

AGENDA
MACON COUNTY BOARD FINANCE COMMITTEE
June 1, 2020 @ 5:15 P.M.

Macon County Office Building
141 SOUTH MAIN, ROOM 514
Decatur, IL 62523

Due to the COVID-19 pandemic and the Governor's Executive Orders, this meeting will be conducted in compliance with the Governor's Phase 3 Guidelines.

Only County Board members, certain County officers and County Board staff will be allowed to be physically present at the Board meeting, subject to the restriction that no more than 10 people may be gathered in the meeting room. All others may observe the County Board meeting via the live stream application described below.

Public comment will be permitted as described below.

The meeting will also be live streamed via the PodBean application. You may access the live stream at <https://maconcountyboard.podbean.com>. Alternatively, you may download the free PodBean app from the Apple App Store or Android Google Play store. If you follow the Macon County Board in the application you will receive a notification when the meeting goes live.

- I. Call to Order
- II. Roll Call
- III. Approval of Minutes of Prior Meeting(s)
- IV. Claims
- V. Reports
 - A. Audit Sub-Committee
 - B. Auditor
 - C. Board of Review
 - D. Supervisor of Assessments
 - E. GIS
 - F. Treasurer
Macon County Board Resolution to Execute Deeds to Convey Property on which Taxes were Delinquent
- VI. Citizen Remarks - Public Comment

Pursuant to the Governor's Executive Orders regarding pandemic response and social distancing and the Attorney General's Public Access Bureau Opinion 2020 PAC 62329, public comment will be allowed via email submissions. Submissions must be received by the County Board at the email address jdurham@co.macon.il.us no later than 2 hours before the scheduled start time of the meeting. Comments received will be read into the record at the meeting.

VII. Old Business

VIII. New Business

Macon County Board Resolution to Approve Lease Renewal Agreement with Senator Andy Manar

Macon County Board Resolution Adopting a Plan for Managing General Fund Revenue Shortfalls Resulting from the COVID-19 Pandemic

IX. Closed Session

X. Next Regular Meeting – 6/29/2020

XI. Adjournment

**MACON COUNTY BOARD RESOLUTION
TO EXECUTE DEEDS TO CONVEY PROPERTY
ON WHICH TAXES WERE DELINQUENT**

RESOLUTION NO. G-

WHEREAS, the County of Macon has undertaken a program to collect delinquent taxes and to perfect titles to real property in cases where the taxes on same have not been paid pursuant to 35 ILCS 200/21-90; and

WHEREAS, pursuant to this program the County of Macon, as Trustee for the taxing districts involved, has acquired an interest in the real estate described in the attachment to this resolution; and

WHEREAS, it appears to the Macon County Board that it would be to the best interest of the taxing districts of Macon County to dispose of this interest in said property.

NOW, THEREFORE, BE IT RESOLVED by the Macon County Board that the Chairman of the Macon County Board is hereby authorized to execute a deed of conveyance of the county's interest, authorization, or the cancellation of the appropriate certificate of purchase as the case may be on the following real estate for the sums shown on the attachment and to be disbursed as shown and according to law.

BE IT FURTHER RESOLVED by the Macon County Board that this resolution shall become effective upon the adoption thereof.

PRESENTED, PASSED, APPROVED the 11th day of June, 2020.

AYES _____ NAYS _____

MACON COUNTY BOARD
MACON COUNTY, ILLINOIS

ATTEST:

BY:

Josh A. Tanner, Clerk for the
County of Macon, State of Illinois

Kevin R. Greenfield, Chairman
Macon County Board

RES#	Account	Type	Account Name	Parcel#	Township	Total Collected	County Clerk	Auctioneer	Recorder/ Sec of State	Agent	Treasurer
06-20-001	1019016B	SAL	FANNIE COLE	04-12-10-156-027	DECATUR	2,650.50	0.00	25.00	63.00	687.50	1,875.00
06-20-002	1019105B	SAL	THOMAS E WALKER	04-12-15-202-003	DECATUR	28,418.00	0.00	280.00	63.00	7,050.00	21,000.00
06-20-003	1018016B	DEF-SA	JEWELL L RICHMOND	04-12-10-210-007	DECATUR	1,821.00	0.00	0.00	0.00	612.16	1,208.84
06-20-004	1019019B	DEF-SA	COME UNT0 ME EVANGELISTIC MINISTRIES	04-12-10-210-002	DECATUR	956.00	0.00	0.00	0.00	245.86	710.14
06-20-005	1019043B	DEF-SA	COME UNT0 ME EVANGELISTIC MINISTRIES	04-12-11-152-007	DECATUR	1,113.00	0.00	0.00	0.00	285.15	827.85
06-20-006	1019107B	DEF-SA	COME UNT0 ME EVANGELISTIC MINISTRIES	04-12-15-229-009	DECATUR	1,323.00	0.00	0.00	0.00	337.65	985.35
06-20-007	1019108B	DEF-SA	COME UNT0 ME EVANGELISTIC MINISTRIES	04-12-15-229-010	DECATUR	750.00	0.00	0.00	0.00	456.90	293.10
06-20-008	1019109B	DEF-SA	COME UNT0 ME EVANGELISTIC MINISTRIES	04-12-15-229-015	DECATUR	750.00	0.00	0.00	0.00	456.90	293.10
06-20-009	1019114B	DEF-SA	COME UNT0 ME EVANGELISTIC MINISTRIES	04-12-15-353-008	DECATUR	826.00	0.00	0.00	0.00	292.83	533.17
06-20-010	1019132B	DEF-SA	COME UNT0 ME EVANGELISTIC MINISTRIES	07-07-33-301-019	HICKORY POINT	750.00	0.00	0.00	0.00	456.90	293.10
06-20-011	1019133B	DEF-SA	COME UNT0 ME EVANGELISTIC MINISTRIES	07-07-33-302-002	HICKORY POINT	838.00	0.00	0.00	0.00	216.40	621.60
06-20-012	201500522	DEF-RE	DONALD ELLIS	04-12-13-114-001	DECATUR	633.00	0.00	0.00	0.00	298.72	334.28
06-20-013	201500537	DEF-RE	MONICA DAWSON	04-12-13-153-003	DECATUR	1,004.00	0.00	0.00	0.00	379.14	624.86
Totals						\$41,832.50	\$0.00	\$305.00	\$126.00	\$11,776.11	\$29,600.39

Clerk Fees \$0.00
 Recorder/Sec of State Fees \$126.00
 Total to County \$29,726.39

Committee Members

**Macon County Board Resolution
to Approve Lease Renewal Agreement
with Senator Andy Manar**

RESOLUTION NO. G-

WHEREAS, the Decatur Public Building Commission ("DPBC"), was formed pursuant to the Public Building Commission Act (50 ILCS 20/ 1 et seq.), and is the owner of the building located at 141 S. Main Street, Decatur, Illinois; and

WHEREAS, pursuant to 50 ILCS 20/14 (h) of the Act, the DPBC is authorized "to rent all or any part...of such building...to any branch, department, or agency of the State or Federal Government..."; and

WHEREAS, the County of Macon, through the Macon County Board, leases from the Decatur Public Building Commission the building at 141 S. Main Street, Decatur, Illinois; and

WHEREAS, the Macon County Board has excess space located at Room 502 of the said building, consisting of approximately 630 square feet, and desires to sub-lease to Senator Andy Manar such excess space; and

WHEREAS, attached hereto is a standard District Office Lease and District Office Lease Attachment, prepared by the Illinois General Assembly, for the purposes of sub-leasing the proposed building space to Senator Andy Manar; and

WHEREAS, Senator Andy Manar has agreed to operate this office in accordance with 5 ILCS 430/Art. 5; and

WHEREAS, such lease agreement has been reviewed and approved by the Macon County Board Operations & Personnel Committee on May 26, 2020 & Finance Committee on June 1, 2020 and has been recommended for approval; and

NOW, THEREFORE, BE IT RESOLVED by the Macon County Board, on behalf of the County of Macon, Illinois, that said County Board does hereby approve the lease of Room 502 of 141 S. Main Street, Decatur, Illinois, to Senator Andy Manar for the purpose of a State Legislative District Office in accordance with the rules of the Illinois General Assembly Compensation Act, 25 ILCS 115/1, et seq. on Standards of Official Conduct, at the rate of \$500.00 per month, for a period not to extend beyond and to commence on a date acceptable to the sub-tenant, all pursuant to the attached lease agreement.

BE IT FURTHER RESOLVED by the Macon County Board that the County Board Chairman shall be authorized to execute the attached lease documents.

**REAL ESTATE LEASE FORM
DISCLOSURE STATEMENT**

**THIS STATEMENT MUST BE COMPLETED BY THE LESSOR AND SIGNED BY
AN OWNER, AUTHORIZED TRUSTEE, CORPORATE OFFICIAL, OR MANAGING AGENT**

You are required by Illinois Law to complete this form (50 ILCS 105/3.1) The purpose of this form is to determine all of the name(s) of the owner(s) and beneficiary having any interest in the property real or personal of the leased premises. Furthermore, you must disclose the names of any shareholders entitled to receive more than 7 1/2% of the total distributable income of any corporation with an interest in the lease. **FAILURE TO ACCURATELY PROVIDE ALL INFORMATION REQUESTED ON THIS FORM AND TO PROVIDE UPDATED INFORMATION WITHIN 30 DAYS OF ANY CHANGE OF OWNERSHIP MAY RESULT IN A MATERIAL BREACH OF THE LEASE AND/OR CRIMINAL SANCTIONS.**

I A. Address of Premises Room 502, 141 S. Main St.
Deeratur IL 62523

II INDICATE LESSOR'S INTEREST IN PROPERTY BY CHECKING ALL APPLICABLE BOXES AND COMPLETING PARAGRAPH(S) AS INSTRUCTED. IF ADDITIONAL SPACE IS NEEDED TO PROVIDE THIS INFORMATION, PLEASE ATTACH A SEPARATE SHEET TO THIS FORM.

FEE SIMPLE (SOLE OWNER, JOINT TENANTS, TENANTS BY THE ENTIRETY, TENANTS IN COMMON)

INSTRUCTIONS: PLEASE LIST NAMES OF ALL OWNERS.

LEASE HOLDER OR SUBLESSEE

INSTRUCTIONS: PLEASE LIST THE NAMES OF THE LESSOR (AND LESSEE IF YOU ARE A SUBLESSEE). PLEASE INDICATE THE BEGINNING AND ENDING DATES OF TERM OF LEASE OR THE SUB-LEASE.

LAND TRUST OR OTHER TRUST

INSTRUCTIONS: PLEASE LIST THE COMPLETE NAME AND NUMBER OF TRUST AND TRUSTEE'S ADDRESS AND NAMES OF ALL BENEFICIARIES. IF THE PROPERTY IS HELD IN A LAND TRUST, YOU MUST ALSO COMPLETE A LAND TRUST BENEFICIAL INTEREST DISCLOSURE APPLICATION.

OPTION TO PURCHASE, CONTRACT TO PURCHASE OR SIMILAR INTEREST

INSTRUCTIONS: DESCRIBE YOUR INTEREST IN THE PROPERTY FULLY. PLEASE LIST THE PARTIES WHO CURRENTLY OWN THE REAL ESTATE.

OTHER (PLEASE DESCRIBE)

INSTRUCTIONS: LIST THE NAME OF ALL PARTIES WHO HAVE AN OWNERSHIP INTEREST IN THE PROPERTY.

LEASE FOR LEGISLATIVE DISTRICT OFFICE SPACE

THIS LEASE is made between

Macon County Board, 141 S. Main St, Decatur IL 62523
("LESSOR") (Name, Address, Zip Code)

and the Illinois Senate ("LESSEE") by its agent, State Senator Andy Manar
("SENATOR"), not individually but in his or her official capacity, pursuant to the General Assembly Compensation Act, 25 ILCS 115/1, et seq.

ARTICLE I. PREMISES AND TERM

1. From 7/1/2020 until 6/30/2021, LESSOR agrees to lease to LESSEE, for use as a state legislative district office, the following described premises (Street Address, City, Zip Code, Other Description):

Room 502, 141 S. Main St, Decatur IL 62523

Square Footage 630

ARTICLE II. RENT

1. LESSEE agrees to pay LESSOR as rent \$ 500 dollars per month, mailed to LESSOR at the above address. Payments to be made Monthly Quarterly Semi-Annually Annually, in advance.
2. Payment for obligations pursuant to the Lease shall be solely from sums appropriated to the Illinois General Assembly for such purposes pursuant to the General Assembly Compensation Act, 25 ILCS 115/1, et seq. Obligations of the State shall cease immediately without penalty or further payment being required if, in any fiscal year, the General Assembly fails to appropriate or otherwise make available funds for this Lease.

ARTICLE III. USE

1. LESSEE agrees that, during the term of this Lease, the above-described premises will be used as a legislative district office.

ARTICLE IV. POSSESSION

1. LESSEE shall be entitled to possession on the first day of the term of this Lease. Should LESSOR be unable to give possession on the first day of the term of this Lease, LESSEE shall not be liable for rent unless and until possession is delivered and rent shall be prorated from the date of occupancy.

ARTICLE V. UTILITIES

1. Utilities are the responsibility of LESSOR or LESSEE.

ARTICLE VI. IMPROVEMENTS & MAINTENANCE

1. Permanent improvements are the responsibility of LESSOR unless agreed to in a codicil, amendment, rider, or other written agreement signed by LESSOR and LESSEE.
2. LESSOR shall provide and maintain air conditioning and heating systems.
3. LESSOR shall be responsible for repairs to and maintenance of the interior of the premises, except for repairs to and maintenance of the LESSEE's personal property.
4. LESSOR shall be responsible for repairs to and maintenance of the exterior of the premises.

ARTICLE VII. TAXES & ASSESSMENTS

1. LESSOR shall pay all taxes and assessments, including, without limitation, property taxes, and effectuate payment by date due which may be levied or assessed upon or extended to the premises during the term of the lease.
2. LESSEE is not liable for the payment of any taxes or assessments, including, without limitation, property taxes, which may be levied or assessed upon or extended to the premises during the term of the lease.

ARTICLE VIII. HOLDING OVER

1. If, after the expiration of the term of this Lease, as provided in Article I of this Lease, LESSEE retains possession of the premises, this Lease shall continue in full force and effect on the same terms and conditions, except the Lease shall be on a month-to-month basis until terminated.

ARTICLE IX. TERMINATION

1. LESSEE/LESSOR may terminate the Lease by giving LESSOR/LESSEE thirty (30) days' written notice of intention to terminate the Lease.

ARTICLE X. NO CONFESSION OF JUDGMENT

1. LESSEE does not confess judgment in any suit brought in any court by virtue of executing this Lease.

ARTICLE XI. ESTOPPEL CERTIFICATES

1. Upon request of the LESSOR, LESSEE shall deliver an estoppel certificate with respect to this Lease, the terms of which shall be acceptable to and agreed upon by LESSOR and LESSEE.

ARTICLE XII. LIABILITY

1. LESSEE does not assume any liability for acts or omissions of the LESSOR and such liability rests solely with LESSOR.

ARTICLE XIII. COURT OF CLAIMS

1. Any claim or disputed issue arising out of this Lease must be filed exclusively with the Illinois Court of Claims.

ARTICLE XIV. INSURANCE

1. LESSOR shall maintain in full force and effect at its sole cost and expense but for the mutual benefit of LESSEE (i) an "all-risk" property insurance policy for the premises and personal property located in the premises in the amounts of the full replacement values thereof and (ii) a comprehensive general liability insurance policy on an occurrence basis with limits of not less than \$2,000,000 per occurrence.

ARTICLE XV. CERTIFICATIONS

1. Drug Free Workplace. LESSOR certifies that it will not engage in the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance in the performance of this Lease. *See* 30 ILCS 580/1, et seq.
2. Americans with Disabilities Act (ADA). The Americans with Disabilities Act and the regulations promulgated thereunder prohibit discrimination against persons with disabilities by the State, whether directly or through contractual agreements, in the provision of any aid, benefit, or service. As a condition of receiving this lease, LESSOR certifies that the premises and services provided under this lease are and will continue to be in compliance with the American with Disabilities Act. *See* 42 U.S.C. 12101; 28 CFR 35.130.
3. Forced Labor. LESSOR certifies that in accordance with the State Prohibition of Goods from Forced Labor Act that no foreign made equipment, materials, or supplies furnished to the State under the lease have been or will be produced in whole or in part by forced labor, convict labor, or indentured labor under penal sanction. *See* 30 ILCS 583/1, et seq.

4. Child Labor. LESSOR certifies that in accordance with the State Prohibition of Goods from Child Labor Act that no foreign made equipment, materials, or supplies furnished to the State under the lease have been or will be produced in whole or in part by the labor of any child under the age of 12. *See* 30 ILCS 584/1, et seq.
5. Environmental Barriers Act. This Lease is subject to the Environmental Barriers Act. *See* 410 ILCS 25/5(e).
6. Educational Loans. LESSOR certifies that neither it, nor any of its principals, is in default on an educational loan as provided in the Educational Loan Default Act. *See* 5 ILCS 385/3.
7. International Anti-Boycott Certification Act. LESSOR certifies that neither it, nor any of its principals or substantially-owned affiliated company is participating in or shall participate in an international boycott in violation of the provisions of the U.S. Export Administration Act of 1979 or the regulations of the U.S. Department of Commerce promulgated under that Act. *See* 30 ILCS 582/5.
8. Illinois Human Rights Act. LESSOR certifies that it is in compliance with all applicable provisions of the Illinois Human Rights Act and any rules adopted thereunder. *See* 775 ILCS 5/1-101, et seq.
9. Bribery. LESSOR certifies that neither it nor any of its principals has been convicted of bribery or attempting to bribe an officer or employee of the State of Illinois, nor have the LESSOR or its principals made an admission of guilt of such conduct which is a matter of record. *See* 30 ILCS 500/50-5.
10. Bid Rigging/Bid Rotating. LESSOR certifies that neither it, nor any of its principals, has been barred from contracting the State or a unit of local government as a result of a violation of Sections 5/33E-3 and 33E-4 of the Criminal Code of 1961. *See* 720 ILCS 5/33E-11.
11. Delinquent Payments. LESSOR certifies that it is not delinquent in the payment of any debt to the State. *See* 30 ILCS 500/50-11.
12. Disclosure and Potential Conflicts of Interest Statement. LESSOR certifies that the following persons or entities have an interest or distributive income share in LESSOR that is greater than either (i) 5% of the total interest or distributive income of LESSOR or its parent, or (ii) 60% of the Governor's annual salary, and LESSOR further certifies that notice has been given to LESSEE or SENATOR of any known potential conflict of interest that may arise under the Procurement Code, 30 ILCS 500/50-35. *Include name, address, and proportionate or dollar amount of share, as applicable.*

13. Real Estate Lease Form Disclosure Statement. **Attached form (2 pages) must be completed and notarized.**
14. Taxpayer Identification. Under penalties of perjury, LESSOR certifies that its correct Federal Taxpayer Identification Number (Social Security Number or Employer Identification Number) is 37-600-1309
15. Legal Status Disclosure. LESSOR is doing business as (please check one):

- | | |
|--|---|
| <input type="checkbox"/> Individual | <input type="checkbox"/> Tax-Exempt Hospital or Extended Care Facility |
| <input type="checkbox"/> Sole Proprietor | <input type="checkbox"/> Corporation Providing or Billing Medical and/or Health Care Services |
| <input type="checkbox"/> Partnership | <input type="checkbox"/> Corporation NOT Providing or Billing Medical and/or Health Care Services |
| <input checked="" type="checkbox"/> Governmental Entity | <input type="checkbox"/> Nonresident Alien Individual |
| <input type="checkbox"/> Estate or Legal Trust | <input type="checkbox"/> Foreign Corporation, Partnership, Estate or Trust |
| <input type="checkbox"/> Limited Liability Company | |
| <input type="checkbox"/> Disregarded Entity, <input type="checkbox"/> Corporation, or <input type="checkbox"/> Partnership (check one) | |
| <input type="checkbox"/> Other: _____ | |

ARTICLE XVI. GENERAL PROVISIONS

1. This lease is subject to all applicable laws of the State of Illinois.
2. No amendment, modification, or alteration of the terms hereof shall be binding unless agreed to in a codicil, amendment, rider, or other written agreement signed by LESSOR and LESSEE.
3. This person or agent is not my spouse, parent, grandparent, child, grandchild, aunt, uncle, niece, nephew, brother, sister, first cousin, brother-in-law, sister-in-law, mother or father-in-law, son-in-law or daughter-in-law. See 25 ILCS 115/4.2. The services performed were not in connection with any political campaign but were in connection with my legislative duties and responsibilities.

The parties express their mutual assent to the promises and covenants made herein:

LESSOR: Macon County

LESSEE: Illinois Senate

BY: _____
Signature of LESSOR's authorized agent

BY: State Senator
Signature of SENATOR

BY: Kevin R. Greenfield
Printed Name of LESSOR's authorized agent

BY: State Senator
Printed Name of SENATOR

DATED: June 11, 2020

DATED: _____

III **IF CORPORATION OR PARTNERSHIP HAS AN INTEREST IN THE LEASE, PLEASE COMPLETE THE APPROPRIATE PARAGRAPH**

CORPORATION - INSTRUCTIONS: PLEASE LIST

- 1. The names of the president and secretary: _____
- 2. The name and address of the registered agent: _____
- 3. The names of all shareholders entitled to receive more than 7 1/2% of the total distributable income of the corporation: _____
- 4. The name of the person (s) authorized to execute the contracts on behalf of the corporation : _____

NOTE: IN COMPLETING THIS SECTION, IF THERE IS NO READILY KNOWN INDIVIDUAL HAVING GREATER THAN 7 1/2% INTEREST IN THE CORPORATION AND THE CORPORATION IS PUBLICLY TRADED THEN THE REQUIREMENTS OF THE DISCLOSURE MAY BE MET BY SO STATING.

PARTNERSHIP - INSTRUCTIONS: PLEASE LIST

- 1. The names of all partners (include limited partners if applicable): _____
- 2. If limited partnership, the names and addresses of all general partners: _____

IV **THIS PARAGRAPH MUST BE COMPLETED BY ALL PARTIES**

ARE ANY OF THE PERSONS LISTED ABOVE ELECTED OR APPOINTED OFFICIALS, EMPLOYEES OF THE STATE OR THE SPOUSE OR MINOR CHILD OF SAME?

NO YES If "YES", explain employment and/or relationship.

*Macon County Board
Chairman*

V **THIS PARAGRAPH MUST BE COMPLETED BY ALL PARTIES**

I, Kevin R. Greenfield, state on oath or affirm that I am (title) Chairman of (firm/name) Macon County Board and that the disclosure made above is true and correct. I will provide any additional documentation requested by the State of Illinois. I further certify that Lessor has not bribed or attempted to bribe an officer or employee of the State of Illinois.

Signature _____ Date 6/11/2020
Chairman, Macon County Board
Title

NOTARY:

STATE OF ILLINOIS
COUNTY OF _____

I, _____, certify
that on _____, 20 12 _____,
personally appeared before me and swore or affirmed that he/she signed this
document as _____ of _____
and that the information provided was true and correct.

Notary Public _____ Commission Expires _____

**MACON COUNTY BOARD
RESOLUTION ADOPTING A PLAN
FOR MANAGING GENERAL FUND
REVENUE SHORTFALLS
RESULTING FROM THE COVID-19
PANDEMIC**

Resolution No.

WHEREAS, the COVID-19 crisis has had and continues to have a negative impact on the financial situation of Macon County and the duration of the crisis and amount of future impact is unknown; and

WHEREAS, it is the determination of this Board that flexibility is needed in response to this situation, and impacting the livelihood of its employees should be a last resort to deal with the financial situation; and

WHEREAS, it is the determination of this Board that certain procedures as described below should be implemented to safeguard the County's financial position during the crisis; and

NOW, THEREFORE, BE IT RESOLVED by the Macon County Board that it hereby recommends to each Macon County department and office that said departments and offices consider and make every attempt to abide by each of the below enumerated recommendations in order to safeguard the County's financial situation:

1. Each month, the Auditor shall develop an ongoing goal for reductions in expenses for the General Fund as a whole for the next month based on sales tax projections for the next month in addition to projections of reductions in general fund fees or other general fund revenue. This goal shall be communicated to all officeholders and department heads, with the Auditor providing a dollar amount in general fund expenses that should be reduced for that month for each office.
2. The officeholders and department heads will reduce expenses within their office for the next month to meet the goal provided by the Auditor, following the order listed below. Only when a step is insufficient to meet the goal shall the officeholder or department head move on to the next step.
 - a. Reduce non-payroll expenses.
 - b. Offer retirement packages where appropriate.
 - c. Move expenses to the Law Enforcement Safety Tax where appropriate and allowable.
 - d. Move expenses to other funds, restricted or unrestricted, that are available to the particular office where appropriate and allowable.
 - e. Explore options to reallocate the funding source for employee(s)' to other funds available to the particular office where appropriate and allowable.
 - f. Explore options for internal borrowing on a short-term basis to be repaid by 11/30/2020.
 - g. Offer voluntary furloughs with health insurance.

- h. Offer voluntary furloughs without health insurance.
 - i. Mandatory furloughs with health insurance coverage.
 - j. Layoffs.
3. Each officeholder or department head will report its planned reduction in expenses to the Auditor. Each officeholder or department head shall include a description of the action taken, the amount of savings anticipated, the duration of the savings (i.e. one-time, or recurring monthly, etc.), and long-term costs (e.g. unemployment and training costs).
 4. Once savings are sufficient to meet the goal, the Auditor will report details of the reductions to the Finance Committee and the full County Board at their monthly meetings.
 5. Any shortfalls in revenue or additional savings beyond the revenue loss shall be rolled over into the next month's projections.
 6. The process repeats each month until the end of the Fiscal Year or until Illinois reaches the final phase in the Restore Illinois plan outlined by the Governor.

BE IT FURTHER RESOLVED that this resolution shall become effective upon the adoption thereof.

PRESENTED, PASSED, and APPROVED this 11th day of June, 2020.

AYES _____ NAYS _____

MACON COUNTY BOARD
MACON COUNTY, ILLINOIS

ATTEST:

BY:

Josh Tanner
Macon County Clerk

Kevin R. Greenfield
Chair

