HEREBY AFFIRM THAT THE INFORMATION INCLUDED OR ATTACHED IS TRUE AND CORRECT.
 X Judith E. Hill
 SIGNATURE OF PROPERTY OWNER OR REPRESENTATIVE
602-264-7485 judy@ptpaz.com
 TELEPHONE EMAIL

TO REQUEST A MEETING WITH THE ASSESSOR CHECK HERE.
 FOR SBOE (IN MARICOPA AND PIMA COUNTIES ONLY):
 If you want this appeal to be heard "On The Record" check here.
 This means that neither you, the Assessor, your Agent, or Attorney (if applicable) will appear before the State Board of Equalization to offer testimony. Submit any additional written or typed information with this appeal to the SBOE.

ASSESSOR'S DECISION	FULL CASH VALUE \$ 173,732	LIMITED PROPERTY VALUE \$ 173,732	LEGAL CLASS 0112	ASMT RATIO 17%
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BASIS FOR DECISION: Bohr's still Advertising. Nightly rental attrn
Returned to 19% Comm. for 2014

4-29-13 Aug 15 2013 Marko Casey Jones
 DATE RECEIVED DATE DECISION MAILED REVIEWED BY ASSESSOR OR CHIEF DEPUTY

COUNTY BOARD OF EQUALIZATION DECISION	FULL CASH VALUE \$	LIMITED PROPERTY VALUE \$	LEGAL CLASS	ASMT RATIO
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BASIS FOR DECISION: Based on info provided by Assessor & reviewing packet
appeal info set FCV at no change from level 1 of 173,732

9-5-13 10/15/13
 DATE RECEIVED DATE DECISION MAILED CHAIRMAN OR CLERK OF THE BOARD

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FOR OFFICIAL USE ONLY

RESIDENTIAL PETITION FOR REVIEW OF VALUATION
PURSUANT TO A.R.S. TITLE 42, Ch. 15, Art. 3 and Ch. 16, Art. 1-5

FOR OFFICIAL USE ONLY

14-3110

FILED FOR TAX YEAR 2014

See instructions for complete filing requirements.

- The County Assessor reserves the right to reject any petition not meeting statutory requirements. Only one petition for each parcel will be accepted. Any duplicate petitions will be returned.

COMPLETE SECTIONS 1 THROUGH 8 WHERE APPLICABLE. PLEASE TYPE OR PRINT.

1. DATE FILED 4/29/13 COUNTY Apache BOOK 201 MAP 53 PARCEL 129A

2. IF THIS PROPERTY IS RENTED TO SOMEONE OTHER THAN A FAMILY MEMBER CHECK HERE

3A. OWNER'S NAME
JOHN LILES / SIM. MEGNA
6840 PINE CONE RD
GRANITE BAY, CA. 95746

3B. MAIL DECISION TO:
TRIM BENELLI
HC30 BX 222
CONCHA AZ. 85924

3C. IF OWNERSHIP HAS CHANGED CHECK HERE ATTACH RECORDED DOCUMENTATION.

4. PETITION COMPLETED BY: (Specify: owner, Agent, Attorney, etc.) AGENT
TRIM BENELLI TELEPHONE 928/242-0557
HC30 BX 222 CITY Concha STATE AZ ZIP CODE 85924
ADDRESS CITY STATE ZIP CODE

AGENTS ONLY: STATE BOARD OF APPRAISAL NUMBER _____ SBOE NUMBER _____

5. BASIS FOR THIS PETITION: MARKET SALES APPROACH COST APPROACH OTHER (explain below)
Additional documents submitted must contain the book, map, and parcel number and be attached to the petition in order to be considered by the Assessor. Evidence contained in this appeal could be the basis for either increasing or decreasing the valuation or changing the legal classification.

107-52-023
212-52-069
201-60-114 A/R

2011 MARKET APPRAISAL FOR 201-53-121 ATTACHED TO IDLE WILD OWNERS PACKET

6. VALUE SHOWN ON NOTICE OF VALUE	FULL CASH VALUE	\$126,143. ⁰⁰	LIMITED PROPERTY VALUE	\$126,143. ⁰⁰	LEGAL CLASS	M	ASMT RATIO
7. OWNER'S OPINION OF VALUE	FULL CASH VALUE	\$101,838. ⁰⁰	LIMITED PROPERTY VALUE	\$101,838. ⁰⁰	LEGAL CLASS	M	ASMT RATIO

8. I HEREBY AFFIRM THAT THE INFORMATION INCLUDED OR ATTACHED IS TRUE AND CORRECT.
X Trim Benelli
SIGNATURE OF PROPERTY OWNER OR REPRESENTATIVE
928/242-0557
TELEPHONE EMAIL ADDRESS

TO REQUEST A MEETING WITH THE ASSESSOR CHECK HERE
IN MARICOPA AND PIMA COUNTIES ONLY:
If you want this appeal to be heard "On The Record" check here.
This means that neither you nor the Assessor will appear before the State Board of Equalization to offer testimony. Submit any additional written or typed information with this appeal.

ASSESSOR'S DECISION	FULL CASH VALUE	\$153,061	LIMITED PROPERTY VALUE	\$141,604	LEGAL CLASS	M	ASMT RATIO	11.2
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BASIS FOR DECISION: INFO: LINE 6 FCV IS 2012, NOT 2014. CORRECT 2014 FCV IS \$153,063. REVIEW: DENIED FOR LACK OF EVIDENCE. OUTDATED APPRAISAL OF WRONG LOT. NO PAIRED SALES.

4-30-13 DATE RECEIVED 15 AUG 2013 DATE DECISION MADE C. Jensen REVIEWED BY C. Jensen ASSESSOR OR CHIEF DEPUTY

COUNTY BOARD OF EQUALIZATION DECISION	FULL CASH VALUE	\$	LIMITED PROPERTY VALUE	\$	LEGAL CLASS		ASMT RATIO	
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BASIS FOR DECISION: Based on information provided within the appeal & Assessor's offer, no change for 2014; remain at 153,061

9-11-13 DATE RECEIVED 10/15/13 DATE DECISION MADE _____ CHAIRMAN OR CLERK OF THE BOARD

FOR OFFICIAL USE ONLY

FOR OFFICIAL USE ONLY

PETITION FOR REVIEW OF REAL PROPERTY VALUATION

PURSUANT TO A.R.S. TITLE 42, Ch. 15, Art. 3 and Ch. 16, Art. 1-5

FOR OFFICIAL USE ONLY

14-200812

FILED FOR TAX YEAR 2014

See Instructions for complete filing information

RECEIVED AUG 27 2013

- In all counties, mail or hand deliver one copy of this completed petition to the County Assessor. Retain a copy for your records (and for use in possible further appeals). Taxpayers receiving a Notice of Value have sixty days from the date the notice was mailed to file this petition. United States Postal Service postmark dates are evidence of the dates petitions were filed and decisions were rendered.
The County Assessor may reject any petition not meeting statutory requirements. Only one petition for each parcel or economic unit will be accepted. Any duplicate petition(s) will be returned.

COMPLETE SECTIONS 1 THROUGH 10 WHERE APPLICABLE. TYPE OR PRINT

1. DATE FILED 3/14/2013 COUNTY APACHE BOOK 201 MAP 59
2. PROPERTY ADDRESS OR LEGAL DESCRIPTION: SEC 19 SE 4 R 26 E CONCHO VALLEY UNIT 97-4207 53
3. IF THIS IS A MULTIPLE PARCEL APPEAL CHECK HERE ATTACH A MULTIPLE PARCEL APPEAL FORM (DOR 82131). SEE INSTRUCTIONS.

4. USE OF PROPERTY: COMMERCIAL / INDUSTRIAL (SPECIFY TYPE: Apartment, Office, warehouse, etc.)
VACANT LAND X AGRICULTURAL OTHER

5A. OWNER'S NAME DONAL A MEYERS
NAME DONAL A MEYERS
ADDRESS PO BOX 1564
CITY, STATE, ZIP CODE SAINT JOHNS AZ 85936

5B. MAIL DECISION TO: (IF DIFFERENT THAN 5A)
NAME
ADDRESS
CITY, STATE, ZIP CODE

5C. IF OWNERSHIP HAS CHANGED CHECK HERE ATTACH RECORDED DOCUMENTATION.

6. PETITION COMPLETED BY: (Specify Owner, Agent, Attorney, etc.) OWNER
DONAL A. MEYERS
NAME DONAL A. MEYERS TELEPHONE 928-551-0446
ADDRESS PO BOX 1564 CITY, STATE, ZIP CODE SAINT JOHNS AZ 85936

AGENTS ONLY. STATE BOARD OF APPRAISAL NUMBER STATE BOARD OF EQUALIZATION NUMBER

7. BASIS FOR PETITION: MARKET SALES APPROACH COST APPROACH INCOME APPROACH OTHER (explain below)
Additional documents submitted must contain the book, map, and parcel number and be attached to the petition in order to be considered by the Assessor. Evidence contained in this appeal could be the basis for either increasing or decreasing the valuation or changing the legal classification of the property.
ASSESSOR VALUATION OF COMPARABLE PROPERTIES - SEE ANNEXED AFFIRMATION OF PETITIONER

Table with 5 columns: VALUE SHOWN ON NOTICE OF VALUE, FULL CASH VALUE, LIMITED PROPERTY VALUE, LEGAL CLASS, ASMT RATIO. Row 8: 18,928, 18,928, 2R, 16.0. Row 9: 4,185, 4,185, 2R, 16.0.

10. I HEREBY AFFIRM THAT THE INFORMATION INCLUDED OR ATTACHED IS TRUE AND CORRECT. TO REQUEST A MEETING WITH THE ASSESSOR CHECK HERE X
FOR SBOE (IN MARICOPA AND PIMA COUNTIES ONLY): If you want this appeal to be heard "On The Record" check here. This means that neither you, the Assessor, your Agent, or Attorney (if applicable) will appear before the State Board of Equalization to offer testimony. Submit any additional written or typed information with this appeal to the SBOE.

SIGNATURE OF PROPERTY OWNER OR REPRESENTATIVE
TELEPHONE 928-551-0446 EMAIL DOMEYERS@TAXFIXER.COM

FOR OFFICIAL USE ONLY. ASSESSOR'S DECISION: FULL CASH VALUE \$ 8500, LIMITED PROPERTY VALUE \$ 8500, LEGAL CLASS 2, ASMT RATIO 16. BASIS FOR DECISION: Adjust Base 2014-2015 5 sales Place Median at 8500 in 2015. DATE RECEIVED 3-14-13, DATE DECISION MAILED 8/15/2013, REVIEWED BY B.H., ASSESSOR OR CHIEF DEPUTY C.H. J.H. DATE RECEIVED 8/27/13, DATE DECISION MAILED 10/15/13, CHAIRMAN OR CLERK OF THE BOARD

PETITION FOR REVIEW OF REAL PROPERTY VALUATION

PURSUANT TO A.R.S. TITLE 42, Ch. 15, Art. 3 and Ch. 16, Art. 1-5

FOR OFFICIAL USE ONLY

14-2064

FILED FOR TAX YEAR 2014

See Instructions for complete filing information

RECEIVED

AUG 27 2013

Board of Supervisors
Apache County, AZ

- In all counties, mail or hand deliver one copy of this completed petition to the County Assessor. Retain a copy for your records (and for use in possible further appeals). Taxpayers receiving a Notice of Value have sixty days from the date the notice was mailed (or the date the petition is mailed, if the United States Postal Service postmark dates are evidence of the dates petitions were filed and decisions were mailed).
- The County Assessor may reject any petition not meeting statutory requirements. Only one petition for each parcel or ~~multiple unit~~ will be accepted. Any duplicate petition(s) will be returned.

COMPLETE SECTIONS 1 THROUGH 10 WHERE APPLICABLE. TYPE OR PRINT

1 DATE FILED 4/30/2013 COUNTY APACHE BOOK 206 MAP 70 PARCEL 028

2 PROPERTY ADDRESS OR LEGAL DESCRIPTION: SEC 11 T18N R26E

3 IF THIS IS A MULTIPLE PARCEL APPEAL CHECK HERE ATTACH A MULTIPLE PARCEL APPEAL FORM (DOR 82131). SEE INSTRUCTIONS.

4 USE OF PROPERTY: COMMERCIAL/INDUSTRIAL (SPECIFY TYPE: Apartment, Office, warehouse, etc.) _____
 VACANT LAND AGRICULTURAL OTHER _____

5A. OWNER'S NAME DONAL A. MEYERS

NAME _____ ADDRESS PO BOX 1564 CITY, STATE, ZIP CODE ST JOHNS AZ 85936

5B. MAIL DECISION TO. (IF DIFFERENT THAN 5A)

NAME _____ ADDRESS _____ CITY, STATE, ZIP CODE _____

5C. IF OWNERSHIP HAS CHANGED CHECK HERE ATTACH RECORDED DOCUMENTATION.

6 PETITION COMPLETED BY: (Specify Owner, Agent, Attorney, etc.) OWNER

NAME DONAL A MEYERS TELEPHONE 928-551-0446

ADDRESS PO BOX 1564 CITY, STATE, ZIP CODE ST JOHNS, AZ 85936

AGENTS ONLY: STATE BOARD OF APPRAISAL NUMBER _____ STATE BOARD OF EQUALIZATION NUMBER _____

7. BASIS FOR PETITION: MARKET SALES APPROACH COST APPROACH INCOME APPROACH OTHER (explain below)

Additional documents submitted must contain the book, map, and parcel number and be attached to the petition in order to be considered by the Assessor. Evidence contained in this appeal could be the basis for either increasing or decreasing the valuation or changing the legal classification of the property.

COMPARABLE ASSESSMENT OF ADJOINING PROPERTY - SEE AFFIRMATION OF DONAL A. MEYERS ATTACHED.

8. VALUE SHOWN ON NOTICE OF VALUE	FULL CASH VALUE \$ <u>11,200</u>	LIMITED PROPERTY VALUE \$ <u>11,200</u>	LEGAL CLASS <u>2R</u>	ASMT RATIO <u>16%</u>
9. OWNER'S OPINION OF VALUE	FULL CASH VALUE \$ <u>256</u>	LIMITED PROPERTY VALUE \$ <u>256</u>	LEGAL CLASS <u>2R</u>	ASMT RATIO <u>16%</u>

10. I HEREBY AFFIRM THAT THE INFORMATION INCLUDED OR ATTACHED IS TRUE AND CORRECT.

SIGNATURE OF PROPERTY OWNER OR REPRESENTATIVE Donal A. Meyers

TELEPHONE 928-551-6446 EMAIL DMEYERS@TAXFIXER.COM

TO REQUEST A MEETING WITH THE ASSESSOR CHECK HERE.

FOR SBOE (IN MARICOPA AND PIMA COUNTIES ONLY): If you want this appeal to be heard "On The Record" check here. This means that neither you, the Assessor, your Agent, or Attorney (if applicable) will appear before the State Board of Equalization to offer testimony. Submit any additional written or typed information with this appeal to the SBOE.

ASSESSOR'S DECISION	FULL CASH VALUE \$ <u>11,200</u>	LIMITED PROPERTY VALUE \$ <u>11,200</u>	LEGAL CLASS <u>2</u>	ASMT RATIO <u>16</u>
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BASIS FOR DECISION: Denied, argues as status plus purchase price on a trustee's deed.

DATE RECEIVED 4-30-13 DATE DECISION MAILED 8/15/2013 REVIEWED BY BM ASSESSOR OR CHIEF DEPUTY Chris [Signature]

COUNTY BOARD OF EQUALIZATION DECISION	FULL CASH VALUE \$ _____	LIMITED PROPERTY VALUE \$ _____	LEGAL CLASS _____	ASMT RATIO _____
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BASIS FOR DECISION: Based on info provided by petitioner to assessor, determined that the FCV be set at 10,500. for 2014.

DATE RECEIVED 8/27/13 DATE DECISION MAILED 10/15/13 CHAIRMAN OR CLERK OF THE BOARD _____

FOR OFFICIAL USE ONLY

FOR OFFICIAL USE ONLY

PETITION FOR REVIEW OF REAL PROPERTY VALUATION

PURSUANT TO A.R.S. TITLE 42, Ch. 15, Art. 3 and Ch. 16, Art. 1-5

FOR OFFICIAL USE ONLY

14-2039

FILED FOR TAX YEAR 2014

See Instructions for complete filing information

RECEIVED AUG 27 2013

Board of Supervisors Apache County, AZ

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COMPLETE SECTIONS 1 THROUGH 10 WHERE APPLICABLE. TYPE OR PRINT

- 1. DATE FILED 4/15/2013 COUNTY APACHE BOOK 201 MAP 62 PARCEL
2. PROPERTY ADDRESS OR LEGAL DESCRIPTION: SEC 7 T12 R26E CONCHO VALLEY UNIT 10 LOT 1
3. IF THIS IS A MULTIPLE PARCEL APPEAL CHECK HERE X ATTACH A MULTIPLE PARCEL APPEAL FORM (DOR 82131). SEE INSTRUCTIONS.

4. USE OF PROPERTY: COMMERCIAL / INDUSTRIAL (SPECIFY TYPE: Apartment, Office, warehouse, etc.)
VACANT LAND AGRICULTURAL OTHER

5A. OWNER'S NAME DONAL A. MEYERS
5B. MAIL DECISION TO. (IF DIFFERENT THAN 5A)
NAME ADDRESS CITY, STATE, ZIP CODE

5C IF OWNERSHIP HAS CHANGED CHECK HERE ATTACH RECORDED DOCUMENTATION.

6. PETITION COMPLETED BY: (Specify Owner, Agent, Attorney, etc.) OWNER
NAME DONAL A. MEYERS TELEPHONE 928-551-0446
ADDRESS PO BOX 1564 SAINT JOHNS AZ 85936
CITY, STATE, ZIP CODE

AGENTS ONLY. STATE BOARD OF APPRAISAL NUMBER STATE BOARD OF EQUALIZATION NUMBER

7. BASIS FOR PETITION: MARKET SALES APPROACH COST APPROACH INCOME APPROACH OTHER (explain below)
Additional documents submitted must contain the book, map, and parcel number and be attached to the petition in order to be considered by the Assessor. Evidence contained in this appeal could be the basis for either increasing or decreasing the valuation or changing the legal classification of the property.

SEE ATTACHED AFFIRMATION OF DONAL A. MEYERS

Table with 5 columns: VALUE SHOWN ON NOTICE OF VALUE, FULL CASH VALUE, LIMITED PROPERTY VALUE, LEGAL CLASS, ASMT RATIO. Includes owner's opinion section.

10. I HEREBY AFFIRM THAT THE INFORMATION INCLUDED OR ATTACHED IS TRUE AND CORRECT. TO REQUEST A MEETING WITH THE ASSESSOR CHECK HERE. X
FOR SBOE (IN MARICOPA AND PIMA COUNTIES ONLY): If you want this appeal to be heard "On The Record" check here. This means that neither you, the Assessor, your Agent, or Attorney (if applicable) will appear before the State Board of Equalization to offer testimony. Submit any additional written or typed information with this appeal to the SBOE.

Table with 5 columns: ASSESSOR'S DECISION, FULL CASH VALUE, LIMITED PROPERTY VALUE, LEGAL CLASS, ASMT RATIO.

BASIS FOR DECISION: Petitioner basically argues ag status on his properties. Denied and used a \$10 sale for comp.
DATE RECEIVED 4/15/13 DATE DECISION MAILED 8/15/2013 REVIEWED BY Boly.

Table with 5 columns: COUNTY BOARD OF EQUALIZATION DECISION, FULL CASH VALUE, LIMITED PROPERTY VALUE, LEGAL CLASS, ASMT RATIO.

BASIS FOR DECISION: based on info provided by Petitioner; Assessor, set FCV be set at the aggregate sum for 5 parcels be set at 1,500 per site.

DATE RECEIVED 4/15/13 DATE DECISION MAILED 10/15/13 CHAIRMAN OR CLERK OF THE BOARD

S94-001-01

PETITION FOR REVIEW OF REAL PROPERTY VALUATION

PURSUANT TO A.R.S. TITLE 42, Ch. 15, Art. 3 and Ch. 16, Art. 1-5

FOR OFFICIAL USE ONLY

FILED FOR TAX YEAR 2014

See instructions for complete filing

14-3103

- In all counties, mail or hand deliver one copy of this completed petition to the County Assessor. Retain a copy for your records (and for use in possible further appeals). Taxpayers receiving a Notice of Value have sixty days from the date the notice was mailed to file this petition. United States Postal Service postmark dates are evidence of the dates petitions were filed and decisions were mailed.
- The County Assessor reserves the right to reject any petition not meeting statutory requirements. Only one petition for each parcel or economic unit will be accepted. Any duplicate petitions will be returned.
- IMPORTANT: COMPLETE SECTIONS 1 THROUGH 10 WHERE APPLICABLE. PLEASE TYPE OR PRINT.

1. DATE FILED 04/19/2013 COUNTY Apache BOOK 102 MAP 14 PARCEL 013A

2. PROPERTY ADDRESS OR LEGAL DESCRIPTION: _____

3. IF THIS IS A MULTIPLE PARCEL APPEAL CHECK HERE . ATTACH A MULTIPLE PARCEL APPEAL FORM (DOR 82131). SEE INSTRUCTIONS.

4. USE OF PROPERTY: COMMERCIAL / INDUSTRIAL (SPECIFY TYPE: Apartment, Office, warehouse, etc.) _____
 VACANT LAND AGRICULTURAL OTHER Residential

5A. OWNER'S NAME
Kent Jonathan as Successor Trustee
9066 E 20th St
Tucson AZ 85710

5B. MAIL DECISION TO:
Property Tax Evaluations
7459 East Broadway, Suite 201
Tucson AZ 85710

5C. IF OWNERSHIP HAS CHANGED CHECK HERE . ATTACH RECORDED DOCUMENTATION.

6. PETITION COMPLETED BY: (Specify Owner, Agent, Attorney, etc.) Agent

Dale Faulkner
 NAME
7459 East Broadway, Suite 201 ADDRESS
Tucson CITY
AZ STATE
85710 ZIP
 TELEPHONE _____

AGENTS ONLY: STATE BOARD OF APPRAISAL NUMBER 2012011 STATE BOARD OF EQUALIZATION NUMBER 505

7. BASIS FOR PETITION: MARKET SALES APPROACH COST APPROACH INCOME APPROACH OTHER (explain below)

Market sales support requested value.
102-14-012L REO Sale 102-08-013F

8. VALUE SHOWN ON NOTICE OF VALUE	FULL CASH VALUE \$ <u>254,113</u>	LIMITED PROPERTY VALUE \$ <u>254,113</u>	LEGAL CLASS	ASMT RATIO <u>10</u>
9. OWNER'S OPINION OF VALUE	FULL CASH VALUE \$ <u>125,000</u>	LIMITED PROPERTY VALUE \$ <u>125,000</u>	LEGAL CLASS	ASMT RATIO <u>10</u>

10. I HEREBY AFFIRM THAT THE INFORMATION INCLUDED OR ATTACHED IS TRUE AND CORRECT. TO REQUEST A MEETING WITH THE ASSESSOR CHECK HERE.

Dale Faulkner
 SIGNATURE OF PROPERTY OWNER OR REPRESENTATIVE
(520) 290-4545 TELEPHONE
info@proptaxeval.com EMAIL ADDRESS

IN MARICOPA AND PIMA COUNTIES ONLY:
 If you want this appeal to be heard "On The Record" Check here.
 This means that neither you nor the Assessor will appear in person before the State Board of Equalization to offer testimony. Submit any additional written or typed information with this appeal.

ASSESSOR'S DECISION	FULL CASH VALUE \$ <u>254,113</u>	LIMITED PROPERTY VALUE \$ <u>254,113</u>	LEGAL CLASS <u>04</u>	ASMT RATIO <u>10%</u>
BASIS FOR DECISION: <u>102-08-014D @ 212700/Ac and 102-08-038 @ 100000/Ac. \$21,000 house (visit verify, worth) no change (Denied)</u>				
<u>4-29-13</u> DATE RECEIVED	<u>Aug 15 2013</u> DATE DECISION MAILED	<u>[Signature]</u> REVIEWED BY	ASSESSOR OR CHIEF DEPUTY	
COUNTY BOARD OF EQUALIZATION DECISION	FULL CASH VALUE \$	LIMITED PROPERTY VALUE \$	LEGAL CLASS	ASMT RATIO
BASIS FOR DECISION: <u>Based on information provided by Petitioner v Assessor, FCV for property for 2014 be set at 189,556.</u>				
<u>9/9/13</u> DATE RECEIVED	<u>10/15/13</u> DATE DECISION MAILED	CHAIRMAN OR CLERK OF THE BOARD		

1.62A
 Low 6
 House
 1980
 336P
 1920
 329P

FOR OFFICIAL USE ONLY

FOR OFFICIAL USE ONLY

PETITION FOR REVIEW OF TAXPAYER NOTICE OF CLAIM

Pursuant to A.R.S. § 42-16254

FOR PETITIONS FILED IN MARICOPA OR PIMA COUNTY, SUBMIT TO THE STATE BOARD OF EQUALIZATION (SBOE), IF FILED IN ANY OTHER COUNTY, SUBMIT TO THE COUNTY BOARD OF EQUALIZATION.

- File this petition within 150 DAYS after the original filing date of the taxpayer notice of claim if dissatisfied with the Assessor's decision.
- Keep a copy for your records and mail or hand deliver one copy to either the County or State Board of Equalization.
- Deliver one copy to the Tax Officer. If mailed, send certified mail.
- Include an Agency Authorization form with this petition if the agent has not represented the taxpayer at the Assessor level.
- Complete Items 1 through 8 where applicable.

1. COUNTY Apache BOOK/MAP/PARCEL 203 . 78 . 001 ACCOUNT NUMBER _____
 2. PROPERTY ADDRESS OR LEGAL DESCRIPTION 897 Hillcrest Circle, St. Johns, Arizona

3. TYPE OR PRINT OWNER'S NAME AS LISTED ON TAX ROLL <u>Hillcrest Duplexes, LP</u> <u>1512 N. Oak Street</u> <u>Tempe AZ 85281</u>	4. MAIL DECISION TO: <u>Frazer Ryan Goldberg & Arnold LLP</u> <u>3101 N. Central Ave., Ste. 1600</u> <u>Phoenix AZ 85012</u>
--------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------

5. COMPLETED BY: (Owner, Agent, or Attorney) Michael P. Killion
Frazer Ryan Goldberg & Arnold LLP
3101 N. Central Ave., Ste. 1600, Phoenix, AZ 85012 (602) 277-2010
 TELEPHONE NUMBER

AGENTS ONLY: State Board of Appraisal # 2012033 SBOE # _____ (Pima and Maricopa Counties Only)

6. BASIS FOR THIS PETITION: Additional documents submitted must contain the book, map and parcel number or tax roll number and be attached to the petition. Evidence contained in this appeal could be the basis for either increasing or decreasing the valuation, changing the classification, or no change. THIS PETITION IS BASED ON THE FOLLOWING METHOD(S) OF VALUATION: MARKET COST INCOME
Error in Failing to account for the legal restrictions on the Subject Property. The Notice of Claim includes APN(s) 203-78-001 thru 013. The requested correction includes the total value of all 13 parcels.

7. TAX OFFICER'S PROPOSED CORRECTION

TAX YEAR	LEGAL CLASS		LAND FCV:
2012	4		IMPS. FCV:
		ASSMT. RATIO	TOTAL FCV: 898,422
		10	TOTAL LPV: 898,422
2011	4		LAND FCV:
		ASSMT. RATIO	IMPS. FCV:
		10	TOTAL FCV: 898,422
			TOTAL LPV: 898,422
2010	4		LAND FCV:
		ASSMT. RATIO	IMPS. FCV:
		10	TOTAL FCV: 898,422
			TOTAL LPV: 898,422

OWNER'S OPINION OF VALUE

TAX YEAR	LEGAL CLASS		LAND FCV:
2012	4		IMPS. FCV:
		ASSMT. RATIO	TOTAL FCV: 568,104
		10	TOTAL LPV: 568,104
2011	4		LAND FCV:
		ASSMT. RATIO	IMPS. FCV:
		10	TOTAL FCV: 215,933
			TOTAL LPV: 215,933
2010	4		LAND FCV:
		ASSMT. RATIO	IMPS. FCV:
		10	TOTAL FCV: 232,161
			TOTAL LPV: 232,161

8. I hereby request that the proposed correction described above be reviewed by the County or State Board of Equalization and that the Board consider the provided information in making its determination. I hereby affirm that the information included or attached is true and correct.

IN PIMA AND MARICOPA COUNTIES ONLY:
 Check here if you want this appeal to be heard on the record and submit any additional written or typed information with this form. This means that neither you nor the assessor will appear in person before the State Board of Equalization to offer oral testimony.

Michael P. Killion 5/28/2013
 SIGNATURE OF PROPERTY OWNER OR REPRESENTATIVE DATE

BOARD OF EQUALIZATION DECISION	FULL CASH VALUE \$	LIMITED PROPERTY VALUE \$	LEGAL CLASS	ASMT RATIO
BASIS FOR DECISION: <u>This will not be heard by the BOE due to receiving it 154 days after the notice of claim date of 1/2/13</u>				
DATE RECEIVED <u>6/4/13</u>		DATE DECISION MAILED <u>6/18/13</u>		CHAIRMAN OR CLERK OF THE BOARD <u>[Signature]</u>

DOR 82179C-1 (03/09)
Based on testimony by Assessor's office, deny claim with the right to appeal to Tax Court.
mailed 10/15/13
D 8/19/13

FOR OFFICIAL USE ONLY

FOR OFFICIAL USE ONLY

PETITION FOR REVIEW OF TAXPAYER NOTICE OF CLAIM

Pursuant to A.R.S. § 42-16254

**FOR PETITIONS FILED IN MARICOPA OR PIMA COUNTY, SUBMIT TO THE STATE BOARD OF EQUALIZATION (SBOE).
IF FILED IN ANY OTHER COUNTY, SUBMIT TO THE COUNTY BOARD OF EQUALIZATION.**

- File this petition within 150 DAYS after the original filing date of the taxpayer notice of claim if dissatisfied with the Assessor's decision.
- **Keep a copy for your records** and mail or hand deliver one copy to either the County or State Board of Equalization.
- Deliver one copy to the Tax Officer. If mailed, send **certified mail**.
- Include an Agency Authorization form with this petition if the agent has not represented the taxpayer at the Assessor level.
- Complete Items 1 through 8 where applicable.

1. COUNTY Apache BOOK/MAP/PARCEL 203 - 78 - 001 ACCOUNT NUMBER _____

2. PROPERTY ADDRESS OR LEGAL DESCRIPTION 897 Hillcrest Circle, St. Johns, Arizona

3. TYPE OR PRINT OWNER'S NAME AS LISTED ON TAX ROLL
Hillcrest Duplexes, LP
1512 N. Oak Street
Tempe AZ 85281

4. MAIL DECISION TO:
Frazer Ryan Goldberg & Arnold LLP
3101 N. Central Ave., Ste. 1600
Phoenix AZ 85012

5. COMPLETED BY: (Owner, Agent, or Attorney) Michael P. Killion
Frazer Ryan Goldberg & Arnold LLP
3101 N. Central Ave., Ste. 1600, Phoenix, AZ 85012 (602) 277-2010
 TELEPHONE NUMBER

AGENTS ONLY: State Board of Appraisal # 2012033 SBOE # _____ (Pima and Maricopa Counties Only)

6. **BASIS FOR THIS PETITION:** Additional documents submitted must contain the book, map and parcel number or tax roll number and be attached to the petition. Evidence contained in this appeal could be the basis for either increasing or decreasing the valuation, changing the classification, or no change. THIS PETITION IS BASED ON THE FOLLOWING METHOD(S) OF VALUATION: MARKET COST INCOME
Error in Failing to account for the legal restrictions on the Subject Property. The Notice of Claim includes APN(s) 203-78-001 thru 013. The requested correction includes the total value of all 13 parcels.

7. TAX OFFICER'S PROPOSED CORRECTION

2009	LEGAL CLASS	4	LAND FCV:	
			IMPS. FCV:	
TAX YEAR	ASSMT. RATIO	10	TOTAL FCV	1,622,675
			TOTAL LPV:	1,457,523
	LEGAL CLASS		LAND FCV:	
			IMPS. FCV:	
TAX YEAR	ASSMT. RATIO		TOTAL FCV:	
			TOTAL LPV:	
	LEGAL CLASS		LAND FCV:	
			IMPS. FCV:	
TAX YEAR	ASSMT. RATIO		TOTAL FCV:	
			TOTAL LPV:	

OWNER'S OPINION OF VALUE

2009	LEGAL CLASS	4	LAND FCV:	
			IMPS. FCV:	
TAX YEAR	ASSMT. RATIO	10	TOTAL FCV:	518,037
			TOTAL LPV:	518,037
	LEGAL CLASS		LAND FCV:	
			IMPS. FCV:	
TAX YEAR	ASSMT. RATIO		TOTAL FCV:	
			TOTAL LPV:	
	LEGAL CLASS		LAND FCV:	
			IMPS. FCV:	
TAX YEAR	ASSMT. RATIO		TOTAL FCV:	
			TOTAL LPV:	

8. I hereby request that the proposed correction described above be reviewed by the County or State Board of Equalization and that the Board consider the provided information in making its determination. I hereby affirm that the information included or attached is true and correct.

IN PIMA AND MARICOPA COUNTIES ONLY:
 Check here if you want this appeal to be heard on the record and submit any additional written or typed information with this form. This means that neither you nor the assessor will appear in person before the State Board of Equalization to offer oral testimony.

Michael P. Killion 5/28/2013
 SIGNATURE OF PROPERTY OWNER OR REPRESENTATIVE DATE

BOARD OF EQUALIZATION DECISION	FULL CASH VALUE \$ _____	LIMITED PROPERTY VALUE \$ _____	LEGAL CLASS	ASMT RATIO
BASIS FOR DECISION: <u>This will not be heard by the BOE due to receiving it 154 days after the notice of claim, date of 1/2/13</u>				
	DATE RECEIVED <u>6/4/13</u>	DATE DECISION MAILED <u>6/18/13</u>	CHAIRMAN OR CLERK OF THE BOARD <u>[Signature]</u>	

DOR 82179C-1 (03/09)

Based on testimony of Assessors office, deny claim with right to appeal to tax court

mailed 10/5/13





BOARD OF SUPERVISORS' AGENDA ITEM REVIEW FORM

Submitter's Name: Round Valley Road Yard

Date: 10/15/2013

Signature: _____

Describe in detail what you want to say to the Board and what action you want the Board to take:

Request discussion and possible approval to hire Tyson Koch in the Round Valley Road Yard. Mr. Koch will be assigned the duties of Road Worker II. Mr. Koch is the husband of road yard secretary, Susan Koch. Mr. and Mrs. Koch will not supervise each other, so there will not be an issue of violation of statutes with this hiring.

Date & Time Needed: _____

Review Routing: //Legal//Finance//Purchasing//Human Resource//Other: _____

Legal Review: see attached memo from Joe Young County ^{Deputy} Atty

Signature: _____

Finance Review: _____

Signature: _____

Purchasing Review: _____

Signature: _____

Human Resources Review: _____

Signature: _____

Other Review: _____

Signature: _____

Reviews completed, item approved for Agenda. Supervisors/Board Clerk's Initials _____

BOARD ACTION TAKEN

//Approved //Disapproved //Deleted //Continued to: _____

Signature Clerk of Board

Tamie Herrick

From: Glenn Joy
Sent: Tuesday, October 01, 2013 7:14 AM
To: Ferrin Crosby
Subject: FW: Employment of Husband and Wife in Same Department

Ferrin,

Karen asked me to forward this for your review.

Glenn Joy
H.R. Specialist
Apache County Human Resources
P O Box 989, St. Johns, AZ 85936
928-337-7594 – 928-337-7606 (fax)

From: Joe Young [mailto:J.Young@apachelaw.net]
Sent: Thursday, September 26, 2013 2:54 PM
To: Glenn Joy
Cc: whiting@frontiernet.net
Subject: Employment of Husband and Wife in Same Department

Glenn,

During our call today, you asked me to give you an opinion of whether a husband and wife may be employed in the same department. In your specific example, the wife is employed as a secretary in a department. Her husband then recently interviewed for a separate and distinct position within the same department and was considered the most qualified applicant.

I should state as a preliminary matter that a spouse cannot legally work in a supervisory relationship over the other spouse. However, in the situation you present, neither spouse will have any ability to control or supervise the other. This situation is governed by H.R. Policy 1.26, which states:

No person shall be allowed to work in any position that is supervised by a relative as described in A.R.S. § 38-502. This statute defines a relative as a spouse, child, child's child, parent, grandparent, brother or sister of the whole or half blood and their spouses and the parent, brother, sister or child of a spouse. No person shall be allowed to work in the same department as his or her spouse.

Nonetheless, the section of the policy stating that no person shall be allowed to work in the same department as his or her spouse is not mandated by law, but merely County policy. As policy adopted by the Board, the Board can also make exceptions to this, and often does. Because this is common practice, my proposed changes to the H.R. manual include a clarifying statement in this section that spouses shall not work in the same department "absent Board approval."

In sum, spouses may never work in a situation where one has a supervisory role over the other. Spouses may not work in the same department unless the hiring is approved by the Board of Supervisors.

I hope this answers your question. Please let me know if you need any clarification, or have additional questions.



Submitter's Name: DISTRICT II

Date: 10/08/13 Signature: _____ verbal per Supervisor White _____

Describe in detail what you want to say to the Board and what action you want the Board to take:

District II request authorization to create a Facility Construction Worker II position and fill vacancy.

Date & Time Needed: _____

Review Routing: / /Legal/ /Finance/ /Purchasing/ /Human Resource/ /Other: _____

Legal Review: _____

Signature: _____

Finance Review: _____

Signature: _____

Purchasing Review: _____

Signature: _____

Human Resources Review: _____

Signature: _____

Other Review: _____

Signature: _____

Reviews completed, item approved for Agenda. Supervisors/Board Clerk's Initials _____

BOARD ACTION TAKEN

//Approved / /Disapproved / /Deleted / /Continued to: _____

Signature Clerk of Board



BOARD OF SUPERVISORS' AGENDA ITEM REVIEW FORM

Oct. 15th

Submitter's Name: Ferrin Crosby

Engineering

Date:

Signature:

James Herne

Describe in detail what you want to say to the Board and what action you want the Board to take:

Request approval to remove Kenny Calloway from probationary status, with the 2.5% end of probation increase effective Oct. 8, 2013

Dist III

Job RV

Roadyard

Date & Time Needed:

Review Routing: //Legal//Finance//Purchasing//Human Resource//Other: _____

Legal Review: _____

Signature: _____

Finance Review: _____

Signature: _____

Purchasing Review: _____

Signature: _____

Human Resources Review: _____

Signature: _____

Other Review: _____

Signature: _____

Reviews completed, item approved for Agenda. Supervisors/Board Clerk's Initials _____

BOARD ACTION TAKEN

//Approved //Disapproved //Deleted //Continued to: _____

Signature Clerk of Board

BOARD OF SUPERVISOR'S AGENDA ITEM REVIEW FORM

date/time stamp

Submitter's Name: (Individual, Organization, or County Department)

DALAE HAUSER ENGINEERING

Date/Signature: 10/2/13

Describe in detail what you want to say to the Board and what action you want the Board to take:

REQUEST AUTHORIZATION TO AWARD PROPOSAL CONTRACT FOR DISTRICT II JANITORIAL SERVICES

BOS Meeting Date Requested

PRE-AGENDA ITEM REVIEW

Review Routing / /Legal / /Finance / /Purchasing / /Human Resource / /Other:

Legal Review:

Signature:

Finance Review:

Signature:

Purchasing Review:

Signature:

Human Resources Review:

Signature:

Other Review:

Signature:

Reviews completed, item approved for Agenda.

Supervisor/Board Clerk's Initials

BOARD ACTION TAKEN

/ /Approved / /Disapproved / /Deleted / /Continued to:



BOARD OF SUPERVISORS' AGENDA ITEM REVIEW FORM

Submitter's Name: Ferrin Crosby Engineering

Date: 10/15/13 Signature: J. Herrero

Describe in detail what you want to say to the Board and what action you want the Board to take:

Request authorization to enter into an Intergovernmental Agency Agreement between Apache County and Pinal County for their annual Safety Rodeo event, Thursday Nov. 7, 2013

Date & Time Needed:

Review Routing: //Legal//Finance//Purchasing//Human Resource//Other:

Legal Review: IGA being reviewed by Joe Young AH 9/30/13

Signature:

Finance Review:

Signature:

Purchasing Review:

Signature:

Human Resources Review:

Signature:

Other Review:

Signature:

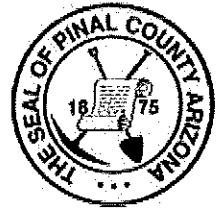
Reviews completed, item approved for Agenda. Supervisors/Board Clerk's Initials

BOARD ACTION TAKEN

//Approved //Disapproved //Deleted //Continued to:

Signature Clerk of Board

INTERGOVERNMENTAL AGENCY AGREEMENT



THIS AGREEMENT is entered into this _____ Day of _____ 2013, by and between Pinal County, a political subdivision of the state of Arizona, hereinafter referred to as "County", and the _____, of _____, a Department within the State of Arizona, or political subdivision thereof, hereinafter referred to as "Participating Agency."

Witnesseth:

WHEREAS, Pinal County conducts an annual Safety Roadeo to encourage the safe operation of equipment by its employees; and,

WHEREAS, Pinal County may have availability to accommodate additional participants in the Safety Roadeo and may allow qualified employees from other agencies within the State of Arizona, to participate in the Roadeo; and,

WHEREAS, Participating Agency has desire for its employee(s) to participate in the County's Safety Roadeo when availability permits; and,

WHEREAS, the parties are authorized to enter into intergovernmental agreements for purposes contemplated herein, pursuant to A.R.S. § 11-952 *et. seq.*

NOW, THEREFORE, the participants to this agreement agree as follows:

1. Participating Agency shall permit only qualified employees to attend the Safety Roadeo. In order to be qualified, the employee must:
 - a. Have a valid Arizona Driver's License AND any/all permits, licenses and /or training to operate such equipment he/she is to operate during the Safety Roadeo in compliance with State and Federal laws governing the operation of such equipment;
 - b. Complete and sign the registration form provided by County to indicate supervisor's verification that employee is trained and/or licensed on the equipment registered to operate during the Safety Roadeo.
2. County may, in its sole discretion, disqualify any participant who fails to conduct himself/herself in a safe and professional manner.
3. Participating Agency shall, to the extent permitted by law, indemnify, defend and hold harmless Pinal County, its officers, departments, employees and agents from and against any and all suits, actions, legal or administrative proceedings, claims, demands, or damages of any kind or nature which results from any act or omission of Agency, its agents, employees or anyone acting under its direction, control or on its behalf unless due solely to County negligence.
4. Participating Agency shall reimburse County for costs incurred for Agency's employees participating, in the amount set forth on the registration form, which may vary annually.

5. This IGA shall be effective as of the signature date of the last party to sign this IGA, and shall remain in effect unless and until terminated by either party for any reason, upon 30 days' written notice to the other party.

IN WITNESS WHEREOF, the parties have executed this Agreement as of the last date set forth below their representatives' respective signatures.

THE _____ OF _____,
an Arizona municipal corporation

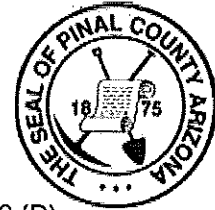
PINAL COUNTY,
a political subdivision of the State of Arizona,

By: _____
_____, Chairperson

By: _____
Steve Miller, Chairman
Board of Supervisors

ATTEST:

_____, City Clerk



Pursuant to A.R.S. § 11-952 (D)
the undersigned attorney has
reviewed the Intergovernmental
Agreement between Pinal
County and _____
and determined that it is in proper
form and within the powers and authority
granted to _____
Under the laws of Arizona.

Pursuant to A.R.S. §11-952 (D)
the undersigned attorney has
reviewed the Intergovernmental
Agreement between Pinal
County and _____
and determined that it is in proper
form and within the powers and authority
granted to _____
Under the laws of Arizona.

PINAL COUNTY ATTORNEY
James P. Walsh

Attorney for _____

Pinal County Deputy Attorney

Date

Date

BOARD OF SUPERVISOR'S AGENDA ITEM REVIEW FORM

date/time stamp

Submitter's Name: Apache County Sheriff's Office

Date/Signature: [Signature] 9-30-13

Describe in detail what you want to say to the Board and what action you want the Board to take:

Discussion and approval of Intergovernmental agreement between the City of St. Johns and the Apache County Sheriff's Office to provide police protection for the City of St Johns pursuant to A.R.S 9-498

BOS Meeting Date Requested 10/15/2013

PRE-AGENDA ITEM REVIEW

Review Routing / /Legal / /Finance / /Purchasing / /Human Resource / /Other: _____

Legal Review: _____

Signature: _____

Finance Review: _____

Signature: _____

Purchasing Review: _____

Signature: _____

Human Resources Review: _____

Signature: _____

Other Review: _____

Signature: _____

Reviews completed, item approved for Agenda. Supervisor/Board Clerk's Initials _____

BOARD ACTION TAKEN

/ /Approved / /Disapproved / /Deleted / /Continued to: _____

Signature Clerk of Board _____

INTERGOVERNMENTAL AGREEMENT
PROVISION OF LAW ENFORCEMENT OFFICERS
BY AND BETWEEN
APACHE COUNTY AND CITY OF ST. JOHNS, ARIZONA

This Agreement is entered into on the 12th day of September, 2013 pursuant to A.R.S. §11-951, et seq., between the following public agencies for joint exercise of their powers;

1. Apache County Sherriff's Office by and through the Apache County Board of Supervisors ("County")
2. City of St. Johns Police Department by and through the Mayor and City Council of City of St. Johns, Arizona ("City").

Authority to carry on the activities included in this Agreement is found in the Arizona revised Statues as follows:

<u>AGENCY</u>	<u>STATUTES</u>
County	A.R.S. § 11-201
City	A.R.S. §9-498 ¹

The purpose of this Agreement is to provide badly needed law enforcement personnel to assist the St. Johns Police Department given the City's current situation in which the City is understaffed and without sufficient law enforcement personnel to adequately perform its duties to the public without causing an undue burden on the remaining police officers and incurring extreme expense through overtime payments.

WHEREFORE, the parties agree:

- I. That Apache County Sheriff's Department will allow City to hire, as temporary employees, off-duty deputies employed with the Sherriff's Department.
- II. The City and the County agree that off-duty deputies may provide the services discussed herein on the following terms and conditions:
 - A. City will make requests for additional man-hours to be provided by Apache County Sheriff Personnel. County will make deputies aware of the opportunity, and notify City of the deputies to be providing such services.

¹ 9-498. Authority for county to furnish services to city or town
The governing body of an incorporated city or town, and the county board of supervisors of the county in which such city or town is located, may enter into an agreement whereby:

1. The county shall furnish part-time or full-time police protection to persons and property within the boundaries of such city or town, or any part thereof, as provided for in the agreement.
2. The incorporated city or town that contracts for and receives any of the services provided under the provisions of paragraph 1 shall pay to the county the amount agreed to be paid to the county for furnishing such services.

- B. Off-Duty County Deputies who perform services for the City of St. Johns shall keep a record of all time spent on duty for the City and shall provide a copy of all such hours to the City Manager for payment along with a certification signed by the officer that such hours are true and correct.
- C. City will pay County in the amount of each individual Deputy's overtime salary plus Employee related expenses per hour for all time provided by any County deputy. Money shall be paid to Apache County finance, upon receipt of a billing statement from Apache County Sheriff's Office, who will then pay such amounts to the deputies..
- III. Any property relating to this Agreement shall remain property of the current owner, and upon termination of this agreement, any funds and property shall remain with the party in possession of same.
- IV. This Agreement may be terminated by either party at any time.
- V. The parties acknowledge the applicability of the provisions of A.R.S. §38-511 which provides for the cancellation of contracts due to conflicts of interests.
- VI. The parties hereto agree that in the event of a conflict or dispute between them regarding the interpretation or implementation of this Agreement, that they will submit the matter to a qualified mediator to be agreed upon by the parties before filing any action in any court of this state or in federal court. The parties shall equally share the cost of the mediator, however, each party shall bear the costs of its presentation before the mediator, including attorney fees if the party desires to be represented by counsel at the mediation.
- VII. The County and the City certify, by signing this Agreement, that neither party is involved with any business operations in Sudan pursuant to A.R.S. § 35-391.06, nor is either party involved with business operations relating to the Iran petroleum energy sector, as covered by A.R.S. § 35-393.06.
- VIII. Written notice shall be provided by sending the notice by first class mail to:

For the County:

Apache County Board of Supervisors
P.O. Box 428
St. Johns, Arizona 85936

For the City:

St. Johns City Council
P.O. Box 455
St. Johns, Arizona 85936

IN WITNESS WHEREOF, the parties provide the following resolutions of approval:

Apache County, Arizona

City of St. Johns

By: _____
Tom White, Chairman
Apache County Board of Supervisors

By: _____
Ryan Patterson, Mayor
City of St. Johns, AZ.

BOARD OF SUPERVISOR'S AGENDA ITEM REVIEW FORM

date/time stamp

Submitter's Name: (Individual, Organization, or County Department)

Date/Signature: 10-9-13 *Dean Gager*

Describe in detail what you want to say to the Board and what action you want the Board to take:

Request Sheriffs Office request approval to ~~submit~~ bids for lease/purchase agreements on 12 fully equipped patrol vehicles,

BOS Meeting Date Requested 10-15-13

PRE-AGENDA ITEM REVIEW

Review Routing / /Legal / /Finance / /Purchasing / /Human Resource / /Other:

Legal Review:

Signature:

Finance Review:

Signature:

Purchasing Review:

Signature:

Human Resources Review:

Signature:

Other Review:

Signature:

Reviews completed, item approved for Agenda. Supervisor/Board Clerk's Initials

BOARD ACTION TAKEN

/ /Approved / /Disapproved / /Deleted / /Continued to:

Signature Clerk of Board

Beth Bond

From: Karen Houston
Sent: Tuesday, October 08, 2013 7:29 AM
To: 'bbond@co.apache.az.us'
Subject: FW: Agenda item

Karen S. Houston
Director, Human Resources
PO Box 989
St. Johns, AZ 85936

928-337-7534
928-337-7606 (Fax)

From: Delwin P. Wengert
Sent: Wednesday, October 02, 2013 7:16 AM
To: Karen Houston
Subject: RE: Agenda item

The following is what I suggest should be considered:

Discussion and possible approval of deferring all requests for merit increases to the budget process for fiscal year 2014/2015. All requests would be considered in conjunction with the budget for each Department or Elected Official. The Board of Supervisor's would approve/disapprove these requests during the public hearing for the approval of the Final Budget in August of 2014.

Delwin Wengert
Apache County Manager
(928) 337-7503 Work
(928) 245-4979 Mobile

From: Karen Houston
Sent: Wednesday, October 02, 2013 6:54 AM
To: Delwin P. Wengert
Subject: RE: Agenda item

It was just a draft as I had stated in the email.

Karen S. Houston
Director, Human Resources
PO Box 989
St. Johns, AZ 85936

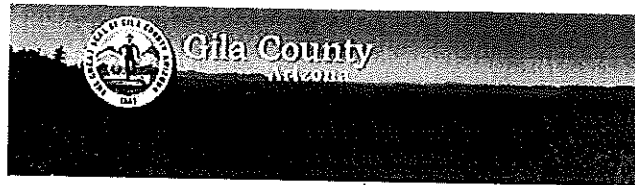
928-337-7534
928-337-7606 (Fax)

Bonnie Stallings

From: Penny Adams <pennya@countysupervisors.org>
Sent: Thursday, July 25, 2013 10:17 AM
Subject: REGISTRATION OPEN for CSA's Ninth Annual Legislative Summit
Attachments: 2013 Summit Hotels Sheet.pdf; save the date - Payson - Natural Bridge 9th Annual.pdf
Importance: High

**CSA's Ninth Annual Legislative Summit
October 14 —16, 2013**

◆
**Hosted by Gila County
in Payson, Arizona**



To prepare for the 2014 legislative session, county officials will discuss important policy issues and legislative strategies at the Ninth Annual CSA Legislative Summit.

This year's Legislative Summit will take place in Payson, Arizona, on October 14 - 16, 2013, with Gila County as our host.

All are encouraged to participate.



Summit Registration: Please [click here](#) to register for the CSA Legislative Summit.

Hotel Room Reservations:

We have reserved a block of rooms at three hotels in Payson. The Mazatzal Hotel & Conference Center is where the Summit conference portion will take place. Please see the attached hotel sheet and the Hotels tab on the registration site for all the pertinent information for each hotel.

Mazatzal Hotel & Conference Center

Highway 87, Mile Marker 251

Payson, Arizona 85547

(928) 474-6044

<http://www.mazatzal-casino.com/index.php/hotel>

Majestic Mountain Inn

602 E. Highway 260
Payson, Arizona
(928) 474-0185
<http://www.majesticmountaininn.com/>

Best Western Payson Inn

8041 N. Beeline Hwy
Payson, Arizona
(928) 780-7234
<http://www.bestwesternpaysoninn.com/>

- Make hotel reservations directly with the hotel
- The room rate is different for each hotel
- The room block is held under the name of "County Supervisors Association of Arizona"
- Room block cut-off date is **Friday, September 13**. . . *please make your reservations early*

Events:

If there is enough interest, a golf event will be scheduled for Monday morning. We are also trying to schedule tours for various locations, either before or after the Summit. The information on the Summit Registration form for Pre-summit and Post-summit Events has been left blank for now. We will follow up with an e-mail after we have something confirmed.



We look forward to your participation in this year's Legislative Summit. It is the event of the year to form CSA's legislative policies and strategies.

Please feel free to contact us should you have any questions. Thank you.

Penny

Penny Adams
Director of Finance and County Services
County Supervisors Association of Arizona
1905 W. Washington St., Ste. 100
Phoenix, Arizona 85009
Ph 602.452.4502; Fax 602.595.8512
www.countysupervisors.org
PennyA@countysupervisors.org



County Supervisors
ASSOCIATION
of arizona

DRAFT AGENDA

2013 LEGISLATIVE SUMMIT AGENDA
MAZATZAL HOTEL AND CONFERENCE CENTER

Monday, October 14

- Morning
1:00 p.m. Golf (for those interested) —flyer to follow soon
Potential Tour of Tonto Natural Bridge State Park (for those interested)—
flyer to follow soon
5:00 p.m. Welcome Reception
6:30 p.m. - CSA Dinner and Introduction to the Summit
8:00 p.m. Speaker: TBD

Tuesday, October 15

- 8:00 a.m. Registration Begins
8:30 a.m. Welcome and Introductions
Summit Overview
Legislative Forecast and Budget Overview
Workgroup Session - Facilitated Policy Discussion
- 2013 Session Overview
- "Global" Priorities of the Organization
- Consideration of Legislative Proposals
12:30 p.m. Hosted Lunch
Speaker: The Honorable Janice K. Brewer
Governor, State of Arizona
1:30 p.m. Workgroup Session (continued)
5:00 p.m. Workgroup Session Ends for the Day
6:00 p.m. Dinner
Hosted by Gila County
Payson Rim Club
Speaker: TBD

Wednesday, October 16

- 7:30 a.m. Small County Caucus Breakfast
7:30 a.m. Medium County Caucus Breakfast
7:30 a.m. Large County Caucus Breakfast
9:00 a.m. Workgroup Session (continued) / Facilitated Policy Discussion
and Strategic Planning Meeting
CSA Board of Directors Meeting
Formal Board Action on Legislative Proposals
12:00 p.m. Potential End Time of Summit

(all events will be held at the Mazatzal Conference Center unless otherwise indicated)

Beth Bond

From: Melissa Buckley <Melissa.Buckley@navajocountyaz.gov>
Sent: Monday, October 07, 2013 12:00 PM
To: Delwin P. Wengert; Terry Cooper; Dan Field, LaPaz County Administrator; Don McDaniel (dmcdaniel@gilacountyaz.gov); James Jayne; Carlos Rivera; Deborah Kay Gale; Craig Sullivan; Yvonne Ortega
Cc: Beth Bond; Yvonne Pearson; Judy Dickerson; Marian Sheppard; Donna Hale; Melissa Buckley; Debra Chapman; Catrina Roe; Melinda Meek; cyoung@co.greenlee.az.us; Hunter Moore; Dawnafe Whitesinger; Sylvia Allen
Subject: October Small County Breakfast Forum
Attachments: Small County Invite 2013.docx

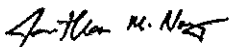
October 7, 2013

Dear County Supervisors/Managers,


Navajo County invites you to attend the October Small Counties Breakfast Forum on Wednesday, October 16, 2013 from 7:00 – 8:30 a.m. at the Ninth Annual County Supervisors Legislative Policy Summit, Mazatzal Hotel & Conference Center, Payson Arizona. Small Counties will be held in the Fireside Room.

A breakfast buffet will be served. Please [RSVP](#) to Melissa Buckley at (928-524-4153) by Friday, October 11 and also submit any agenda items you would like to include on the agenda for this meeting.

Sincerely,



Jonathan M. Nez, Chairman
Navajo County Board of Supervisors

Melissa W. Buckley 
Clerk of the Board of Supervisors
Navajo County Government
P. O. Box 668, Holbrook, AZ 86025
Direct Line: (928) 524-4153
Fax: (928) 524-4239
www.navajocountyaz.gov

Teamwork ♦ Accountability ♦ Integrity ♦ Excellence ♦ Innovation

 Find us on
Facebook

Beth Bond

From: Delwin P. Wengert
Sent: Wednesday, September 25, 2013 2:04 PM
To: Beth Bond
Subject: FW: ER Management Summit Teleconf re-scheduled

FYI

Delwin Wengert
Apache County Manager
(928) 337-7503 Work
(928) 245-4979 Mobile

From: Christiane Tso
Sent: Wednesday, September 25, 2013 2:01 PM
To: Delwin P. Wengert
Subject: RE: ER Management Summit Teleconf re-scheduled

Supervisor White has asked me to participate in this tele-conference..
The next meeting is tentative for October 18, 2 pm in Tuba City...

If Supervisor White is attending this meeting and as Supervisor Shirley stated he will be in attendance
A 24 hour notice will need to posted...

More info to come --- I will let you know as I get more directive.

NOTE: Requesting info will be forward to Chief Eagar for Emergency Management input/perspective.

From: Henrietta Notah
Sent: Wednesday, September 25, 2013 9:12 AM
To: Christiane Tso
Cc: Tom White
Subject: ER Management Summit Teleconf re-scheduled

Good Morning Christiane,

Attached is a notice about the teleconference this afternoon. Please see Supervisor's note. Thank you and have a nice day.

Henrietta