COFFEE CREEK ELEMENTARY SCHOOL DISTRICT

REGULAR MEETING OF THE BOARD OF TRUSTEES AGENDA

Coffee Creek Elementary School Play Group Room……Thursday, August 15, 2024
Coffee Creek Road Business Meeting 3:30 PM
Coffee Creek, California .....

In compliance with Government Code Section 54954.2(a), the Coffee Creek School District will, on request, make this agenda available in appropriate alternative formats to persons with a disability, as required by Section 202 of the Americans with Disabilities Act of 1990 (42 U.S.C. Sec. 12132), and the federal rules and regulations adopted in implementation thereof. Individuals who need this agenda in an alternative format or who need a disability-related modification or accommodation to participate in the meeting should contact Tim Nordstrom at 530-623-2861.

All CCESD Board of Trustee Meeting Agendas are posted at the following locations: Coffee Creek School, C.C. Fire Station mailboxes, and the Trinity County Office of Education. All regularly scheduled Board of Trustees meetings are scheduled at 3:30 PM on the second Thursday of each month at Coffee Creek Elementary School; Special meetings are to be called as necessary. Board agenda documents are available for inspection 72 hours before each Regular Board meeting and 24 hours before Special Board meetings at the Coffee Creek Elementary School located at 4470 Coffee Creek Road, Coffee Creek.

Board member Cindy Braman will be teleconferencing from 499 Alabama St., San Francisco, CA 94110

Join Zoom Meeting
https://zoom.us/j/99484582355?pwd=wZww9bFqBVJWpQ3pU54j4fv9Wf4LcE.1
Meeting ID: 994 8458 2355
Passcode: eQK6q4

One tap mobile
+1 (669)900-9128, 99484582355#,,,,*167817# US (San Jose)

School District Governing Board:

Peter Kleinsmith, Board Clerk
Suzanne Conrad
Cindy Braman - Teleconferencing into meeting

1.0 Formal Opening

1.1 Call to Order
1.2 Flag Salute
1.3 Additions or Changes in Agenda

2.0 Accept Open Session Agenda

3.0 Comments from the Public on Open Session Agenda-

Persons wishing to address the Board on any item except personnel on the agenda or on items that are within the jurisdiction of the Board and are not on the agenda are invited to do so at the time. In the interest of time and order, presentations from the public are limited to three minutes per person. Please state your name and address before speaking. In accordance with the Brown Act, unless an item has been placed on the agenda there shall be no action taken. The Board may 1.) Acknowledge receipt of the information: 2.) Refer to staff for further study: 3.0 Refer that matter to a future agenda.

4.0 Correspondence

5.0 Consent Agenda

5.1 Approval of Governing Board Regular Meeting Minutes of June 13, 2024 and Special Meeting Minutes June 14, 2024

5.2 Approval of Resolution 2425-01 Payroll and General Fund Warrants for June and July 2024

6.0 FINANCIAL

6.1 Business Services Report (Courtney)
6.2 Students Enrichment Fund Report (Suzanne)

7.0 REPORTS

7.1 Superintendent Report
7.2 NCSIG Risk Inspection Update
7.3 Auditors Update
7.4 22-23 TAMO Data Reporting (Local Indicator 1)
7.5 e-Rate Discussion
7.6 Tennis Court Repair Update (Cindy)
7.7 TCOE Mini-grant Award Letter

8.0 BUSINESS

8.1 Review/Approve contract with Lozano Smith as designated district attorneys
8.2 Review/Approve 2024-2025 Application for Federal Funding (ConApp)
8.3 Review/Approve MOU with CALIFORNIA DENTAL ASSOCIATION FOUNDATION
8.4 Review/Approve Resolution to Designate Representatives to sign for DGS, SAB, and OPSC

8.0 COMMENTS FROM THE BOARD

9.0 ITEMS FOR NEXT AGENDA

Next meeting September 12, 2024 @ 3:30PM Coffee Creek ESD

10.0 ADJOURNMENT

COFFEE CREEK ELEMENTARY SCHOOL

PAYROLL AND ACCOUNTS PAYABLE WARRANTS

RESOLUTION 2324-01

BE IT RESOLVED that the Board of Trustees approve the payroll and accounts payable warrants and sign the authorization as follows:

Payroll for the month of June and July 2024

Accounts payable for the month of June and July 2024

Passed and adopted by the Coffee Creek School District Board of trustees of the County of Trinity State of California, at a Regular meeting of the Board held on August 15, 2024, by the following vote:

Aye:

Nay:

Abstain:

Absent:

_____

Board Clerk

Checks Dated 06/01/2024 through 06/30/2024 **Board Meeting Date 8/15/2024**

Check Number	Check Date	Pay to the Order of	Fund-Object	Comment	Expensed Amount	Check Amount
5249641	06/05/2024	Plotzke Ace Hardware	01-4300	Compression couplings		34.30
5249642	06/05/2024	U.S. Bank Corporate Payment Systems	01-4200	Amazon Book Set	51.95	
				TPT CAASPP Test Prep Materials	20.97	
			01-4300	Amazon cleaning supplies	28.94	
				Classroom supplies	98.28	
				Target Food/Laundry	16.93	
				Toner cartridge	61.20	
				TPT Earth Day	12.55	
			01-4700	Costco Food	362.92	
				Food purchases	18.45	
				Target Food/Laundry	16.34	
			01-5800	Adobe Acrobat	19.99	
				Cinemark ELO-P	411.58	1,120.10
5249833	06/12/2024	Glavaz, Bruce A	01-4300	copper couplings for water leak		32.28
5249834	06/12/2024	North State Grocery Inc	01-4700	food store charge		51.17
5249835	06/12/2024	Paul Wesley Hillegeist dba Haz el wood tractor and handyman	01-5800	water leak repair		1,425.00
5249836	06/12/2024	Trinity County Solid Waste	01-5550	23/24 SOLID WASTE	140.00	
				24/25 SOLID WASTE	100.00	240.00
5249999	06/19/2024	Burns, Linda C	01-5200	ELOP Travel		2,500.00
5250000	06/19/2024	Pacific Educators Inc.	01-5450	2024/25 All School Plan Coverage		50.00
5250155	06/26/2024	Shasta Trinity Sch Ins Dental	01-9580	JULY DENTAL	77.71	
				JUNE DENTAL	155.42	233.13
5250156	06/26/2024	Shasta Trinity Sch Ins Medical	01-9580	JUNE2024 MEDICAL		1,607.00
5250157	06/26/2024	Shasta Trinity Sch Ins Vision	01-9580	JULY VISION	18.00	
				JUNE VISION	36.00	54.00
5250158	06/26/2024	TDS Telecom	01-5920	23-24 Telephone		203.83
5250159	06/26/2024	U.S. Bank Corporate Payment Systems	01-4300	Amazon	67.77	
				Amazon ELOP Awards	95.41	
				Amazon EOY Celebration	141.75	
				Creative Prints ELOP Shirts	531.96	
				ELOP Bookstore Trip	98.58	
				ELOP Celebration Awards	94.59	
				Target Headphones, ELOP Supplies	303.13	
			01-4400	Costco Laptop #2 Pd by Enrichment Fund	2,359.46	
				Costco Laptop Pd by Enrichment Fund	2,359.46	
			01-4700	Target Headphones, ELOP Supplies	28.74	
				Walmart Food	45.32	

The preceding Checks have been issued in accordance with the District's Policy and authorization of the Board of Trustees. It is recommended that the preceding Checks be approved.

Checks Dated 06/01/2024 through 06/30/2024 — **Board Meeting Date 8/15/2024**

Check Number	Check Date	Pay to the Order of	Fund-Object	Comment	Expensed Amount	Check Amount
5250159	06/26/2024	U.S. Bank Corporate Payment Systems	01-5800	Adobe Acrobat	19.99	
				Cinemark ELOP	67.50	
				INNOUT ELOP	92.24	
				Turtle Bay Pd by Enrichment Fund	340.00	6,645.90
				Total Number of Checks	**13**	**14,196.71**

Fund Summary

Fund	Description	Check Count	Expensed Amount
01	General Fund	13	14,196.71
	Total Number of Checks	**13**	14,196.71
	Less Unpaid Sales Tax Liability		.00
	Net (Check Amount)		**14,196.71**

The preceding Checks have been issued in accordance with the District's Policy and authorization of the Board of Trustees. It is recommended that the preceding Checks be approved.

Checks Dated 07/01/2024 through 07/31/2024 — **Board Meeting Date 8/15/2024**

Check Number	Check Date	Pay to the Order of	Fund-Object	Comment	Expensed Amount	Check Amount
5250540	07/17/2024	Eide Bailly LLP	01-5820	Audit Services - Final Payment		2,000.00
5250541	07/17/2024	Interactive Ed Services, Inc.	01-5800	2024/25 Website Hosting		595.00
5250542	07/17/2024	NCSIG	01-5450	2024/25 PROPERTY AND LIABILITY INSURANCE		6,041.42
5250543	07/17/2024	Shasta Trinity Sch Ins Dental	01-9580	August 2024 Dental Premiums		77.71
5250544	07/17/2024	Shasta Trinity Sch Ins Vision	01-9580	August 2024 Vision		18.00
5250545	07/17/2024	Trinity County Solid Waste	01-5550	24/25 SOLID WASTE		140.00
5250666	07/24/2024	Silverline Tree Service LLC	01-5800	Cedar and alder tree removal		2,300.00
5250758	07/31/2024	CSBA	01-5300	24/25 CSBA, ELA, GAMUT ONLINE		525.00
5250759	07/31/2024	TDS Telecom	01-5920	24/25 Telephone		204.53
5250760	07/31/2024	Trinity PUD	01-5510	24/25 Electricity		137.82
				Total Number of Checks	**10**	**12,039.48**

Fund Summary

Fund	Description	Check Count	Expensed Amount
01	General Fund	10	12,039.48
	Total Number of Checks	**10**	12,039.48
	Less Unpaid Sales Tax Liability		.00
	Net (Check Amount)		**12,039.48**

The preceding Checks have been issued in accordance with the District's Policy and authorization of the Board of Trustees. It is recommended that the preceding Checks be approved.

Coffee Creek Elementary School District

MONTHLY PAYROLL SUMMARY & CHECKLIST

Reporting Pay Period 6/01/2024 - 6/30/2024

$	18,716.39	Timesheet Amount
$	18,716.39	Prelist Gross Amount
$	18,716.36	Escape Adjust Payroll Amount
$	0.03	**Difference**

**Note: All Gold fields auto-populate from pre-list
All Other fields are pulled directly from corresponding Escape reports!

Deduction Audit

			Escape Total		Difference
$	827.61	H/W Employee Deduction Totals	$ 827.61	Balanced to Pay 34 Y / N	$0.00
$	1,000.00	H/W Employer Contribution Totals	$ 1,000.00	Balanced to Pay 34 Y / N	$0.00
$	-	TSA's (Group Code A)	$ -	Balanced to Pay 17 Y / N	$0.00
$	92.32	PERS Employee	$ 92.32	Balanced to Pay 01 Y / N	$0.00
$	307.90	PERS Employer	$ 307.90	Balanced to Pay 01 Y / N	$0.00
$	889.25	STRS Employee Reductions	$ 889.25	Balanced to Pay 01 Y/ N	$0.00
$	1,664.35	STRS Employer Contributions	$ 1,664.34	Balanced to Pay 01 Y/ N	$0.01
$	282.62	W/C Balanced to Pay01	$ 282.62	Balanced to Pay 01 Y/ N	$0.00
$	-	125 Plan Deductions	$ -	Balanced to Pay 01 Y/ N	$0.00
$	10,002.54	OASDI Subject Gross	$ 10,002.54	Balanced to Pay 01 Y/ N	$0.00
$	1,240.32	OASDI Deductions/Contributions Total	$ 1,240.32	Balanced to Pay 01 Y/ N	$0.00
$	17,888.78	Medi Subject Gross	$ 17,888.75	Balanced to Pay 01 Y/ N	$0.03
$	518.77	Medi Deductions/Contributions Total	$ 518.76	Balanced to Pay 01 Y/ N	$0.01
$	9.36	SUI Contributions	$ 9.37	Balanced to Pay 01 Y/ N	-$0.01
$	16,907.21	FIT Subject Gross	$ 16,907.18	Balanced to Pay 01 Y/ N	$0.03

State of California Bureau of Labor Statistics Data

Total # of Employees Including Subs	**4**
Total # of Women Employees (Including Subs)	**2**
Total # of Certificated (NO Subs)	**2**

Liz McIntosh — 6/13/2024

Signature — HR/Payroll Technician — Date

Courtney Bayley — 6/13/2024

Signature — TCOE Chief Business Official — Date

Signature — Coffee Creek Supt or Authorized Designee — Date

Pay Date 06/28/2024

EARNINGS by Earnings Code	Income	Adjustments
Regular	18,716.36	
TOTAL	18,716.36	

EARNINGS by Group	Income	Adjustments
Subs	1,832.00	
Misc	6,325.87	
Reg Pay	10,558.49	
TOTAL	18,716.36	

EARNINGS		Person Type		Female Employees
CERT	2	15,886.49	1	8,713.82
CLASS	2	2,829.87	1	2,132.00
TOTAL	4	18,716.36	2	10,845.82

TAXES	Employee	Employer	Total	Subject Grosses
FEDERAL TAX	1,385.95		1,385.95	16,907.18
STATE TAX	483.76		483.76	16,907.18
Soc Sec	620.16	620.16	1,240.32	10,002.54
Medicare	259.38	259.38	518.76	17,888.75
SUI		9.37	9.37	18,716.36
Workers Comp		282.62	282.62	18,716.36
SUBTOTAL	2,749.25	1,171.53	3,920.78	

REDUCTIONS	Employee	Employer	Total	Subject Grosses
PERS	92.32	307.90	400.22	1,154.06
STRS	889.25	1,664.34	2,553.59	8,713.82
Health & Welfare	827.61		827.61	
SUBTOTAL	1,809.18	1,972.24	3,781.42	

DEDUCTIONS	Employee	Employer	Total	Subject Grosses
Dues & Memberships	16.80		16.80	
Health & Welfare		1,000.00	1,000.00	
SUBTOTAL	16.80	1,000.00	1,016.80	
TOTALS	4,575.23	4,143.77	8,719.00	

Vendor Summary for Pay Date 06/28/2024

Vendor Checks	
Vendor Liabilities	

Cancel/Reissue for Process Date 06/28/2024

Reissued	
Cancel Checks	
Void ACH	

BALANCING DATA

		14,141.13	Net Pay
Gross Earnings	18,716.36	4,575.23	Deductions
District Liability	4,143.77	4,143.77	Contributions
	22,860.13	22,860.13	

NET

Direct Deposits	12,190.76	3
Checks	1,950.37	1
Partial Net ACH		
Negative Net		
Check Holds		
Zero Net		
TOTAL	14,141.13	4

Pay22a

Payroll Errors by Pay Date

Pay Date 06/28/2024

Employee Name	(ID) SSN4	Pay Cycle	Category	Msg Code	Message

Pay Date

*** denotes FATAL error**

Selection: Grouped by Pay Date - Sorted by Employee, Filtered by (Org = 302, Starting Pay Date = 6/28/2024, Paid Only? = N, Error Category = , Limit Errors? = N)

Generated for Liz McIntosh (LMCINTOSH), Jun 13 2024 1:02PM

WORKSHEET TO TRACK EXTRA HOURS FOR SICK LEAVE

6/01/2024 - 6/30/2024 PAYROLL

EMPLOYEE			ESCAPE EMPLOYEE ID #	NUMBER OF EXTRA HOURS CURRENT MONTH	SICK LEAVE HOURS ACCRUED @ 0.04615	SICK LEAVE HOURS POSTED CURRENT MONTH	SICK LEAVE HOURS CURRENT MONTH BALANCE
Burns	Brian		62		0.0000	0.8214	
Glavaz	Bruce		56	42	1.9383	-1.9383	
TOTALS							0.0000
					Total SL Accrual Batch	-1.9383	

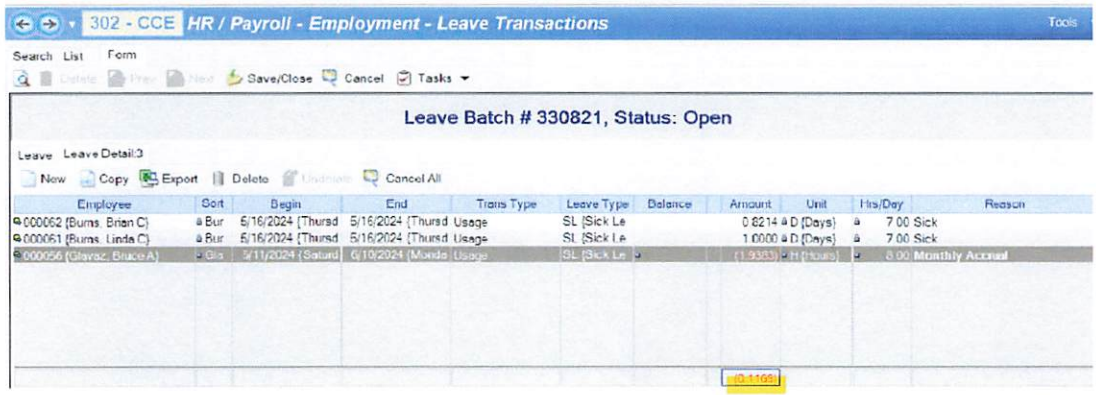
WORKSHEET TO TRACK EXTRA HOURS FOR VACATION

6/01/2024 - 6/30/2024 PAYROLL

Post then verify

EMPLOYEE		Vac Pay Factor	ESCAPE EMPLOYEE ID #	NUMBER OF EXTRA HOURS CURRENT MONTH	VACATION LEAVE HOURS ACCRUED @ 0.03845	Vacation Accrual Hours to Post OR Pay off for Timecard EE's	VACATION LEAVE ENDING BALANCE CURRENT MONTH
Glavaz	Bruce	0.0385	56	42	1.6170	0.0000	Pay his vacation each month - he's hourly
				0.00	0.0000		
					Total Vac Accrual Batch	0.00000	

Accrual Batch Total	-1.9383
Payroll Leaves Total	1.82
Combined Batch Total	**-0.1169**



Coffee Creek Elementary School District Prelist 6/01/2024 - 6/30/2024

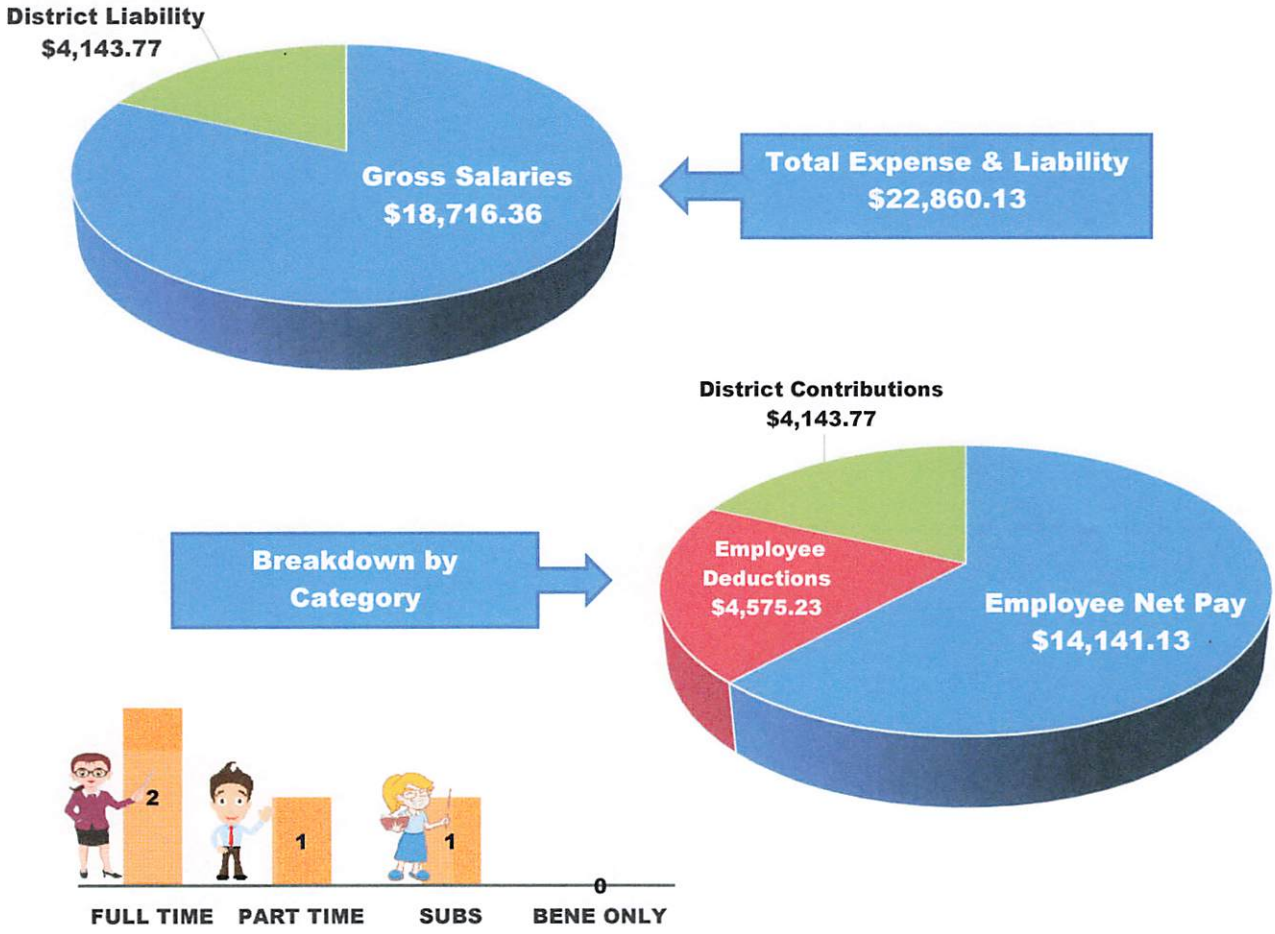
Employee Type or Wage Type	Payrolls	PERS ID or Escape	Last name	First Name	Position	Unit Worked	Hd Table	Rate	Unit	Distribution	Account Code	Distributed Earnings	Escape Earnings	Difference Dist. Earnings Vs Escape	Retirement Check Column	PERS How 6% Classic 7%	PERS ER 24.555%	STRS EE 10.250% Tier 1 10.25% Classic	STRS ER 19.10%	Employee Paid	Female	Certificated w/o Sub	Leave Type	Leaves Amount (Hours/Days)	H&W EE	H&W ER	TSA	FSA/HLSA & 125 Policies	125 Plan Reductions	Medicare Wages (Box 5 W2)	Medicare Deduction (Box 4 W2) Amounts (1.45% Both Sides)	WAGES Wages (Box 1 W2) (Box 16 W2)	OASDI Deduction & Contribution (6.2% Both Sides)	TOTAL Subject Wages (reduced by 125 Plan, TSA & Retirement)	SUI (Re Board Resolution Statewide)	WorkComp (1.67% on gross earnings)
CERT			Burns	Brian	ELOP Stipend	5	CERTSUP	$ 500.00	mo	100.0%		$ 3,000.00				0.00	$ -													$ 3,000.00	$ 43.50	$ 3,000.00	$ 186.00	$ 3,000.00	$ -	$ -
CERT			Burns	Brian	Superintendent	1	CERT	$ 1,794.24	mo	100.0%	01-5	$ 1,794.24				0.00	$ -													$ 1,794.24	$ 26.47	$ 1,794.24	$ 111.24	$ 1,794.24	$ -	$ -
CERT			Burns	Brian	Teacher	1	CERT	$ 1,262.37	mo	100.0%	01-5	$ 1,262.37				0.00	$ -													$ 1,262.37	$ 18.30	$ 1,262.37	$ 78.27	$ 1,262.37	$ -	$ -
CLE			Burns	Brian	Paraeducator uPREP	1	CERT	$ 1,154.08	mo	100.0%	01-5	$ 1,154.08	$ 7,172.67	$ -		82.32	$ 387.98							10	0.821429					$ 1,154.08	$ 16.73	$ 1,154.08	$ 71.55	$ 1,061.74	$ 3.59	$ 109.31
CERT	11	61	Burns	Linda	Teacher	1	CERT	$ 5,713.85	mo	100.0%		$ 5,713.85				0.00	$ -													$ 5,713.85	$ 82.86	$ 5,130.74	$ -	$ 5,130.74	$ -	$ -
CERT			Burns	Linda	ELOP Stipend	5	CERT	$ 600.00	mo	100.0%		$ 3,000.00	$ 8,713.82	$ 0.03		0.00	$ -													$ 2,172.39	$ 31.50	$ 1,868.24	$ 4.36	$ 1,868.24	$ -	$ 131.58
CLS	12	68	Glenz	Bruce	Custodian	40	CLASS	$ 16.00	hr	100.0%		$ 640.00				0.00	$ -												$ -	$ 640.00	$ 9.28	$ 640.00	$ 39.68	$ 640.00	$ -	$ -
CLS			Glenz	Bruce	Holiday Pay	2	CLASS	$ 16.00	mo	100.0%		$ 32.00				0.00	$ -													$ 32.00	$ 0.46	$ 32.00	$ 1.98	$ 32.00	$ -	$ -
CLS			Glenz	Brook	Vac Pay	1.6179	CLASS	$ 16.00	mo	100.0%		$ 25.87	$ 697.87	$ 0.00		0.00	$ -													$ 25.87	$ 0.38	$ 25.87	$ 1.60	$ 25.87	$ 0.35	$ 10.54
CLS			Schade	Alyssa	ELOP Program	40	CLASS	$ 25.00	hr	100.0%		$ 1,000.00				0.00	$ -													$ 1,000.00	$ 14.50	$ 1,000.00	$ 62.00	$ 1,000.00	$ -	$ -
CLS			Schade	Alyssa	Art Docent	3	CLASS	$ 100.00	hr	100.0%		$ 300.00				0.00	$ -													$ 300.00	$ 4.35	$ 300.00	$ 18.60	$ 300.00	$ -	$ -
CLS			Schade	Alyssa	Sub Para	52	CLASS	$ 16.00	hr	100.0%		$ 832.00	$ 2,132.00	$ -		0.00	$ -													$ 832.00	$ 12.06	$ 832.00	$ 51.58	$ 832.00	$ 1.67	$ 32.19
								$ 16,716.39		4.03	$ -	$ 82.32	$ 387.98											$ 827.41	$ 1,000.00	$ -	$ -	$ 827.41	$ 17,888.73	$ 259.39	$ 16,902.54	$ 620.16	$ 16,907.21	$ 9.59	$ 282.82

Employee Category
Full Time
2

Pull A Payrl Report and Fill In The following for the board chart....

Coffee Creek School District

Payroll Statistics For June 30, 2024



Coffee Creek Elementary School District

MONTHLY PAYROLL SUMMARY & CHECKLIST

Reporting Pay Period 07/01/2024 - 07/31/2024

$	616.87	Timesheet Amount
$	616.87	Prelist Gross Amount
$	616.87	Escape Adjust Payroll Amount
$	(0.00)	**Difference**

**Note: All Gold fields auto-populate from pre-list
All Other fields are pulled directly from corresponding Escape reports!

Deduction Audit

		Escape Total		Difference
$ -	H/W Employee Deduction Totals	$ -	Balanced to Pay 34 Y / N	$0.00
$ -	H/W Employer Contribution Totals	$ -	Balanced to Pay 34 Y / N	$0.00
$ -	TSA's (Group Code A)	$ -	Balanced to Pay 17 Y / N	$0.00
$ -	PERS Employee	$ -	Balanced to Pay 01 Y / N	$0.00
$ -	PERS Employer	$ -	Balanced to Pay 01 Y / N	$0.00
$ -	STRS Employee Reductions	$ -	Balanced to Pay 01 Y/ N	$0.00
$ -	STRS Employer Contributions	$ -	Balanced to Pay 01 Y/ N	$0.00
$ 9.13	W/C Balanced to Pay01	$ 9.13	Balanced to Pay 01 Y/ N	$0.00
$ -	125 Plan Deductions	$ -	Balanced to Pay 01 Y/ N	$0.00
$ 616.87	OASDI Subject Gross	$ 616.87	Balanced to Pay 01 Y/ N	$0.00
$ 76.49	OASDI Deductions/Contributions Total	$ 76.50	Balanced to Pay 01 Y/ N	-$0.01
$ 616.87	Medi Subject Gross	$ 616.87	Balanced to Pay 01 Y/ N	$0.00
$ 17.89	Medi Deductions/Contributions Total	$ 17.88	Balanced to Pay 01 Y/ N	$0.01
$ 0.31	SUI Contributions	$ 0.31	Balanced to Pay 01 Y/ N	$0.00
$ 616.87	FIT Subject Gross	$ 616.87	Balanced to Pay 01 Y/ N	$0.00

State of California Bureau of Labor Statistics Data

Total # of Employees Including Subs	**1**
Total # of Women Employees (Including Subs)	**0**
Total # of Certificated (NO Subs)	**0**

Liz McIntosh — 7/19/2024

Signature — HR/Payroll Technician — Date

Courtney Bayley — 7/19/2024

Signature — TCOE Chief Business Official — Date

Signature — Coffee Creek Supt or Authorized Designee — Date

Pay Date 07/31/2024

EARNINGS by Earnings Code	Income	Adjustments
Regular	616.87	
TOTAL	616.87	

EARNINGS by Group	Income	Adjustments
Misc	22.87	
Reg Pay	594.00	
TOTAL	616.87	

EARNINGS		Person Type		Female Employees
CLASS	1	616.87		.00
TOTAL	1	616.87	0	.00

TAXES	Employee	Employer	Total	Subject Grosses
FEDERAL TAX				616.87
STATE TAX				616.87
Soc Sec	38.25	38.25	76.50	616.87
Medicare	8.94	8.94	17.88	616.87
SUI		.31	.31	616.87
Workers Comp		9.13	9.13	616.87
SUBTOTAL	47.19	56.63	103.82	

REDUCTIONS	Employee	Employer	Total	Subject Grosses
SUBTOTAL			.00	

DEDUCTIONS	Employee	Employer	Total	Subject Grosses
SUBTOTAL			.00	
TOTALS	47.19	56.63	103.82	

Vendor Summary for Pay Date 07/31/2024

Vendor Checks	
Vendor Liabilities	

Cancel/Reissue for Process Date 07/31/2024

Reissued	
Cancel Checks	
Void ACH	

BALANCING DATA

		569.68	Net Pay
Gross Earnings	616.87	47.19	Deductions
District Liability	56.63	56.63	Contributions
	673.50	673.50	

NET

Direct Deposits	569.68	1
Checks		
Partial Net ACH		
Negative Net		
Check Holds		
Zero Net		
TOTAL	569.68	1

Pay22a

Payroll Errors by Pay Date

Pay Date 07/31/2024

Employee Name	(ID) SSN4	Pay Cycle	Category	Msg Code	Message

Pay Date

* denotes FATAL error

Selection: Grouped by Pay Date - Sorted by Employee, Filtered by (Org = 302, Starting Pay Date = 7/31/2024, Paid Only? = N, Error Category = , Limit Errors? = N)

Generated for Liz McIntosh (LMCINTOSH), Jul 19 2024 10:47AM

Coffee Creek Elementary School District Prelist 07/01/2024 - 07/31/2024

Employee Type or Wage Type	Paycycle	EE ID in Escape	Last name	First Name	position	Unit Worked	Sal Table	Rate	Unit	Distribution	Account Code	Distributed Earnings
CERT	11	62	Fox	Luana	ELOP Stipend	0	CERT/SUP	$ 600.00	mo	100.0%		$
CERT			Fox	Luana	Teacher	0	CERT	$ 1,262.37	mo	100.0%	01	$
CLS	12	56	[illegible]	Bruce	Custodian	32	CLASS	$ 16.50	hr	100.0%		$ 528.00
CLS			[illegible]	Bruce	Holiday Pay	4	CLASS	$ 16.50	hr	100.0%		$ 66.00
CLS			[illegible]	Bruce	Vac Pay	[illegible]	CLASS	$ 16.50	hr	100.0%		$ 22.87
												$ 616.87

position	Escrow Earnings	Difference Dist. Earnings vs. Escape	Retirement Check Column	PERS New 8% Classic 7%	PERS ER 26.68%	STRS EE 10.205% New, 10.25% Classic	STRS ER 19.10%	Employee Paid	Female	Certificated w/o Sub	Leave Type	Leave Amount (Hours/Days)	H&W EE
ELOP Stipend				0.00	$ -	$ -	$ -	0					
Teacher				0.00	$ -	$ -	$ -						
Custodian				0.00	$ -	$ -	$ -	1					
Holiday Pay				0.00	$ -	$ -	$ -						
Vac Pay	$ 616.87	$ (0.00)		0.00	$ -	$ -	$ -						
Total	$ 616.87	$ (0.00)	$ -	$ -	$ -	$ -	$ -	1.00	0.00	0.00	###	0.00	$ -

position	H&W ER	TSA	FSA H.S.A & 125 Policies	125 Plan Reductions	Medicare Wages (affected by 125 plan only)	Medicare Deduction & Contribution Amounts (1.45% Both Sides)	OASDI Wages (affected by 125 plan only)	OASDI Deduction & Contribution (6.2% both sides)	FIT/SIT Subject Wages (reduced by 125 Plan, TSA & Retirement)	SUI (No Board Members/Students)		WorkComp (1.47% on gross earnings)
ELOP Stipend				$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -
Teacher				$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -
Custodian		$		$ -	$ 528.00	$ 7.66	$ 528.00	$ 32.74	$ 528.00	$		$
Holiday Pay				$ -	$ 66.00	$ 0.96	$ 66.00	$ 4.09	$ 66.00	$		$
Vac Pay				$ -	$ 22.87	$ 0.33	$ 22.87	$ 1.42	$ 22.87	$ 0.31		$ 9.11
Total	$ -	$ -	$ -	$ -	$ 616.87	$ 8.94	$ 616.87	$ 38.25	$ 616.87	$ 0.31	$ -	$ 9.11

Pull A Paylt Report and Fill In The following for the board chart.

Employee Category
Full Time 0

WORKSHEET TO TRACK EXTRA HOURS FOR SICK LEAVE

07/01/2024 - 07/31/2024 PAYROLL

EMPLOYEE			ESCAPE EMPLOYEE ID #	NUMBER OF EXTRA HOURS CURRENT MONTH	SICK LEAVE HOURS ACCRUED @ 0.04615	SICK LEAVE HOURS POSTED CURRENT MONTH	SICK LEAVE HOURS CURRENT MONTH BALANCE
Fox	Luane				0.0000	0.0000	
Glavaz	Bruce		56	36	1.6614	-1.6614	
TOTALS							0.0000
					Total SL Accrual Batch	-1.6614	

WORKSHEET TO TRACK EXTRA HOURS FOR VACATION

07/01/2024 - 07/31/2024 PAYROLL

Post then verify

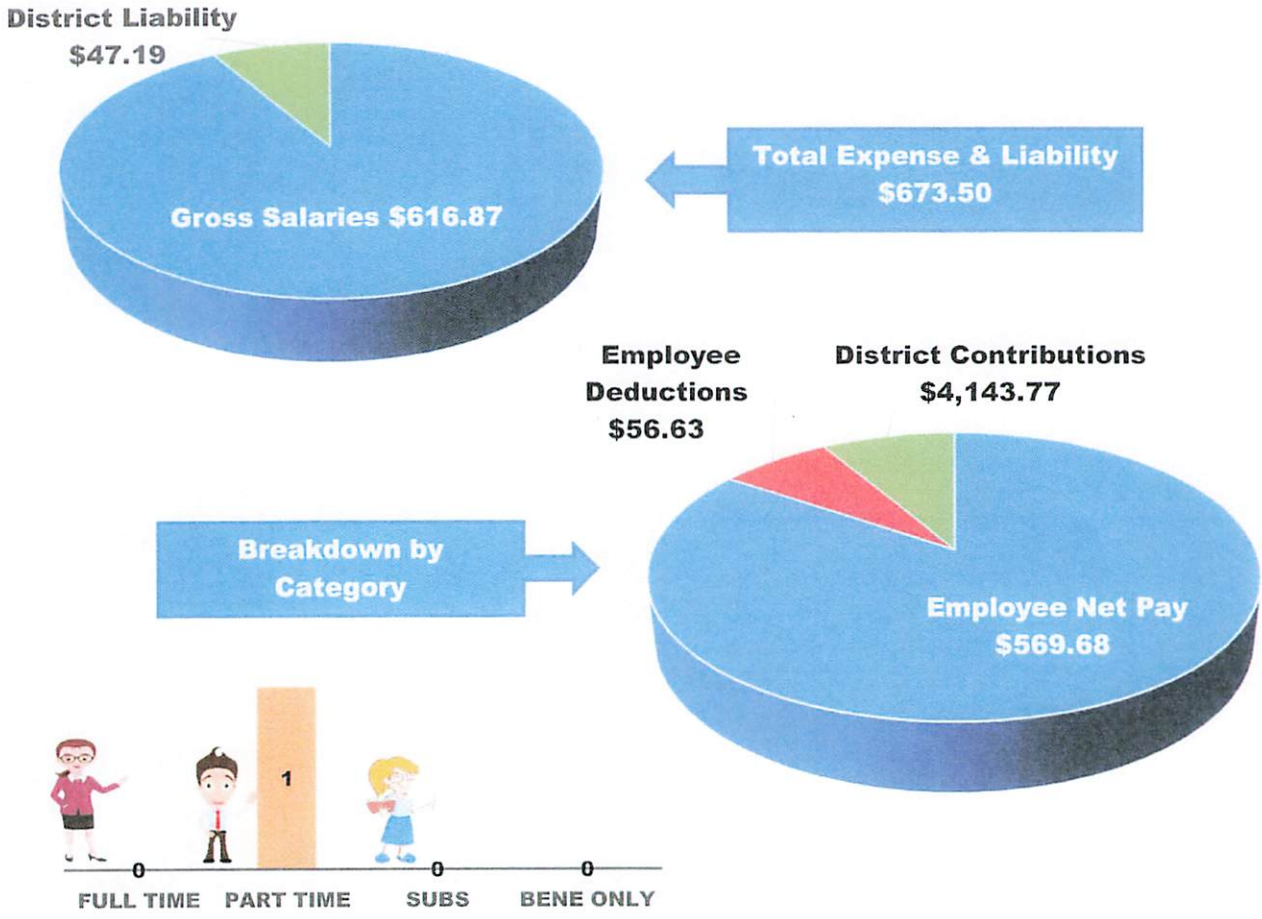
EMPLOYEE		Vac Pay Factor	ESCAPE EMPLOYEE ID #	NUMBER OF EXTRA HOURS CURRENT MONTH	VACATION LEAVE HOURS ACCRUED @ 0.03845	Vacation Accrual Hours to Post OR Pay off for Timecard EE's	VACATION LEAVE ENDING BALANCE CURRENT MONTH
Glavaz	Bruce	0.0385	56	36	1.3860	0.0000	Pay his vacation each month - he's hourly
				0.00	0.0000		
					Total Vac Accrual Batch	0.00000	

Accrual Batch Total	-1.6614
Payroll Leaves Total	0.00
Combined Batch Total	-1.6614



Coffee Creek School District

Payroll Statistics For July 31, 2024



COFFEE CREEK ELEMENTARY SCHOOL

PAYROLL AND ACCOUNTS PAYABLE WARRANTS

RESOLUTION 2324-01

BE IT RESOLVED that the Board of Trustees approve the payroll and accounts payable warrants and sign the authorization as follows:

Payroll for the month of June and July 2024

Accounts payable for the month of June and July 2024

Passed and adopted by the Coffee Creek School District Board of trustees of the County of Trinity State of California, at a Regular meeting of the Board held on August 15, 2024, by the following vote:

Aye:

Nay:

Abstain:

Absent:

_____

Board Clerk

Checks Dated 06/01/2024 through 06/30/2024 **Board Meeting Date 8/15/2024**

Check Number	Check Date	Pay to the Order of	Fund-Object	Comment	Expensed Amount	Check Amount
5249641	06/05/2024	Plotzke Ace Hardware	01-4300	Compression couplings		34.30
5249642	06/05/2024	U.S. Bank Corporate Payment Systems	01-4200	Amazon Book Set	51.95	
				TPT CAASPP Test Prep Materials	20.97	
			01-4300	Amazon cleaning supplies	28.94	
				Classroom supplies	98.28	
				Target Food/Laundry	16.93	
				Toner cartridge	61.20	
				TPT Earth Day	12.55	
			01-4700	Costco Food	362.92	
				Food purchases	18.45	
				Target Food/Laundry	16.34	
			01-5800	Adobe Acrobat	19.99	
				Cinemark ELO-P	411.58	1,120.10
5249833	06/12/2024	Glavaz, Bruce A	01-4300	copper couplings for water leak		32.28
5249834	06/12/2024	North State Grocery Inc	01-4700	food store charge		51.17
5249835	06/12/2024	Paul Wesley Hillegeist dba Haz el wood tractor and handyman	01-5800	water leak repair		1,425.00
5249836	06/12/2024	Trinity County Solid Waste	01-5550	23/24 SOLID WASTE	140.00	
				24/25 SOLID WASTE	100.00	240.00
5249999	06/19/2024	Burns, Linda C	01-5200	ELOP Travel		2,500.00
5250000	06/19/2024	Pacific Educators Inc.	01-5450	2024/25 All School Plan Coverage		50.00
5250155	06/26/2024	Shasta Trinity Sch Ins Dental	01-9580	JULY DENTAL	77.71	
				JUNE DENTAL	155.42	233.13
5250156	06/26/2024	Shasta Trinity Sch Ins Medical	01-9580	JUNE2024 MEDICAL		1,607.00
5250157	06/26/2024	Shasta Trinity Sch Ins Vision	01-9580	JULY VISION	18.00	
				JUNE VISION	36.00	54.00
5250158	06/26/2024	TDS Telecom	01-5920	23-24 Telephone		203.83
5250159	06/26/2024	U.S. Bank Corporate Payment Systems	01-4300	Amazon	67.77	
				Amazon ELOP Awards	95.41	
				Amazon EOY Celebration	141.75	
				Creative Prints ELOP Shirts	531.96	
				ELOP Bookstore Trip	98.58	
				ELOP Celebration Awards	94.59	
				Target Headphones, ELOP Supplies	303.13	
			01-4400	Costco Laptop #2 Pd by Enrichment Fund	2,359.46	
				Costco Laptop Pd by Enrichment Fund	2,359.46	
			01-4700	Target Headphones, ELOP Supplies	28.74	
				Walmart Food	45.32	

The preceding Checks have been issued in accordance with the District's Policy and authorization of the Board of Trustees. It is recommended that the preceding Checks be approved.

Checks Dated 06/01/2024 through 06/30/2024 — **Board Meeting Date 8/15/2024**

Check Number	Check Date	Pay to the Order of	Fund-Object	Comment	Expensed Amount	Check Amount
5250159	06/26/2024	U.S. Bank Corporate Payment Systems	01-5800	Adobe Acrobat	19.99	
				Cinemark ELOP	67.50	
				INNOUT ELOP	92.24	
				Turtle Bay Pd by Enrichment Fund	340.00	6,645.90
				Total Number of Checks	**13**	**14,196.71**

Fund Summary

Fund	Description	Check Count	Expensed Amount
01	General Fund	13	14,196.71
	Total Number of Checks	**13**	14,196.71
	Less Unpaid Sales Tax Liability		.00
	Net (Check Amount)		**14,196.71**

The preceding Checks have been issued in accordance with the District's Policy and authorization of the Board of Trustees. It is recommended that the preceding Checks be approved.

Checks Dated 07/01/2024 through 07/31/2024 — **Board Meeting Date 8/15/2024**

Check Number	Check Date	Pay to the Order of	Fund-Object	Comment	Expensed Amount	Check Amount
5250540	07/17/2024	Eide Bailly LLP	01-5820	Audit Services - Final Payment		2,000.00
5250541	07/17/2024	Interactive Ed Services, Inc.	01-5800	2024/25 Website Hosting		595.00
5250542	07/17/2024	NCSIG	01-5450	2024/25 PROPERTY AND LIABILITY INSURANCE		6,041.42
5250543	07/17/2024	Shasta Trinity Sch Ins Dental	01-9580	August 2024 Dental Premiums		77.71
5250544	07/17/2024	Shasta Trinity Sch Ins Vision	01-9580	August 2024 Vision		18.00
5250545	07/17/2024	Trinity County Solid Waste	01-5550	24/25 SOLID WASTE		140.00
5250666	07/24/2024	Silverline Tree Service LLC	01-5800	Cedar and alder tree removal		2,300.00
5250758	07/31/2024	CSBA	01-5300	24/25 CSBA, ELA, GAMUT ONLINE		525.00
5250759	07/31/2024	TDS Telecom	01-5920	24/25 Telephone		204.53
5250760	07/31/2024	Trinity PUD	01-5510	24/25 Electricity		137.82
				Total Number of Checks	**10**	**12,039.48**

Fund Summary

Fund	Description	Check Count	Expensed Amount
01	General Fund	10	12,039.48
	Total Number of Checks	**10**	12,039.48
	Less Unpaid Sales Tax Liability		.00
	Net (Check Amount)		**12,039.48**

The preceding Checks have been issued in accordance with the District's Policy and authorization of the Board of Trustees. It is recommended that the preceding Checks be approved.

Coffee Creek Elementary School District

MONTHLY PAYROLL SUMMARY & CHECKLIST

Reporting Pay Period 6/01/2024 - 6/30/2024

$	18,716.39	Timesheet Amount
$	18,716.39	Prelist Gross Amount
$	18,716.36	Escape Adjust Payroll Amount
$	0.03	**Difference**

**Note: All Gold fields auto-populate from pre-list
All Other fields are pulled directly from corresponding Escape reports!

Deduction Audit

			Escape Total		Difference
$	827.61	H/W Employee Deduction Totals	$ 827.61	Balanced to Pay 34 Y / N	$0.00
$	1,000.00	H/W Employer Contribution Totals	$ 1,000.00	Balanced to Pay 34 Y / N	$0.00
$	-	TSA's (Group Code A)	$ -	Balanced to Pay 17 Y / N	$0.00
$	92.32	PERS Employee	$ 92.32	Balanced to Pay 01 Y / N	$0.00
$	307.90	PERS Employer	$ 307.90	Balanced to Pay 01 Y / N	$0.00
$	889.25	STRS Employee Reductions	$ 889.25	Balanced to Pay 01 Y/ N	$0.00
$	1,664.35	STRS Employer Contributions	$ 1,664.34	Balanced to Pay 01 Y/ N	$0.01
$	282.62	W/C Balanced to Pay01	$ 282.62	Balanced to Pay 01 Y/ N	$0.00
$	-	125 Plan Deductions	$ -	Balanced to Pay 01 Y/ N	$0.00
$	10,002.54	OASDI Subject Gross	$ 10,002.54	Balanced to Pay 01 Y/ N	$0.00
$	1,240.32	OASDI Deductions/Contributions Total	$ 1,240.32	Balanced to Pay 01 Y/ N	$0.00
$	17,888.78	Medi Subject Gross	$ 17,888.75	Balanced to Pay 01 Y/ N	$0.03
$	518.77	Medi Deductions/Contributions Total	$ 518.76	Balanced to Pay 01 Y/ N	$0.01
$	9.36	SUI Contributions	$ 9.37	Balanced to Pay 01 Y/ N	-$0.01
$	16,907.21	FIT Subject Gross	$ 16,907.18	Balanced to Pay 01 Y/ N	$0.03

State of California Bureau of Labor Statistics Data

Total # of Employees Including Subs	**4**
Total # of Women Employees (Including Subs)	**2**
Total # of Certificated (NO Subs)	**2**

Liz McIntosh — 6/13/2024

Signature — HR/Payroll Technician — Date

Courtney Bayley — 6/13/2024

Signature — TCOE Chief Business Official — Date

Signature — Coffee Creek Supt or Authorized Designee — Date

Pay Date 06/28/2024

EARNINGS by Earnings Code	Income	Adjustments
Regular	18,716.36	
TOTAL	18,716.36	

EARNINGS by Group	Income	Adjustments
Subs	1,832.00	
Misc	6,325.87	
Reg Pay	10,558.49	
TOTAL	18,716.36	

EARNINGS		Person Type		Female Employees
CERT	2	15,886.49	1	8,713.82
CLASS	2	2,829.87	1	2,132.00
TOTAL	4	18,716.36	2	10,845.82

TAXES	Employee	Employer	Total	Subject Grosses
FEDERAL TAX	1,385.95		1,385.95	16,907.18
STATE TAX	483.76		483.76	16,907.18
Soc Sec	620.16	620.16	1,240.32	10,002.54
Medicare	259.38	259.38	518.76	17,888.75
SUI		9.37	9.37	18,716.36
Workers Comp		282.62	282.62	18,716.36
SUBTOTAL	2,749.25	1,171.53	3,920.78	

REDUCTIONS	Employee	Employer	Total	Subject Grosses
PERS	92.32	307.90	400.22	1,154.06
STRS	889.25	1,664.34	2,553.59	8,713.82
Health & Welfare	827.61		827.61	
SUBTOTAL	1,809.18	1,972.24	3,781.42	

DEDUCTIONS	Employee	Employer	Total	Subject Grosses
Dues & Memberships	16.80		16.80	
Health & Welfare		1,000.00	1,000.00	
SUBTOTAL	16.80	1,000.00	1,016.80	
TOTALS	4,575.23	4,143.77	8,719.00	

Vendor Summary for Pay Date 06/28/2024

Vendor Checks	
Vendor Liabilities	

Cancel/Reissue for Process Date 06/28/2024

Reissued	
Cancel Checks	
Void ACH	

BALANCING DATA

		14,141.13	Net Pay
Gross Earnings	18,716.36	4,575.23	Deductions
District Liability	4,143.77	4,143.77	Contributions
	22,860.13	22,860.13	

NET

Direct Deposits	12,190.76	3
Checks	1,950.37	1
Partial Net ACH		
Negative Net		
Check Holds		
Zero Net		
TOTAL	14,141.13	4

Pay22a

Payroll Errors by Pay Date

Pay Date 06/28/2024

Employee Name	(ID) SSN4	Pay Cycle	Category	Msg Code	Message

Pay Date

*** denotes FATAL error**

Selection: Grouped by Pay Date - Sorted by Employee, Filtered by (Org = 302, Starting Pay Date = 6/28/2024, Paid Only? = N, Error Category = , Limit Errors? = N)

Generated for Liz McIntosh (LMCINTOSH), Jun 13 2024 1:02PM

WORKSHEET TO TRACK EXTRA HOURS FOR SICK LEAVE

6/01/2024 - 6/30/2024 PAYROLL

EMPLOYEE			ESCAPE EMPLOYEE ID #	NUMBER OF EXTRA HOURS CURRENT MONTH	SICK LEAVE HOURS ACCRUED @ 0.04615	SICK LEAVE HOURS POSTED CURRENT MONTH	SICK LEAVE HOURS CURRENT MONTH BALANCE
Burns	Brian		62		0.0000	0.8214	
Glavaz	Bruce		56	42	1.9383	-1.9383	
TOTALS							0.0000
					Total SL Accrual Batch	-1.9383	

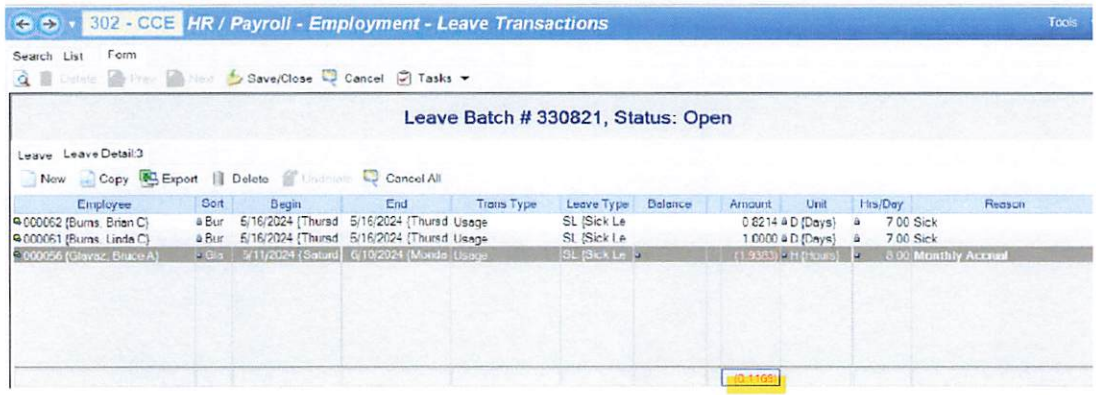
WORKSHEET TO TRACK EXTRA HOURS FOR VACATION

6/01/2024 - 6/30/2024 PAYROLL

Post then verify

EMPLOYEE		Vac Pay Factor	ESCAPE EMPLOYEE ID #	NUMBER OF EXTRA HOURS CURRENT MONTH	VACATION LEAVE HOURS ACCRUED @ 0.03845	Vacation Accrual Hours to Post OR Pay off for Timecard EE's	VACATION LEAVE ENDING BALANCE CURRENT MONTH
Glavaz	Bruce	0.0385	56	42	1.6170	0.0000	Pay his vacation each month - he's hourly
				0.00	0.0000		
					Total Vac Accrual Batch	0.00000	

Accrual Batch Total	-1.9383
Payroll Leaves Total	1.82
Combined Batch Total	**-0.1169**



Coffee Creek Elementary School District Prelist 6/01/2024 - 6/30/2024

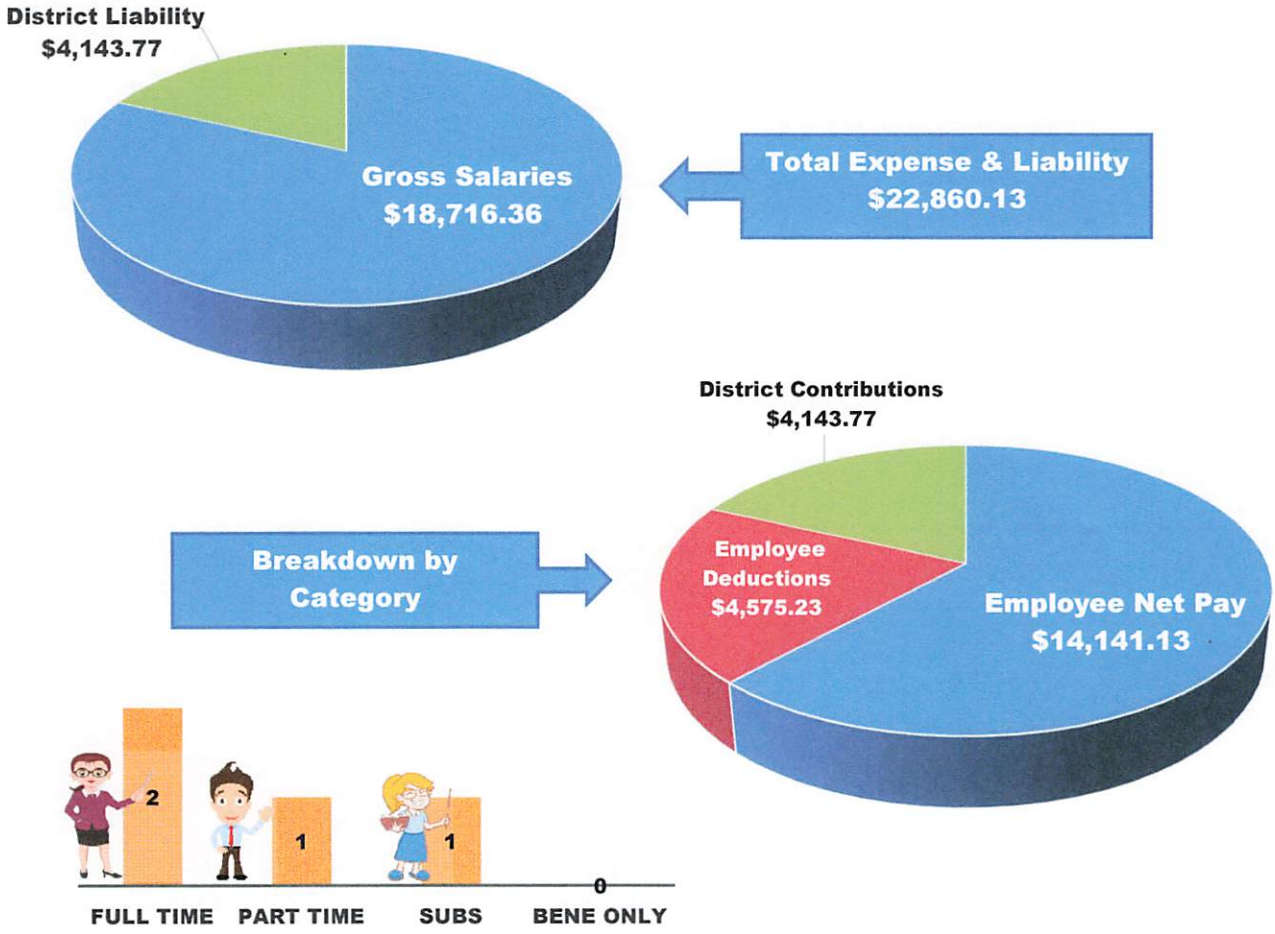
Employee Type or Wage Type	Payrolls	PERS ID or Escape	Last name	First Name	Position	Unit Worked	Hd Table	Rate	Unit	Distribution	Account Code	Distributed Earnings	Escape Earnings	Difference Dist. Earnings Vs Escape	Retirement Check Column	PERS How 6% Classic 7%	PERS ER 24.555%	STRS EE 10.250% Tier 1 10.25% Classic	STRS ER 19.10%	Employee Paid	Female	Certificated w/o Sub	Leave Type	Leaves Amount (Hours/Days)	H&W EE	H&W ER	TSA	FSA/HLSA & 125 Policies	125 Plan Reductions	Medicare Wages (Box 5 W2)	Medicare Deduction (Box 4 W2) Amounts (1.45% Both Sides)	WAGES Wages (Box 1 W2) (Box 16 W2)	OASDI Deduction & Contribution (6.2% Both Sides)	TOTAL Subject Wages (reduced by 125 Plan, TSA & Retirement)	SUI (Re Board Resolution Statewide)	WorkComp (1.67% on gross earnings)
CERT			Burns	Brian	ELOP Stipend	5	CERTSUP	$ 500.00	mo	100.0%		$ 3,000.00				0.00	$ -													$ 3,000.00	$ 43.50	$ 3,000.00	$ 186.00	$ 3,000.00	$ -	$ -
CERT			Burns	Brian	Superintendent	1	CERT	$ 1,794.24	mo	100.0%	01-5	$ 1,794.24				0.00	$ -													$ 1,794.24	$ 26.47	$ 1,794.24	$ 111.24	$ 1,794.24	$ -	$ -
CERT			Burns	Brian	Teacher	1	CERT	$ 1,262.37	mo	100.0%	01-5	$ 1,262.37				0.00	$ -													$ 1,262.37	$ 18.30	$ 1,262.37	$ 78.27	$ 1,262.37	$ -	$ -
CLE			Burns	Brian	Paraeducator uPREP	1	CERT	$ 1,154.08	mo	100.0%	01-5	$ 1,154.08	$ 7,172.67	$ -		82.32	$ 387.98							10	0.821429					$ 1,154.08	$ 16.73	$ 1,154.08	$ 71.55	$ 1,061.74	$ 3.59	$ 109.31
CERT	11	61	Burns	Linda	Teacher	1	CERT	$ 5,713.85	mo	100.0%		$ 5,713.85				0.00	$ -													$ 5,713.85	$ 82.86	$ 5,130.74	$ -	$ 5,130.74	$ -	$ -
CERT			Burns	Linda	ELOP Stipend	5	CERT	$ 600.00	mo	100.0%		$ 3,000.00	$ 8,713.82	$ 0.03		0.00	$ -													$ 2,172.39	$ 31.50	$ 1,868.24	$ 4.36	$ 1,868.24	$ -	$ 131.58
CLS	12	68	Glenz	Bruce	Custodian	40	CLASS	$ 16.00	hr	100.0%		$ 640.00				0.00	$ -												$ -	$ 640.00	$ 9.28	$ 640.00	$ 39.68	$ 640.00	$ -	$ -
CLS			Glenz	Bruce	Holiday Pay	2	CLASS	$ 16.00	mo	100.0%		$ 32.00				0.00	$ -													$ 32.00	$ 0.46	$ 32.00	$ 1.98	$ 32.00	$ -	$ -
CLS			Glenz	Brook	Vac Pay	1.6179	CLASS	$ 16.00	mo	100.0%		$ 25.87	$ 697.87	$ 0.00		0.00	$ -													$ 25.87	$ 0.38	$ 25.87	$ 1.60	$ 25.87	$ 0.35	$ 10.54
CLS			Schade	Alyssa	ELOP Program	40	CLASS	$ 25.00	hr	100.0%		$ 1,000.00				0.00	$ -													$ 1,000.00	$ 14.50	$ 1,000.00	$ 62.00	$ 1,000.00	$ -	$ -
CLS			Schade	Alyssa	Art Docent	3	CLASS	$ 100.00	hr	100.0%		$ 300.00				0.00	$ -													$ 300.00	$ 4.35	$ 300.00	$ 18.60	$ 300.00	$ -	$ -
CLS			Schade	Alyssa	Sub Para	52	CLASS	$ 16.00	hr	100.0%		$ 832.00	$ 2,132.00	$ -		0.00	$ -													$ 832.00	$ 12.06	$ 832.00	$ 51.58	$ 832.00	$ 1.67	$ 32.19
								$ 16,716.39		4.03	$ -	$ 82.32	$ 387.98											$ 827.41	$ 1,000.00	$ -	$ -	$ 827.41	$ 17,888.73	$ 259.39	$ 16,902.54	$ 620.16	$ 16,907.21	$ 9.59	$ 282.82

Employee Category
Full Time
2

Pull A Payrl Report and Fill In The following for the board chart....

Coffee Creek School District

Payroll Statistics For June 30, 2024



Coffee Creek Elementary School District

MONTHLY PAYROLL SUMMARY & CHECKLIST

Reporting Pay Period 07/01/2024 - 07/31/2024

$	616.87	Timesheet Amount
$	616.87	Prelist Gross Amount
$	616.87	Escape Adjust Payroll Amount
$	(0.00)	**Difference**

**Note: All Gold fields auto-populate from pre-list
All Other fields are pulled directly from corresponding Escape reports!

Deduction Audit

		Escape Total		Difference
$ -	H/W Employee Deduction Totals	$ -	Balanced to Pay 34 Y / N	$0.00
$ -	H/W Employer Contribution Totals	$ -	Balanced to Pay 34 Y / N	$0.00
$ -	TSA's (Group Code A)	$ -	Balanced to Pay 17 Y / N	$0.00
$ -	PERS Employee	$ -	Balanced to Pay 01 Y / N	$0.00
$ -	PERS Employer	$ -	Balanced to Pay 01 Y / N	$0.00
$ -	STRS Employee Reductions	$ -	Balanced to Pay 01 Y/ N	$0.00
$ -	STRS Employer Contributions	$ -	Balanced to Pay 01 Y/ N	$0.00
$ 9.13	W/C Balanced to Pay01	$ 9.13	Balanced to Pay 01 Y/ N	$0.00
$ -	125 Plan Deductions	$ -	Balanced to Pay 01 Y/ N	$0.00
$ 616.87	OASDI Subject Gross	$ 616.87	Balanced to Pay 01 Y/ N	$0.00
$ 76.49	OASDI Deductions/Contributions Total	$ 76.50	Balanced to Pay 01 Y/ N	-$0.01
$ 616.87	Medi Subject Gross	$ 616.87	Balanced to Pay 01 Y/ N	$0.00
$ 17.89	Medi Deductions/Contributions Total	$ 17.88	Balanced to Pay 01 Y/ N	$0.01
$ 0.31	SUI Contributions	$ 0.31	Balanced to Pay 01 Y/ N	$0.00
$ 616.87	FIT Subject Gross	$ 616.87	Balanced to Pay 01 Y/ N	$0.00

State of California Bureau of Labor Statistics Data

Total # of Employees Including Subs	**1**
Total # of Women Employees (Including Subs)	**0**
Total # of Certificated (NO Subs)	**0**

Liz McIntosh — 7/19/2024

Signature — HR/Payroll Technician — Date

Courtney Bayley — 7/19/2024

Signature — TCOE Chief Business Official — Date

Signature — Coffee Creek Supt or Authorized Designee — Date

Pay Date 07/31/2024

EARNINGS by Earnings Code	Income	Adjustments
Regular	616.87	
TOTAL	616.87	

EARNINGS by Group	Income	Adjustments
Misc	22.87	
Reg Pay	594.00	
TOTAL	616.87	

EARNINGS		Person Type		Female Employees
CLASS	1	616.87		.00
TOTAL	1	616.87	0	.00

TAXES	Employee	Employer	Total	Subject Grosses
FEDERAL TAX				616.87
STATE TAX				616.87
Soc Sec	38.25	38.25	76.50	616.87
Medicare	8.94	8.94	17.88	616.87
SUI		.31	.31	616.87
Workers Comp		9.13	9.13	616.87
SUBTOTAL	47.19	56.63	103.82	

REDUCTIONS	Employee	Employer	Total	Subject Grosses
SUBTOTAL			.00	

DEDUCTIONS	Employee	Employer	Total	Subject Grosses
SUBTOTAL			.00	
TOTALS	47.19	56.63	103.82	

Vendor Summary for Pay Date 07/31/2024

Vendor Checks	
Vendor Liabilities	

Cancel/Reissue for Process Date 07/31/2024

Reissued	
Cancel Checks	
Void ACH	

BALANCING DATA

		569.68	Net Pay
Gross Earnings	616.87	47.19	Deductions
District Liability	56.63	56.63	Contributions
	673.50	673.50	

NET

Direct Deposits	569.68	1
Checks		
Partial Net ACH		
Negative Net		
Check Holds		
Zero Net		
TOTAL	569.68	1

Pay22a

Payroll Errors by Pay Date

Pay Date 07/31/2024

Employee Name	(ID) SSN4	Pay Cycle	Category	Msg Code	Message

Pay Date

* denotes FATAL error

Selection: Grouped by Pay Date - Sorted by Employee, Filtered by (Org = 302, Starting Pay Date = 7/31/2024, Paid Only? = N, Error Category = , Limit Errors? = N)

Generated for Liz McIntosh (LMCINTOSH), Jul 19 2024 10:47AM

Coffee Creek Elementary School District Prelist 07/01/2024 - 07/31/2024

Employee Type or Wage Type	Paycycle	EE ID in Escape	Last name	First Name	position	Unit Worked	Sal Table	Rate	Unit	Distribution	Account Code	Distributed Earnings	Escape Earnings	Difference Dist. Earnings vs. Escape	Retirement Check Column	PERS New 8% Classic 7%	PERS ER 26.680%		STRS EE 10.205% New, 10.25% Classic	STRS ER 19.10%	Employee Paid	Female	Certificated w/o Sub	Leave Type	Leave Amount (Hours/Days)	H&W EE	H&W ER	TSA	FSA/HSA & 125 Policies	125 Plan Reductions	Medicare Wages (affected by 125 plan only)	Medicare Deduction & Contribution Amounts (1.45% Both Sides)	OASDI Wages (affected by 125 plan only)	OASDI Deduction & Contribution (6.2% both sides)	FIT/SIT Subject Wages (reduced by 125 Plan, TSA & Retirement)	SUI (No Board Members/Students)		WorkComp (1.47% on gross earnings)
CERT	11	[illegible]	Fox	[illegible]	ELOP Stipend	0	CERT/SUP	$ 600.00	mo	100.0%		$				0.00	$ -		$ -	$ -	0									$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -
CERT			Fox	[illegible]	Teacher	0	CERT	$ 1,262.37	mo	100.0%	[illegible]	$				0.00	$ -		$ -	$ -										$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -
CLS	12	[illegible]	[illegible]	Bruce	Custodian	32	CLASS	$ 16.50	hr	100.0%		$ 528.00				0.00	$ -		$ -	$ -	1							$		$ -	$ 528.00	$ 7.66	$ 524.00	$ 32.74	$ 528.00	$		$ -
CLS			[illegible]	Bruce	Holiday Pay	4	CLASS	$ 16.50	hrs	100.0%		$ 66.00				0.00	$ -		$ -	$ -										$ -	$ 66.00	$ 0.96	$ 66.00	$ 4.09	$ 66.00	$		$ -
CLS			[illegible]	Bruce	Vac Pay	1.3865	CLASS	$ 16.50	hrs	100.0%		$ 22.87	$ 616.87	$ (0.00)		0.00	$ -		$ -	$ -										$ -	$ 22.87	$ 0.33	$ 22.87	$ 1.42	$ 22.87	$ 0.31		$ 9.11
												$ 616.87	$ 616.87	$ (0.00)	$ -	$ -	$ -		$ -	$ -	1.00	0.00	0.00	###	0.00	$ -	$ -	$ -	$ -	$ -	$ 616.87	$ 8.94	$ 616.87	$ 38.25	$ 616.87	$ 0.31	$ -	$ 9.11

Pull A Paykit Report and Fill In The following for the board chart...

Employee Category

Full Time 0

WORKSHEET TO TRACK EXTRA HOURS FOR SICK LEAVE

07/01/2024 - 07/31/2024 PAYROLL

EMPLOYEE			ESCAPE EMPLOYEE ID #	NUMBER OF EXTRA HOURS CURRENT MONTH	SICK LEAVE HOURS ACCRUED @ 0.04615	SICK LEAVE HOURS POSTED CURRENT MONTH	SICK LEAVE HOURS CURRENT MONTH BALANCE
Fox	Luane				0.0000	0.0000	
Glavaz	Bruce		56	36	1.6614	-1.6614	
TOTALS							0.0000
					Total SL Accrual Batch	-1.6614	

WORKSHEET TO TRACK EXTRA HOURS FOR VACATION

07/01/2024 - 07/31/2024 PAYROLL

Post then verify

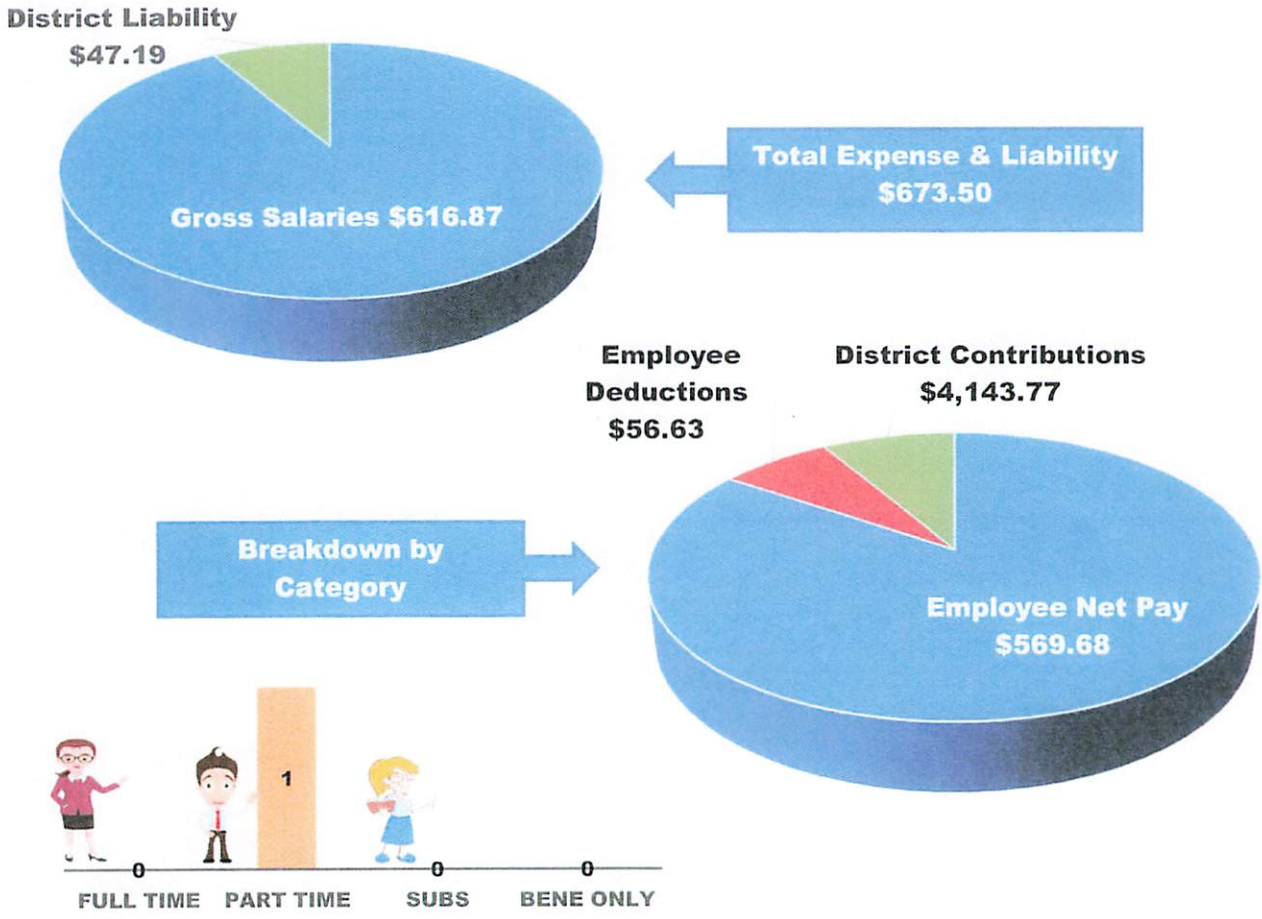
EMPLOYEE		Vac Pay Factor	ESCAPE EMPLOYEE ID #	NUMBER OF EXTRA HOURS CURRENT MONTH	VACATION LEAVE HOURS ACCRUED @ 0.03845	Vacation Accrual Hours to Post OR Pay off for Timecard EE's	VACATION LEAVE ENDING BALANCE CURRENT MONTH
Glavaz	Bruce	0.0385	56	36	1.3860	0.0000	Pay his vacation each month - he's hourly
				0.00	0.0000		
					Total Vac Accrual Batch	0.00000	

Accrual Batch Total	-1.6614
Payroll Leaves Total	0.00
Combined Batch Total	-1.6614



Coffee Creek School District

Payroll Statistics For July 31, 2024



Coffee Creek School District

NORTHERN CALIFORNIA SCHOOLS INSURANCE GROUP

Date: 5/18/2024 **5/22/2024**
Consultant: Monika Childs King | (530) 722-2621 | mchilds@iwins.com
Contact: Bruce

When completing the recommendations, please address each one with a date completed or anticipated.
Please complete and return within 60 days of receipt.

Site Name	COFFEE CREEK SCHOOL

Adjacent Premises Hazards: No issues found at time of visit.

Significant Premises Changes: No changes at time of visit.

General Recommendations (Issues found more than twice and generally exist at all district sites): N/A

Area	Other Trees
Comments	The tree branches hanging down around/over the building should be trimmed back. It's suggested to hire an arborist to assess the tree(s) for guidance on trimming, managing, and preserving the tree(s).



Priority	Assigned To: Department or Name	Date Planned	Date Completed
Normal	Bruce / Facilities		7/17/24

Area	Athletic Facilities & Gymnasiums Tennis Court
Comments	The asphalt was defective. The area should be repaired and made level with surrounding surfaces to eliminate trip and fall hazards.

Priority	Assigned To: Department or Name	Date Planned	Date Completed
Normal	Board	Assessing options + cost	

This report does **not** certify that all sites, facilities, materials, equipment, or operations are in compliance with any federal, state, or local laws, rules, or regulations. The information does not conclude that all possible infractions, hazards, or conditions were observed or reported.

Coffee Creek School District

NORTHERN CALIFORNIA SCHOOLS INSURANCE GROUP

Area	Classrooms		
Comments	Chemical storage cabinet doors should be kept closed and locked to prevent inadvertent chemical container falls and to prevent unauthorized access.		
Priority	Assigned To: Department or Name	Date Planned	Date Completed
High Priority	Bruce		7/17/24

Area	Other Defensible Space		
Comments	The dead trees on the property line should be removed and the areas should be trimmed back to meet fire standards for defensible space.		
Priority	Assigned To: Department or Name	Date Planned	Date Completed
High Priority	Bruce	Fall Sept/Oct	

Area	Athletic Facilities & Gymnasiums Playground		
Comments	The fall cushioning used to provide fall protection below the play equipment was shallow in areas. The fall cushioning depth should be maintained at least to the level of the marks on the support structure throughout the entire fall zone. This is typically 9 to 12 inches of depth. The height of the equipment should determine the type and depth of the fall protection material selected. To provide suitable fall protection, the district should review Table 1 (Critical Heights of Loose-Fill Materials) in the CPSC Handbook for Public Playground Safety. http://www.cpsc.gov/PageFiles/122149/325.pdf		
Priority	Assigned To: Department or Name	Date Planned	Date Completed
High Priority	Bruce	Aug. 19	

This report does **not** certify that all sites, facilities, materials, equipment, or operations are in compliance with any federal, state, or local laws, rules, or regulations. The information does not conclude that all possible infractions, hazards, or conditions were observed or reported.

California Department of Education

DataQuest Home / Teaching Assignment Monitoring Outcomes by FTE

2022-23 Teaching Assignment Monitoring Outcomes by Full-Time Equivalent (FTE)

Coffee Creek Elementary Report (53-71670) Disaggregated by Subject

+ **Report Description**

+ **Report Glossary**

+ **Report Options and Filters**

Filters Enabled:
School Type: Non-Charter
Reset Filters

Subject Area	Total Teaching FTE	Clear	Out-of-Field	Intern	Ineffective	Incomplete	Unknown	N/A
Self-Contained Class	1.3	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

Report Totals

Name	Total Teaching FTE	Clear	Out-of-Field	Intern	Ineffective	Incomplete	Unknown	N/A
Coffee Creek Elementary	1.3	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Trinity	96.8	74.5%	8.8%	3.1%	4.7%	5.4%	0.5%	2.9%
Statewide	245,801.8	85.1%	2.9%	1.8%	4.9%	4.9%	0.3%	0.2%

Note: Data for classroom-based teaching assignments taught by teachers without a Statewide Education Identifier (SEID) are not included in the Teacher Assignment Monitoring Outcome (AMO) by Full-Time Equivalency (FTE) report. Data are not included for districts and independently reporting charter schools (IRCs) that did not certify their California Longitudinal Pupil Achievement Data System (CALPADS) Fall 2 submission. Due to rounding error, partial FTE counts by AMO may not sum exactly to the Total FTE displayed

in the report for the selected reporting level and filters. For more information about this report, including data sources and timelines, data uses, downloadable files, and a description of the methodology and business rules for processing the data, please visit the CDE Information about the Teaching Assignment Monitoring Outcome Report webpage.

* Charter school data are removed by default from all district-level reports, including the associated state and county Report Totals. To include charter school data in district-level reports, select the "Reset Filters" button on district-level reports to show data for "All Schools" OR select the desired School Type filter from within the expandable Report Filters menu on the desired DataQuest report.

** Results produced using the Alternative School report filter are based on the Alternative School Accountability Status (ASAS) during associated academic year, which is based on the Dashboard Alternative School Status (DASS). The Alternative School report filter is strictly intended to facilitate comparisons for traditional charter and non-charter schools by allowing for the removal of alternative schools, which generally serve "high-risk" student populations. More information about alternative school accountability can be found on the CDE Dashboard Alternative School Status (DASS) webpage.

E-rate for Coffee Creek Elementary

Discussion: Participate in e-Rate for 2024-25 SY

Category 1- Internet provider and services

Category 2 – Devices to bring the internet to the classroom

Category 1

CCESD is currently TDS as their primary. Com-Pair is lined as the secondary backup.
TDS is located in Minnesota. Service requests are subcontracted through a company in Anderson. Com-Pair is located in Redding.
The E-Rate consultant works on a formula:

Category 1 example of a typical formula is a base fee plus 20% of what E-Rate saved the client

In SY 22/23:

E-rate Consultant……...-$1,700 (Fees)
IT Services..... …-$6,744 (Internet service provider)
E-rate ..... +$5,395
Net Cost to the district.=$3,049

So the client gets $6,744 worth of services for $3,049.
IF CCESD chose not to participate in E-rate, then the district would have paid the full $6,744.*
*Depending on the service provider

Category 2

This category is for buying equipment to distribute internet at the school - switches, access points, etc.

Right now, Coffee Creek is using an older access point (AP) from TCOE. This AP is not under warranty. CC is using a network switch from another school district's e-waste pile. The switch is also not under warranty.

An issue that needs to be addressed

Liability and insurance require the school to have a network filter. Currently, there is no network filter in place when CC switched to TDS. Students and staff have open access to any site on the internet.
Currently, 7/9 districts' internet flows through TCOE utilizing TCOE's filter. For CC to utilize it, CC would need to switch back to Com-Pair's circuit.

Trinity County Office of Education

Fabio Robles, Ed.D.
Trinity County
Superintendent of Schools

P.O. Box 1256 201 Memorial Drive, Weaverville, CA 96093-1256
(530) 623-2861 FAX (530) 623-4489
https://www.tcoek12.org

June 21, 2024

Tim Nordstrom
Superintendent
Coffee Creek Elementary School
261 Coffee Creek Rd.
Coffee Creek, CA 96091

RE: Trinity County Office of Education 2024 Mini-Grant Award

Dear Tim Nordstrom

Congratulations!

Your application for one of the TCOE mini-grants has been (tentatively) approved. Please refer to page 2 of this letter for some clarifying questions our committee needs addressed before your request can be fully approved.

We have (tentatively) approved the following request:

"Facilities safety We need to purchase a riding lawnmower in order to efficiently keep the area around the school clear for fire safety. We need to fell two trees that are leaning on two of our buildings. This will create a safety hazard on the structure of the two buildings in the future if not removed. We need to contract with an architect to begin drawing up plans for the kitchen to bring it up to go. This is the first step to show progress on this action for County Health Code. We have a 15K grant to start this, but we will need additional funds to complete this step."

You will be awarded $30,000 that will be effective for the 2024 - 2025 school year.

Requirements: Your award will be made with the expectation that it falls within current legal and regulatory requirements in addition to being eligible for insurance coverage (if applicable).

Payment: You will need to contact Cindy Blanchard at cblanchard@tcoek12.org to receive your awarded amount.

Milestone Reporting: Grant awardees are expected to report back on their status over the course of the year. Please use ***https://trinitycoe.qualtrics.com/jfe/form/SV_1Ba3Di11pFPBLsW*** to report on your progress on October 1, 2024, January 7, 2025 and May 6, 2025. If your project is completed prior to any of these dates there will be an option to indicate that status.

Trinity County Office of Education

Fabio Robles, Ed.D.
Trinity County
Superintendent of Schools

P.O. Box 1256 201 Memorial Drive, Weaverville, CA 96093-1256
(530) 623-2861 FAX (530) 623-4489
https://www.tcoek12.org

Grant Implementation Assistance: If you need additional assistance to implement your project please contact Fabio Robles, County Superintendent of Schools: frobles@tcoek12.org.

Again, we send our congratulations! We're proud to be supporting your local ideas and goals on behalf of all of the students, staff and families of Trinity County.

Best Regards,

Fabio Robles, Ed.D.
Trinity County Superintendent of Schools

Clarifying Questions Regarding Your 2024 Mini-Grant Application

Consider how you will track progress of this grant and the impact on the safety of your students. How will you report progress at the check points through the year.

Lozano Smith
ATTORNEYS AT LAW

Karen M. Rezendes
Attorney at Law

E-mail: krezendes@lozanosmith.com

April 26, 2024

Brian Burns
Superintendent
Coffee Creek School District
261 Coffee Creek Rd. Box 4740
Trinity Center, CA 96091

Re: 2024-2025 Agreement Renewal

Dear Mr. Burns:

On behalf of Lozano Smith, thank you for the privilege to partner with you during the 2023-2024 school year. We are truly grateful for your dedication to our education communities and students, and we deeply value the trust you have placed in Lozano Smith.

As the start of another school year approaches, we look forward to our continued partnership with you and your team. Below, we have included an overview of the 2024-25 agreement renewal process.

Client-Centered Billing Practices
We are pleased to confirm that the following cost containment measures will continue during the 2024-2025 school year:

- There are no required minimum billing periods for phone calls or email correspondences. We will bill actual time spent.
- Our industry-leading practice, designed to save costs for clients, will remain at the 1/10 (.10) of an hour increment.
- We will use our "tiered" billing system to ensure that when appropriate, associate attorneys can be utilized, providing you with cost savings. Based on an annual review, we adjust legal staff rates to reflect updated tiered status levels for all attorneys based upon their years of experience.

Through these practices and other cost-saving measures, your legal team remains dedicated to delivering the highest quality service in a timely and client-centered manner.

Year-Round Resources
We invite you to explore Lozano Smith's client resource center at LozanoSmith.com/clientresources. Here, your team can access a variety of publications, podcasts, and find workshops covering critical legal issues impacting California's public education agencies.

Agreements
Enclosed, you will find two agreements for legal services for the 2024-2025 school year. Once your Board approves the renewal agreement, please retain one original and sign and return the other to us in the enclosed, self-addressed envelope.

Thank you again for the opportunity to serve as your legal partner. Please let us know if we can answer any questions related to the 2024-2025 legal services agreement. We wish you continued success in all your endeavors.

Sincerely,

LOZANO SMITH



Karen M. Rezendes
Managing Partner

KMR/em

CONSOLIDATED APPLICATION AND REPORTING SYSTEM (CARS)

Coffee Creek Elementary (53 71670 0000000)

2024–25 Application for Funding

Required fields are denoted with an asterisk (*).

Data saved successfully as a draft. Review all messages below. Warnings may require action before the data can be certified. Notes are informational only.

Hide Messages | Export Messages | Clear Messages

Severity	Description
Warning	Protected Prayer Certification must be certified before this submission.
Warning	Local Board Approval checkbox is required

Local Governing Board Approval

The local educational agency (LEA) is required to review and receive approval of their Application for Funding selections with their local governing board.

By checking this box the LEA certifies that the Local Board has approved the Application for Funding for the listed fiscal year: ☐ *

District English Learner Advisory Committee Review

Per Title 5 of the California Code of Regulations Section 11308, if your LEA has more than 50 English learners, then the LEA must establish a District English Learner Advisory Committee (DELAC) which shall review and advise on the development of the application for funding programs that serve English learners.

By checking this box the LEA certifies that parent input has been received from the District English Learner Committee (if applicable) regarding the spending of Title III funds for the listed fiscal year: ☐

Application for Categorical Programs

To receive specific categorical funds for a school year, the LEA must apply for the funds by selecting Yes below. Only the categorical funds that the LEA is eligible to receive are displayed.

* **Title I, Part A (Basic Grant)**: ESSA Sec. 1111 et seq. SACS 3010	◉ No ○ Yes
* **Title II, Part A (Supporting Effective Instruction)**: ESEA Sec. 2104 SACS 4035	○ No ◉ Yes
Title II, Part A funds used through the Alternative Fund Use Authority (AFUA): Section 5211 of ESEA	◉ No ○ Yes
* **Title III English Learner**: ESEA Sec. 3102 SACS 4203	◉ No ○ Yes
* **Title III Immigrant**: ESEA Sec. 3102 SACS 4201	◉ No ○ Yes
* **Title IV, Part A (Student and School Support)**: ESSA Sec. 4101 SACS 4127	◉ No ○ Yes
Title V, Part B Subpart 1 Small, Rural School Achievement Grant: ESSA Sec. 5211 SACS 5810	○ No ◉ Yes

Last Saved: Jnanna David (ndavid), 5/22/2024 4:11 PM, Draft

Save Return to List

MEMORANDUM OF UNDERSTANDING
BETWEEN
COFFEE CREEK SCHOOL DISTRICT
AND
CALIFORNIA DENTAL ASSOCIATION FOUNDATION

This Memorandum of Understanding ("MOU") is made and entered into this first day of August 2024, between Coffee Creek School District ("District"), and California Dental Association Foundation ("CDAF").

WHEREAS, it is the intention of the parties to participate and support a onetime dental clinic event on October 9-11, 2024 ("Dental Clinic Event") for the purpose of providing students with the opportunity to receive needed dental services provided by California licensed CDAF dental volunteers; and

WHEREAS, in furtherance of the Dental Clinic Event, the parties desire to enter into this MOU, under which District may provide transportation services to and from the event and assist in the collection of patient forms and other documents related to the event, and CDAF may accept such services from District;

NOW, THEREFORE, the parties agree as follows:

I. DUTIES AND RESPONSIBILITIES OF DISTRICT:
   a. With the assistance of Trinity County Office of Education, provide District students with transportation services to and from the Dental Clinic Event, from Wednesday, October 9, 2024, through Friday, October 11, 2024;
   b. To collect completed permission slips, consents for services, and release of records to dental home referral from participating District students.

II. DUTIES AND RESPONSIBILITIES OF CDAF:
   a. To host the Dental Clinic Event;
   b. To provide District with the patient forms to be completed by participating District students, including permission slips, consents for services, and release of records to dental home referral.

III. INSURANCE: CDAF shall procure and maintain for the duration of the MOU insurance against claims for injuries to persons or damages to property which may arise from or in connection with the performance of the work hereunder and the results of that work by CDAF, its agents, representatives, employees or subcontractors.

Minimum Scope and Limit of Insurance:

A. CDAF shall maintain a commercial general liability (CGL) insurance policy (Insurance Services Office Form CG 00 01) covering CGL on an occurrence basis, including products and completed operations, property damage bodily injury and personal & advertising injury with limits in the amount of $1,000,000, and a general aggregate limit of $2,000,000.

   District, its officers, officials, employees, and volunteers are to be covered as additional insureds on the General Liability policy with respect to liability arising out of work or operations performed by or on behalf of CDAF including materials, parts, or equipment furnished in connection with such work or operations. Additional insured should read as follows:

   Coffee Creek School District
   261 Coffee Creek Road, Box 4740
   Trinity Center, CA 96091

B. CDAF shall be required to carry professional/malpractice/errors & omissions coverage in the amount of $1,000,000 per occurrence or claim, $2,000,000 aggregate.

C. WORKER'S COMPENSATION: CDAF acknowledges that it is aware of the provisions of the Labor Code of the State of California which requires every employer to be insured against liability for workers' compensation or to undertake selfinsurance in accordance with the provisions of that Code and it certifies that it will comply with such provisions before commencing the performance of the work of this MOU. A copy of the certificates evidencing such insurance with policy limits of at least $1,000,000 per accident for bodily injury or disease (or, in the alternative, a signed District Workers' Compensation Exemption form) shall be provided to District prior to commencement of work.

CDAF shall supply a Certificate of Insurance and endorsements signed by the insurer evidencing such insurance to District prior to commencement of work. However, failure to obtain the required documents prior to the work beginning shall not waive CDAF's obligation to provide them. District reserves the right to require complete, certified copies of all required insurance policies, including endorsements required by these specifications, at any time. Each insurance policy required above shall provide that coverage shall not be canceled, except with notice to District. Insurance is to be placed with insurers with a current A.M. Best's rating of no less than A:VII, unless otherwise acceptable to District.

Any deductibles or self-insured retentions must be declared to and approved by District. District may require CDAF to purchase coverage with a lower deductible or retention or provide proof of ability to pay losses and related investigations, claim administration, and defense expenses within the retention.

For any claims related to this MOU, CDAF's insurance coverage shall be primary coverage at least as broad as ISO CG 20 01 04 13 as respects District, its officers, officials, employees, and volunteers. Any insurance or self-insurance maintained by District, its officers, officials, employees, or volunteers shall be excess of CDAF's insurance and shall not contribute with it.

CDAF hereby grants to District a waiver of any right to subrogation which any insurer of said CDAF may acquire against District by virtue of the payment of any loss under such insurance. CDAF agrees to obtain any endorsement that may be necessary to affect this waiver of subrogation, but this provision applies regardless of whether or not District has received a waiver of subrogation endorsement from the insurer.

IV. MUTUAL INDEMNIFICATION: Each party shall save harmless and indemnify the other party against all claims, demands, suits, judgments, expenses and costs of any and every kind on account of injury to or death of persons or loss of or damage to property arising out of any act or omission of the parties, its officers, or employees, under the terms of this MOU.

V. COMPLIANCE WITH APPLICABLE LAWS: District shall comply with any and all federal, state and local laws affecting the services covered by this MOU, including the Health Insurance Portability and Accountability Act. District shall execute the Health Insurance Portability and Accountability Act Supplement attached to this MOU as Exhibit "A", which is hereby incorporated by reference.

VI. CONFIDENTIALITY: All information and records obtained in the course of providing services under this MOU shall be confidential and shall not be open to examination for any purpose not directly connected to the administration of this program. Both parties shall comply with State and Federal requirements regarding confidential information.

VII. LICENSING AND PERMITS: CDAF shall maintain the appropriate licenses throughout the life of this Agreement. CDAF shall also obtain any and all permits which might be required by the work to be performed herein.

VIII. RELATIONSHIP BETWEEN THE PARTIES: It is expressly understood that in the performances of the services herein, CDAF, and the agents and employees thereof, shall act in an independent capacity and as an independent contractor and not as officers, employees or agents of District.

IX. TERM OF AGREEMENT: This MOU shall commence on August 1, 2024 and shall terminate on October 31, 2024.

X. TERMINATION: Either party hereto may terminate this MOU for any reason by giving thirty (30) calendar days written notice to the other parties. Notice of Termination shall be by written notice to the other parties and be sent by registered mail.

XI. NOTICES: All notices, demands, requests or other communication required or permitted to be given hereunder ("Notices") shall be in writing and sent by First Class United States Mail, postage prepaid to the following address:

District's address for notice:

Coffee Creek School District
261 Coffee Creek Road, Box 4740
Trinity Center, CA 96091

CDAF's address for notice:

California Dental Association Foundation
1201 K Street,14th Floor
Sacramento, CA 95814

XII. AMENDMENT: The provisions of this MOU may not be modified, except by a written instrument signed by both parties.

XIII. ENTIRE AGREEMENT: This MOU constitutes the entire agreement between the parties with respect to the subject matter hereof, and all prior or contemporaneous agreements, understandings and representations, oral or written, are superseded.

XIV. DESIGNATED AGENTS: The parties represent and warrant that they have full power and authority to execute and fully perform their obligations under this MOU pursuant to their governing instruments, without the need for any further action, and that the person(s) executing this MOU on behalf of each party are the duly designated agents of each party and are authorized to do so.

XV. JURISDICTION AND VENUE: This MOU and the obligations hereunder shall be construed in accordance with the laws of the State of California. The parties hereto agree that venue for any legal disputes or litigation arising out of this MOU shall be in Trinity County, California.

XVI. SEVERABILITY: If any provision of this MOU is determined by a court of competent jurisdiction to be invalid or unenforceable, the remainder of this Agreement shall not be affected thereby. Each provision shall be valid and enforceable to the fullest extent permitted by law.

XVII. SUBCONTRACTING AND ASSIGNMENT: The right, responsibilities and duties established under this MOU are personal to the parties hereunder and may not be transferred or assigned without the express prior written consent of the other party.

XVIII. WAIVER: No provision of this Agreement or the breach thereof shall be deemed waived, except by written consent of the party against whom the waiver is claimed.

[signature page to follow]

IN WITNESS WHEREOF, the parties have executed this MOU effective as of the date first written above.

COFFEE CREEK SCHOOL DISTRICT:	**CALIFORNIA DENTAL ASSOCIATION FOUNDATION:**
By _____	By _____
Name: _____	Name: _____
Title: _____	Title: _____
Date: _____	Date: _____

EXHIBIT "A"
HEALTH INSURANCE PORTABILITY
AND ACCOUNTABILITY ACT SUPPLEMENT

Definitions:

Terms used, but not otherwise defined, in this Agreement shall have the same meaning as those terms in the Privacy Rule.

a. Business Associate. "Business Associate" shall mean District named in the first paragraph of this agreement.
b. Covered Entity. "Covered Entity" shall mean CDAF named in the first paragraph of this agreement.
c. Designated Record Set. "Designated Record Set" shall mean:
   (1) A group of records maintained by or for a covered entity that is:
      a. The medical records and billing records about individuals maintained by or for a covered health care provider;
      b. The enrollment, payment, claims adjudication, and case or medical management record systems maintained by or for a health plan; or
      c. Used, in whole or in part, by or for the covered entity to make decisions about individuals.

   (2) For purposes of this paragraph, the term record means any item, collection, or grouping of information that includes protected health information and is maintained, collected, used, or disseminated by or for a covered entity.

d. Individual. "Individual" shall have the same meaning as the term "individual" in 45 CFR § 164.501 and shall include a person who qualifies as a personal representative in accordance with 45 CFR § 164.502(g).
e. Privacy Rule. "Privacy Rule" shall mean the Standards for Privacy of Individually Identifiable Health Information at 45 CFR Part 160 and Part 164, Subparts A and E.
f. Protected Health Information. "Protected Health Information" shall have the same meaning as the term "protected health information" in 45 CFR § 164.501, limited to the information created or received by Business Associate from or on behalf of Covered Entity.
g. Required By Law. "Required By Law" shall have the same meaning as the term "required by law" in 45 CFR § 164.501.
h. Secretary. "Secretary" shall mean the Secretary of the Department of Health and Human Services or his designee.
i. Electronic Protected Health Information. "Electronic Protected Health Information" ("EPHI") means individually identifiable health information that is transmitted or maintained in electronic media, limited to the information created, received, maintained or transmitted by Business Associate from or on behalf of Covered Entity.
j. Security Incident. "Security Incident" shall mean the attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with systems operations in an information system, but does not

include minor incidents that occur on a daily basis, such as scans, "pings", or unsuccessful random attempts to penetrate computer networks or servers maintained by Business Associate.

k. Security Rule. "Security Rule" shall mean the Standards for the Protection of Electronic Protected Health Information at 45 CFR Part 160 and Part 164, Subparts A and C.

Obligations of Business Associate

Business Associate shall:

a. Not use or disclose Protected Health Information other than as permitted or required by the Agreement or as Required By Law.
b. Use appropriate safeguards to prevent use or disclosure of the Protected Health Information other than as provided for by this Agreement.
c. Mitigate, to the extent practicable, any harmful effect that is known to Business Associate of a use or disclosure of Protected Health Information by Business Associate in violation of the requirements of this Agreement
d. Report to Covered Entity any use or disclosure of the Protected Health Information in violation of the requirements of this Agreement of which it becomes aware.
e. Ensure that any agent, including a subcontractor, to whom it provides or receives Protected Health Information agrees to the same restrictions and conditions that apply through this Agreement to Business Associate with respect to such information.
f. Document disclosures of Protected Health Information and information related to such disclosures as would be required for Covered Entity to respond to a request by an Individual for an accounting of disclosures of Protected Health Information in accordance with 45 CFR § 164.528.
g. Provide to Covered Entity or an Individual, in time and manner agreed to between the parties, information collected pursuant to this Agreement, to permit Covered Entity to respond to a request by an Individual for an accounting of disclosures of Protected Health Information in accordance with 45 CFR § 164.528.
h. Provide access, at the request of Covered Entity, and in the time and manner agreed to by the parties, to Protected Health Information in a Designated Record Set, to Covered Entity or, as directed by Covered Entity, to an Individual in order to meet the requirements under 45 CFR §164.524.
i. Make any amendment(s) to Protected Health Information in a Designated Record set that the Covered Entity directs or agrees to pursuant to 45 CFR §164.526 at the request of Covered Entity or an Individual, and in the time and manner agreed to between the parties.
j. Business Associate shall implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of EPHI that Business Associate creates, receives, maintains, or transmits on behalf of Covered Entity.

k. Business Associate shall conform to generally accepted system security principles and the requirements of the final HIPAA rule pertaining to the security of health information.
l. Business Associate shall ensure that any agent to whom it provides EPHI, including a subcontractor, agrees to implement reasonable and appropriate safeguards to protect such EPHI.
m. Business Associate shall report to Covered Entity any Security Incident within 5 business days of becoming aware of such incident.
n. Business Associate shall make its policies, procedures, and documentation relating to the security and privacy of protected health information, including EPHI, available to the Secretary of the U.S. Department of Health and Human Services and, at Covered Entity's request, to the Covered Entity for purposes of the Secretary determining Covered Entity's compliance with the HIPAA privacy and security regulations.

Permitted Uses and Disclosures by Business Associate

Except as otherwise limited in this Agreement, Business Associate may use or disclose Protected Health Information to perform functions, activities, or services for, or on behalf of, Covered Entity as specified in this Services Agreement, provided that such use or disclosure would not violate the Privacy Rule if done by Covered Entity or the minimum necessary policies and procedures of the Covered Entity.

Obligations of Covered Entity

Covered Entity shall notify Business Associate of any:

a. Limitation(s) in its notice of privacy practices of Covered Entity in accordance with 45 CFR § 164.520, to the extent that such limitation may affect Business Associate's use or disclosure of Protected Health Information.
b. Changes in, or revocation of, permission by Individual to use or disclose Protected Health Information, to the extent that such changes may affect Business Associate's use or disclosure of Protected Health Information.
c. Restriction to the use or disclosure of Protected Health Information that Covered Entity has agreed to in accordance with 45 CFR § 164.522, to the extent that such restriction may affect Business Associate's use or disclosure of Protected Health Information.

Permissible Requests by Covered Entity

Covered Entity shall not request Business Associate to use or disclose Protected Health Information in any manner that would not be permissible under the Privacy Rule if done by Covered Entity.

Term and Termination

a. Term. The Term of these provisions shall be concurrent with the term of the Services Agreement, and shall terminate when all of the Protected Health Information provided by Covered Entity to Business Associate, or created or received by Business Associate on behalf of Covered Entity, is destroyed or returned to Covered Entity, or, if it is infeasible to return or destroy Protected

Health Information, protections are extended to such information, in accordance with the termination provisions in this Section.

b. Termination for Cause. Upon Covered Entity's knowledge of a material breach by Business Associate, Covered Entity shall either:
    a. Provide an opportunity for Business Associate to cure the breach or end the violation and terminate this Agreement if Business Associate does not cure the breach or end the violation within the time specified by Covered Entity;
    b. Immediately terminate this Agreement if Business Associate has breached a material term of this Agreement and cure is not possible; or
    c. If neither termination nor cure are feasible, Covered Entity shall report the violation to the Secretary.
c. Effect of Termination.
    a. Except as provided in paragraph (2) of this section, upon termination of this Agreement, for any reason, Business Associate shall return or destroy all Protected Health Information received from Covered Entity, or created or received by Business Associate on behalf of Covered Entity. This provision shall apply to Protected Health Information that is in the possession of subcontractors or agents of Business Associate. Business Associate shall retain no copies of the Protected Health Information.
    b. In the event that Business Associate determines that returning or destroying the Protected Health Information is infeasible, Business Associate shall provide to Covered Entity notification of the conditions that make return or destruction infeasible. Upon determination that return or destruction of Protected Health Information is infeasible, Business Associate shall extend the protections of this Agreement to such Protected Health Information and limit further uses and disclosures of such Protected Health Information to those purposes that make the return or destruction infeasible, for so long as Business Associate maintains such Protected Health Information.

Reservation of Right to Monitor Activities.
Covered Entity reserves the right to monitor the security policies and procedures of Business Associate.

Specific Provisions for Use and Disclosures by Business Associate of PHI Subject to 42 CFR Part 2.

(a) Covered Entity operates a program for treatment of alcohol or drug abuse, receives federal financial assistance in the operation of that program, and is required to comply with 42 CFR Part 2 pertaining to use and disclosure of patient information and patient records.

(b) Business Associate is a "Qualified Service Organization" as that term is defined at 42 CFR 2.11.

(c) Business Associate acknowledges that it will have access to records that are covered by 42 CFR Part 2. Business Associate agrees that it is fully bound by the provisions of 42 CFR Part 2, and will only use and disclose protected health information

as permitted by those regulations. Business Associate will, if necessary, resist in judicial proceedings any effort to obtain access to patient records not permitted by 42 CFR Part 2.

Miscellaneous

a. Regulatory References. A reference in this Agreement to a section in the Privacy Rule means the section as in effect or as amended.
b. Amendment. The Parties agree to take such action as is necessary to amend this Agreement from time to time as is necessary for Covered Entity to comply with the requirements of the Privacy Rule and the Health Insurance Portability and Accountability Act of 1996, Pub. L. No. 104-191.
c.

Interpretation. Any ambiguity in this Agreement shall be resolved to permit Covered Entity to comply with the Privacy Rule.

June 24, 2024

Mr. Brian Burns
District Representative
Coffee Creek Elementary School District
ST. RT. 2 Box 4740
Trinity Center, CA 96091

Dear Mr. Burns:

Please be advised that all school districts and county offices of education (district) are subject to nonuse payments for all unused sites, pursuant to California Education Code Sections 17219 through 17224.

Failure to return all required forms before August 31, 2024 may result in the District being assessed an improper fee.

An unused site is deemed to be any site owned by a district that is not being used for school purposes. To facilitate this reporting requirement, a *Certification of Unused Sites* (Form SAB 423) is enclosed for your review. This form includes a listing of all the District's previously reported unused sites and should be reviewed thoroughly and verified for accuracy and content, since it is the basis for which an unused site fee is assessed.

The Form SAB 423 must be signed and returned even if the District does not have any unused sites. Electronic Signatures are acceptable. If there are any additions or changes needed to the Form SAB 423, a *Modification of Unused Site Status* (Form SAB 424) must be completed and returned for each site that the District is requesting to:

- Add a site (including sites recently acquired)
- Delete a site
- Waive the fee for a site
- Reduce the fee for a site, or
- Modify any information on the report.

If the State Allocation Board (SAB) has previously granted a waiver for an unused site and the condition that the waiver was granted for continues to exist, the District must recertify by completing Section IV of the Form SAB 424. **An Unused Site fee will be assessed if the District does not recertify**. Please be advised that waivers will not be accepted after the submittal deadline for the current or previous Assessable Year(s). The Form SAB 424 can be found on the Office of Public School Construction (OPSC) website located at www.dgs.ca.gov/opsc. For your convenience, a copy is enclosed with this letter. You may make as many copies as needed.

Please be advised, OPSC may verify District unused site information. Failure to report unused sites is a violation of the provisions in Education Code Sections 17219 through 17224:

> Whenever a school district acquires or has acquired a site for school purposes, as determined by the State Allocation Board, and does not use the site within (1) five years of the date of acquisition for kindergarten, if any, and any of grades 1 to 8, inclusive, maintained by an elementary school district or a unified school district, or, (2) seven years of the date of acquisition for any of grades 7 to 12, inclusive maintained by a high school district or a unified school district, or if a school district has a site at any grade level that has previously been used but has not been used for school purposes within the preceding five years, the school district shall be subject to nonuse payments...

All forms must be signed by the District Superintendent or an authorized District Representative and returned to OPSC before August 31, 2024. If the Superintendent/Authorized District Representative has changed please also submit an *Eligibility Determination,* Form SAB 50-03. The Form 50-03 can be found on the OPSC website under the "Forms" tab.

Return all completed forms via email to:

Ryan.Malloy@dgs.ca.gov
cc: opscapplicationreviewteam@dgs.ca.gov

Please clearly label the Subject "Unused Site Submittal – (District Name)"

You may also mail forms to:

Office of Public School Construction
707 3rd Street
West Sacramento, CA 95605
Attention: Unused Sites Program

Should you have any questions, please contact Ryan Malloy at (279) 946-8472 or by e-mail at ryan.malloy@dgs.ca.gov. You may also contact Adrian Felseghi at (279) 946-8425 or by e-mail at adrian.felseghi@dgs.ca.gov.

Sincerely,

MICHAEL WATANABE
Deputy Executive Officer
Office of Public School Construction

MW:rm

Enclosures

DEPARTMENT OF GENERAL SERVICES

CERTIFICATION OF UNUSED SITES

SAB 423 (7/06)

STATE ALLOCATION BOARD

OFFICE OF PUBLIC SCHOOL CONSTRUCTION

Date of this Report: June 1, 2024

DISTRICT	DISTRICT NO.	COUNTY	F/Y
Coffee Creek Elementary	71670	Trinity (53)	23-24

Site	Grade Level E-M-H	No. Acres	Year Acquired	Purchase Price	Parcel ID Number	Assessed Value	Assessed Fee	Next Assessable Year
NO UNUSED SITES ON RECORD								

This report lists all of the District's previously reported unused sites, including sites that have received a waiver in previous years. **All School Districts and County Offices of Education are required to report all unused sites to the State Allocation Board, pursuant to California Education Code Sections 17219 - 17224.** An unused site is deemed to be any site owned by the District that is not being used for school purposes.

Please review and verify the information indicated above for accuracy and content and answer the questions listed below. This form must be returned to the Office of Public School Construction no later than August 31, 2024.

1. Do any of the sites listed above meet the conditions for a waiver as outlined in Section IV of the Form SAB 424? **If YES, please complete a Form SAB 424 for each eligible site.**

YES ☐ NO ☐

2. Does the District have any new Unused Sites to report? **If YES, please complete a Form SAB 424 for each new site.**

YES ☐ NO ☑

I certify that I am authorized to represent the Governing Board of the District, that the above information is true and correct and that the District has no additional sites which are unused. If any of the above information is incorrect, omitted, or an unused site is not listed, I have attached Form(s) SAB 424 indicating additional sites or changes to the above information.

Courtney Bayley, CBO
Authorized Agent and Title (Typed or Printed)

530-623-2861 x248
(Area Code) Phone Number

Courtney B
Authorized Agent (signature)

7/11
Date

GENERAL INFORMATION

This form is used by the School District to calculate the district's eligibility for new construction and modernization funding under the School Facility Program (SFP). The business address entered on the application should be the location that the school district wishes the Office of Public School Construction (OPSC) to mail all correspondence regarding this application.

Part I

Complete to designate or change the authorized district representative and/or alternate. Should this be the case, complete the school district information, identify the district representative(s) in Part I and complete the district certification information at the bottom of the form, including the date the district's governing board took appropriate action.

Part II

Complete for new construction baseline eligibility determination. This part is also used to request an adjustment to an approved new construction baseline eligibility as a result of subdivisions (f), (k) and (l) of Section 1859.51 due to either errors or omissions of information submitted by the district when it requested the initial baseline eligibility, because of a reorganization election that has changed the classroom inventory of the district or to change the classroom inventory that was reported at the time the district requested its initial determination of existing school building capacity as a result of special day class loading. The following documentation is necessary to determine new construction baseline eligibility and must be submitted with this form:

- A completed Form SAB 50-01 based on the latest enrollment data.
- A completed Form SAB 50-02.

Part III

Complete for modernization baseline eligibility determination at a specific site. Districts must be able to provide a drawing of the site where eligibility for modernization is generated with its request for an eligibility determination. The drawing must identify all permanent and portable classrooms on the site and their ages. If the district intends to use the square footage method in Option B, the drawings must also identify the square footage of all facilities on the site.

Part III is also used to request an adjustment to the approved baseline eligibility at a specific site as a result of subdivisions (c), (d), (e), (g), (i), and (k) of Section 1859.61 due to one or more of the following:

- an increase in enrollment,
- additional facilities becoming at least 20/25 years old,
- facilities becoming eligible for an additional modernization apportionment, for permanent school buildings every 25 years after the date of its previous apportionment or for portable classrooms every 20 years after the date of its previous apportionment,
- because of errors or omissions of information submitted by the district when it requested the initial baseline eligibility for the site, or
- to change the classroom inventory that was reported at the time the district requested its initial determination of existing school building capacity as a result of special day class loading,
- a replacement of a facility that was previously deemed eligible for modernization but subsequently replaced in a project funded with local funds with no participation from the State. The district should submit a site diagram indicating the replaced facilities and a copy of the contract for construction or acquisition of facilities.

The following documentation is necessary (if not previously submitted to the OPSC) to determine modernization baseline eligibility and must be submitted with this form (as appropriate):

- Site diagram of school where modernization funding is requested. The diagram must indicate the ages and number of all permanent and portable classrooms on the site in accordance with the gross classroom inventory as provided by Section 1859.31.
- If the modernization eligibility will be determined by Option B, the site drawings must also include square footage and/or dimensions of all buildings on the site.

It is not necessary to complete Part III if the district is only requesting funding for new construction and it is not necessary to complete Part II if the district is only requesting funding for modernization.

A district may request that eligibility for new construction or modernization be reviewed and approved by the Board pursuant to Section 1859.20 prior to submitting Form SAB 50-04 to the Board.

For a list of the documents that must be submitted in order for the OPSC to deem an eligibility request for new construction or modernization complete and ready for OPSC processing, consult the OPSC Web site at www.dgs.ca.gov/opsc.

SPECIFIC INSTRUCTIONS

Part I – District Representative Information

Enter the name(s) of district employee(s) that can act on behalf of the district's board. A consultant who is on contract with the district to communicate with the OPSC on behalf of the district's board may be listed. The designee of the Superintendent of Public Instruction shall file modernization applications on behalf of the California Schools for the Deaf and Blind.

Part II – New Construction Eligibility Determination

Indicate if this request is for a new or adjusted eligibility determination. Enter the district-wide information unless filing on a High School Attendance Area (HSAA) or Super HSAA basis. The enrollment projection and the existing school building capacity data are obtained from information reported and determined on the Form SAB 50-01 and the Form SAB 50-02. Once the OPSC has verified the information provided on these forms, it will automatically be transferred to this form to determine the district's eligibility for new construction. The district may manually enter the information from these forms and compute its eligibility; however, it may be adjusted by the OPSC based on verification of Form SAB 50-01 and Form SAB 50-02.

1. Enter either the fifth-year or the tenth-year projected enrollment as shown in Part I of Form SAB 50-01 for grades K–6, 7–8, 9–12 and for the total of non-severe and severe special day class (SDC) projected enrollment.

2. Enter the amounts on Form SAB 50-02, Part III, line 3 for grades K–6, 7–8, 9–12, non-severe and severe.
3. New construction eligibility (i.e., the "baseline eligibility") is determined by subtracting the existing school building capacity (line 2) from the projected five year enrollment (line 1). Report negative numbers in brackets.

Adjustments to the district's new construction baseline eligibility will be made by the OPSC pursuant to Section 1859.51. Contact your project manager at the OPSC for the adjusted baseline eligibility for future request for new construction grants.

Part III – Modernization Eligibility Determination

Modernization eligibility is calculated based on information at a specific site when modernization SFP grants are requested within the district. Therefore, completion of Form SAB 50-01 and Form SAB 50-02 are not needed to determine eligibility for modernization funding. Since the eligibility is site specific, the district must submit a separate Form SAB 50-03 for each site for which it is requesting modernization funding. Indicate if this request is for new baseline eligibility determination or for an adjustment to an approved baseline eligibility as a result of Section 1859.61.

The district may use one of two options to calculate its modernization eligibility at a specific site within the district. The district may select only one option at a time to calculate its modernization eligibility at any given school site. The district may switch options at a later date, if it results in a net gain in eligibility at the site, regardless of whether a funding application has been submitted. Hence, for purposes of adjusting modernization eligibility to include non-classroom buildings previously modernized under the Lease-Purchase Program, a district may switch options for the purposes of obtaining additional modernization apportionments as provided by Section 1859.78.8. To assure timely processing of the application, districts must provide a drawing of the site (if not previously submitted to the OPSC) where modernization funds are generated with the eligibility request to the OPSC. The drawing must identify all permanent and portable classrooms and their ages on the site. If the square footage of Option B is selected, the drawings must also identify the square footages of all facilities on the site. For purposes of determining the age of the building for modernization funding, the 25/20 year period shall begin 12 months after the plans for the building were approved by the Division of the State Architect (DSA); or in the case of permanent or portable classrooms previously modernized with State funds, which are eligible for an additional apportionment, the 25/20 year period shall begin on the date of its previous modernization apportionment. Any drawing that includes classrooms eligible for an additional apportionment pursuant to Section 1859.78.8 should specify both the date the classroom's plans were originally approved by the DSA and the date of its previous modernization apportionment.

1. Enter the school site name from the California Public School Directory published by the California Department of Education.

Option A

2. Enter the number of permanent classrooms by grade level at the school site that would have been included in the Gross Classroom Inventory pursuant to Section 1859.31 that are at least 25 years old and include any permanent classrooms not previously reported that have become at least 25 years old. If the school is a 6–8 middle school only, then report all classrooms at the 7–8 grade level. If this request is to adjust the classrooms reported for non-severe or severe pupil loading, the total classrooms reported must be equal to the classrooms reported at the time of the district request for initial modernization baseline eligibility. In no event may the number of classrooms reported for non-severe or severe pupils exceed the number of classrooms needed to house non-severe and severe pupils as reported on line 6 using loading standards of 13 for non-severe and 9 for severe classrooms. For purposes of the California Schools for the Deaf and Blind, the loading standard for these severe pupils shall be 9.
3. Enter the total number of portable classrooms by grade level at the school site that would have been included in the Gross Classroom Inventory pursuant to Section 1859.31 that are at least 20 years old and include any portable classrooms not previously reported that have become at least 20 years old. If the school is a 6-8 middle school only, then report all classrooms at the 7–8 grade level. If this request is to adjust the classrooms reported for non-severe or severe pupil loading, the total classrooms reported must be equal to the classrooms reported at the time of the district request for initial modernization baseline eligibility. In no event may the number of classrooms reported for non-severe or severe pupils exceed the number of classrooms needed to house non-severe and severe pupils as reported on line 6 using loading standards of 13 for non-severe and 9 for severe classrooms.
4. Add lines 2 and 3 by the grades shown.
5. Multiply line 4 by 25 for K–6, 27 for 7–8 and 9–12, 13 for non-severe and 9 for severe.
6. Enter the latest California Basic Educational Data Systems (CBEDS) enrollment for the school site identified as it would have been reported utilizing the criteria in Parts A, C and D of Form SAB 50-01. Report continuation high pupils as 9–12. If the school is a 6–8 middle school only, report 6th graders as 7–8.
7. Modernization eligibility (i.e., the baseline eligibility) is the lesser of each column of lines 5 or 6.

Option B

2. Enter the total number of permanent classrooms at the school site that would have been included in the Gross Classroom Inventory pursuant to Section 1859.31 or all permanent square footage at the site that is at least 25 years old.
3. Enter the total number of portable classrooms at the school site that would have been included in the Gross Classroom Inventory pursuant to Section 1859.31 or all portable square footage at the site that is at least 20 years old pursuant to Section 1859.60.
4. Add lines 2 and 3.
5. Enter the remaining number of permanent and portable classrooms at the school site that would have been included in the Gross Classroom Inventory pursuant to Section 1859.31 or all remaining permanent or portable space that is under 25/20 years old.
6. Add lines 4 and 5.
7. Determine the percentage of space on the site that is at least 25/20 years old by dividing line 4 by line 6. Round to four decimal places.

SCHOOL DISTRICT	FIVE-DIGIT DISTRICT CODE NUMBER (SEE CALIFORNIA PUBLIC SCHOOL DIRECTORY)
BUSINESS ADDRESS	HIGH SCHOOL ATTENDANCE AREA (HSAA) OR SUPER HSAA (IF APPLICABLE)
CITY/COUNTY	

Part I – District Representative Information

The following individual(s) have been designated as district representative(s) by school board minutes or the designee of the Superintendent of Public Instruction:

DISTRICT REPRESENTATIVE	TELEPHONE NUMBER	E-MAIL ADDRESS
DISTRICT REPRESENTATIVE	TELEPHONE NUMBER	E-MAIL ADDRESS

Part II – New Construction Eligibility Determination ☐ NEW ☐ ADJUSTED	K–6	7–8	9–12	Non-Severe	Severe
1. Projected Enrollment (Part I, Form SAB 50-01)					
2. Existing School Building Capacity (Part III, Line 3 of Form SAB 50-02)					
3. New Construction Baseline Eligibility (Line 1 minus Line 2)	0	0	0	0	0

Part III – Modernization Eligibility Determination ☐ NEW ☐ ADJUSTED

1. School Name

Option A	K–6	7–8	9–12	Non-Severe	Severe
2. Permanent classrooms at least 25 years old					
3. Portable classrooms at least 20 years old					
4. Total (Lines 2 and 3)	0	0	0	0	0
5. Multiply Line 4 by: 25 for K–6, 27 for 7–8 and 9–12, 13 for Non-Severe and 9 for Severe	0	0	0	0	0
6. CBEDS enrollment at school					
7. Modernization Eligibility (lesser of each column of Lines 5 or 6)	0	0	0	0	0

Option B

2. Permanent space at least 25 years old (report by classroom or square footage)	
3. Portable space at least 20 years old	
4. Total (Lines 2 and 3)	0.00
5. Remaining permanent and portable space (report by classroom or square footage)	
6. Total (Lines 4 and 5)	0.00
7. Percentage (divide Line 4 by Line 6)	0.00%

	K–6	7–8	9–12	Non-Severe	Severe
8. CBEDS enrollment at school					
9. Modernization Eligibility (multiply Line 7 by each grade group reported on Line 8)	0	0	0	0	0

I certify, as the District Representative, that the information reported on this form is true and correct and that:

- I am designated as an authorized district representative by the governing board of the district or the designee of the Superintendent of Public Instruction; and,
- A resolution or other appropriate documentation supporting this application under Chapter 12.5, Part 10, Division 1, commencing with Section 17070.10, et seq., of the Education Code was adopted by the School District's Governing Board or the designee of the Superintendent of Public Instruction on _____; and,
- This form is an exact duplicate (verbatim) of the form provided by Office of Public School Construction. In the event a conflict should exist, then the language in the OPSC form will prevail.

SIGNATURE OF DISTRICT REPRESENTATIVE		DATE
NAME OF DISTRICT REPRESENTATIVE (PRINT OR TYPE)	E-MAIL ADDRESS	TELEPHONE

8. Enter the latest CBEDS enrollment for each grade group at the school site identified as it would have been reported utilizing the criteria in Parts A, C and D of Form SAB 50-01. Report continuation high pupils as 9–12. If the school is a 6–8 middle school only, report 6th graders as 7–8.
9. Modernization eligibility (i.e., the baseline eligibility) is determined by multiplying line 7 by each grade group reported in line 8. Round up.

Adjustments to the District's modernization baseline eligibility will be made pursuant to Section 1859.61. These adjustments will be made by the OPSC. Contact your project manager at the OPSC for the adjusted baseline eligibility for future requests for modernization grants at the specific site.

COFFEE CREEK ELEMENTARY SCHOOL
RESOLUTION TO DESIGNATE REPRESENTATIVES FOR DGS, SAB, and OPSC

WHEREAS, Education Code established multiple programs to be administered by the Department of General Services (DGS) as staff to the State Allocation Board (SAB); and

WHEREAS, Coffee Creek Elementary School District intends to file applications for eligibility determination, file applications for funding, and/or certify information under one or more SAB Administered Program(s); and

WHEREAS, the SAB and DGS requires a school district's Board of Education to authorize specific individuals to sign and submit information on behalf of a school district; and

WHEREAS, the Coffee Creek Elementary School District understands that the signing and submittal of forms on behalf of the school district commits the school district to comply with program requirements.

NOW, THEREFORE, BE IT HEREBY RESOLVED that the Coffee Creek Elementary School District Board of Education authorizes the individuals identified below to physically sign all documents and papers or submit documents via OPSC Online that are associated with SAB-Administered Program(s). Any previous authorized District Representatives not listed below are to be removed from the list of District Representatives:

1. Tim Nordstrom, Superintendent
2. Courtney Bayley, Business Manager

PASSED AND ADOPTED on August 15, 2024, by the Coffee Creek Elementary School District Board of Education by the following vote:

AYES:
NOES:
ABSENT:
ABSTENTION:

Date:8/15/2024

_____

Peter Kleinsmith, Board President

Coffee Creek Elementary School District

CERTIFICATION

I, _____, certify that the foregoing is a correct copy of a resolution passed and adopted by the Coffee Creek Elementary School District on August 15,

2024.

Date:_____

_____

Board Secretary/Clerk

SCHOOL DISTRICT	FIVE-DIGIT DISTRICT CODE NUMBER (SEE CALIFORNIA PUBLIC SCHOOL DIRECTORY)
COFFEE CREEK ELEMENTARY SCHOOL	71670
BUSINESS ADDRESS	HIGH SCHOOL ATTENDANCE AREA (HSAA) OR SUPER HSAA (IF APPLICABLE)
261 COFFEE CREEK RD, BOX 4740	
CITY/COUNTY	
TRINITY CENTER	TRINITY

Part I – District Representative Information

The following individual(s) have been designated as district representative(s) by school board minutes or the designee of the Superintendent of Public Instruction:

DISTRICT REPRESENTATIVE	TELEPHONE NUMBER	E-MAIL ADDRESS
TIM NORDSTROM	(530) 623-2861	tnordstrom@tcoek12.org
DISTRICT REPRESENTATIVE	TELEPHONE NUMBER	E-MAIL ADDRESS
COURTNEY BAYLEY	(530) 623-2861	cbayley@tcoek12.org

Part II – New Construction Eligibility Determination ☐ NEW ☐ ADJUSTED	K–6	7–8	9–12	Non-Severe	Severe
1. Projected Enrollment (Part I, Form SAB 50-01)					
2. Existing School Building Capacity (Part III, Line 3 of Form SAB 50-02)					
3. New Construction Baseline Eligibility (Line 1 minus Line 2)	0	0	0	0	0

Part III – Modernization Eligibility Determination ☐ NEW ☐ ADJUSTED

1. School Name

Option A	K–6	7–8	9–12	Non-Severe	Severe
2. Permanent classrooms at least 25 years old					
3. Portable classrooms at least 20 years old					
4. Total (Lines 2 and 3)	0	0	0	0	0
5. Multiply Line 4 by: 25 for K–6, 27 for 7–8 and 9–12, 13 for Non-Severe and 9 for Severe	0	0	0	0	0
6. CBEDS enrollment at school					
7. Modernization Eligibility (lesser of each column of Lines 5 or 6)	0	0	0	0	0

Option B

2. Permanent space at least 25 years old (report by classroom or square footage)	
3. Portable space at least 20 years old	
4. Total (Lines 2 and 3)	0.00
5. Remaining permanent and portable space (report by classroom or square footage)	
6. Total (Lines 4 and 5)	0.00
7. Percentage (divide Line 4 by Line 6)	0.00%

	K–6	7–8	9–12	Non-Severe	Severe
8. CBEDS enrollment at school					
9. Modernization Eligibility (multiply Line 7 by each grade group reported on Line 8)	0	0	0	0	0

I certify, as the District Representative, that the information reported on this form is true and correct and that:

- I am designated as an authorized district representative by the governing board of the district or the designee of the Superintendent of Public Instruction; and,
- A resolution or other appropriate documentation supporting this application under Chapter 12.5, Part 10, Division 1, commencing with Section 17070.10, et seq., of the Education Code was adopted by the School District's Governing Board or the designee of the Superintendent of Public Instruction on 8/15/2024; and,
- This form is an exact duplicate (verbatim) of the form provided by Office of Public School Construction. In the event a conflict should exist, then the language in the OPSC form will prevail.

SIGNATURE OF DISTRICT REPRESENTATIVE		DATE
		8/15/2024
NAME OF DISTRICT REPRESENTATIVE (PRINT OR TYPE)	E-MAIL ADDRESS	TELEPHONE
Courtney Bayley	cbayley@tcoek12.org	(530) 623-2861