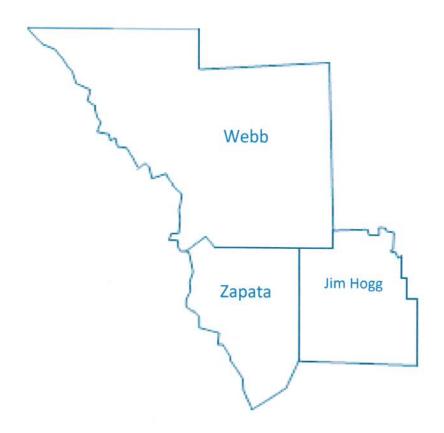
SEVEN FLAGS REGIONAL ADVISORY COUNCIL



Trauma Service Area "T"



JIM HOGG, WEBB, ZAPATA

SEVEN FLAGS REGIONAL ADVISORY COUNCIL (SFRAC) BOARD MEETING

AGENDA



Regular Meeting of the SFRAC Board of Directors Thursday, December 17, 2020, 10:00 a.m. Webinar via WebEx (A call number/link for the Webinar will be emailed to the members)

SFRAC Board of Directors Agenda

- 21-33 <u>Item 21-33</u> Call to Order Chairman, Guillermo Heard.
 - a. Roll Call Chairman.
 - b. Introduction of Guests Chairman.
- 21-34 (Tab 1) Item 21-34: Presented to the Board for Review and Possible Action is the approval of the Minutes to the SFRAC Board meeting held October 30, 2020 Chairman.
- 21-35 (Tab 2) Item 21-35: Presented to the Board for Review and Possible Action is the Approval of the October 2020 and November 2020 Bank Fund Account Statements and Program Expense Report – Juan Canavati, Treasurer.
- 21-36(Tab 3) <u>Item 21-36</u>: Presented to the Board for Review and Possible Action is the Approval to Accept Skyline EMS Inc. Request to join as an Official, Participating, and Paying Member of the SFRAC Board and Organization Chairman.
- 21-37(Tab 4) Item 21-37: Presented to the Board for Discussion and Possible Action is the Approval to Contract with Pixl Labs, LLC for the Purpose of Developing a 30-second Public Service Announcement (PSA) for the Seven Flags RAC (SFRAC) and that the Cost of this Project be Paid Through the SFRAC's General Fund Account Chairman.
- 21-38(Tab 5) <u>Item 21-38</u>: Presented to the Board for Review and Possible Action is the Approval of the Revised Seven Flags Regional Advisory Council FY21 Operating Budget Consisting of the Addition of DSHS Appropriated "Alignment" Funding under the EMS County Assistance and EMS RAC Grant Programs- Chairman.
- 21-39(Tab 6) Item 21-39: Presented to the Board for Discussion and Possible Action is the Approval to Authorize the SFRAC Administrator to Develop a Request for Proposal (RFP) in Seeking Professional Services for the Purpose of Revising and Updating the Current Seven Flags Regional Advisory Council Regional Trauma Plan and to Utilize the Additional Funds Made Available through DSHS under the FY21 EMS RAC "Alignment Funding" Program to Cover the Cost Associated with the Completion of Trauma Plan Update- Chairman.
- 21-40(Tab 7) Item 21-40: Presented to the Board for Review and Possible Action is the Approval of the Second (2nd.) Quarter FY21 Program Financial Report as Submitted to DSHS Consisting of the FY21 EMS RAC, FY21 (Alignment Funding) EMS RAC, FY21 System Development (Tobacco) and FY21 Local Planning Grant (LPG) Chairman.



21-41 Item 21-41: SFRAC Committees Reports – Chairman.

Trauma/Injury Prevention Committee (Chairman: Letisia Colon; Vice-Chairman: Joe Gonzalez)
Perinatal/NICU Committee (Chairman: Nancy Puig; Vice-Chairman: Lupita Cisneros)
EMS/Prehospital Committee: (Chairman - Chief Juan Meza; Vice-Chairman - Victor Villarreal)
Stroke/STEMI Committee: (Chairman: Jennifer Garcia; Vice-Chairman: Geovanni Melchor)

21-42(Tab 8) Item 21-42: Other Business – Chairman.

- a. Report on FY21 December Membership Summary
- b. Status of the FY21 EMS County Assistance Program and System Development (Tobacco) Programs Grant Award Allocations.
- c. City of Laredo Health Department Report on COVID-19 Status.
- d. Report on Hospital Preparedness Program: Coastal Bend RAC Representative.
- **21-43** <u>Item 21-43</u> Communications/Correspondence Chairman.
- 21-44 <u>Item 21-44</u>: Open Forum Chairman.
- 21-45 Item 21-45: Next SFRAC Board meeting Chairman.

Date	Location
Thursday, December 17, 2020	TBD
Friday, January 29, 2021	TBD
Tuesday, March 30, 2021	TBD
Friday, May 28, 2021	TBD
Friday, July 30, 2021	TBD
Monday, August 30, 2021	TBD

Name	Title/Location	Cell
Guillermo Heard	TSA-T Chair	(956) 236-3254
John Keiser	TSA-T Administrator	(956) 693-0536

SEVEN FLAGS REGIONAL ADVISORY COUNCIL (SFRAC) BOARD MEETING

ITEM 21-34 (TAB 1)



Regular Meeting of the SFRAC Board of Directors
Friday, October 30, 2020, 10:00 a.m.
Webinar via WebEx (A call number/link for the Webinar will be emailed to the members)

SFRAC Board of Directors Minutes

21-16 <u>Item 21-16</u> Call to Order – Chairman, Guillermo Heard. a. Roll Call – Chairman

Air Evac Lifeteam: Jason Delattre - Present (Director)

Angel Care Ambulance: Present – Ricardo Jaime (Secretary) Angel Care Ambulance: Present – Adolfo Martinez (Alternate) Bronze Star Ambulance: Present – Hector Medina (Director)

City of Laredo Fire Department EMS: Present – Guillermo Heard (Chairman)

Doctors Hospital Of Laredo: Present – Letisia Colon (Director)
Doctors Hospital of Laredo: Present – Jessica Martinez (Alternate)
Doctors Hospital of Laredo: Present – Gilda Villarreal (Alternate)

Prestige EMS: Present – Jorge Delgado (Vice-Chairman) Laredo Medical Center: Present – Joe Gonzalez (Alternate) Laredo Medical Center: Present – Amy Guerra (Alternate) Medpoint Ambulance: Present – Roy Arriaga (Director)

South Texas Ambulance Response: Present – Juan Canavati (Treasurer)
South Texas Ambulance Response: Present – Robert Gonzalez (Alternate)
South Texas Ambulance Response: Present – Albert Chapa (Alternate)
Webb County Volunteer Fire/EMS: Present – Ricardo Rangel (Director)
Webb County Volunteer Fire/EMS: Present – Francisco Martinez (Alternate)

Zapata County Fire/EMS: Juan Meza (Director)

Victorious Care Ambulance Service: Victor Villarreal (Director)

Laredo Lifeline: Present – Peter Gonzalez (Director)

Lalitas Ambulance Care: Absent

Capital Care EMS: Absent

Member-At-Large: Julie Tijerina - Absent

Texas Superior Ambulance: Present - Gilberto Guardiola (Director)

Quorum was had for the meeting.

b. Introduction of Guests – Chairman.

Mr. John Keiser, SFRAC Administrator announced that Mr. Robert Friedrich from DSHS in Austin, Texas was present for the meeting. Mr. Friedrich confirmed.



21-17 (Tab 1) Item 21-17: Presented to the Board for Review and Possible Action is the approval of the Minutes to the SFRAC Board meeting held October 30, 2020 – Chairman.

A motion to accept the minutes as presented was made by Chief Meza and seconded by Juan Canavati. Motion passes unanimously.

21-18 (Tab 2) Item 21-18: Presented to the Board for Review and Possible Action is the Approval of the September 2020 Bank Fund Account Statements and Program Expense Report – Juan Canavati, Treasurer.

Mr. Canavati, SFRAC Treasure presented the Board with the Bank Fund Account Statements Report, followed by Administrator presenting the Program Expense Report. A motion to accept the reports as presented was made by Jorge Delgado and seconded by Ricardo Jaime. Motion passes unanimously.

21-19(Tab 3) <u>Item 21-19</u>: Presented to the Board for Review and Possible Action is the Approval of the FY22 Seven Flags Regional Advisory Council EMS Entity Eligibility List for EMS County Assistance Grant Funding to be submitted to DSHS – Chairman.

SFRAC Administrator presented the Board with the FY22 EMS County Assistance Entity Eligibility List which will identify those entities eligible to receive grant funding in fiscal year 22 under the EMS County Assistance Program. Administrator read out the list to the members noting that one of the entities had been removed from the list as having been removed by the Board as a participating member this year, namely, Hidalgo County South Texas AirMed. Administrator further noted that another of the current active members, Texas Superior Ambulance was listed as not edible due to not having met the criteria for membership last year.

A motion to accept the list as presented was made Jorge Delgado and seconded by Juan Meza. Motion passes unanimously.

21-20(Tab 4) Item 21-20: Presented to the Board for Review and Possible Action is the Approval of Nominations for the Selection of SFRAC Stroke/STEMI Committee Chairman Position for the Fiscal Year 2021 – Chairman.

Letisia Colon introduced the name Jessica Martinez as a nominee to serve as chairman of the SFRAC Stroke/STEMI Committee. A motion by Jorge Delgado to accept the nomination was made followed by a second by Ricardo Jaime. Motion carries unanimously.

21-21(Tab 5) <u>Item 21-21</u>: Presented to the Board for Review and Possible Action is the Approval to Accept Jenesis Emergency Service, Inc. Request to join as an Official, Participating and Paying Member of the SFRAC Board and Organization – Chairman.

SFRAC Administrator explained to the Board that he had been contacted by a Jenesis Emergency Service's CEO, Ms. Veronica Malacara, with a request to become part of the



SFRAC Board as an active participating member. Ms. Malacara was present but was having trouble with her microphone and was unable to address the Board.

A motion by Jorge Delgado was made to accept Jenesis Emergency Services' request to become a participating member of the SFRAC. The motion was seconded by Juan Meza. Motion carries unanimously.

21-22(Tab 6) Item 21-22: Presented to the Board for Review and Possible Action is the Approval to Contract with Pixl Labs, LLC for the Purpose of Developing a 30-second Public Service Announcement (PSA) for the Seven Flags RAC (SFRAC) and that the Cost of this Project be Paid Through the SFRAC's General Fund Account – Ricardo Jaime, Secretary.

Guillermo Heard, SFRAC Chairman introduced the item and called on Ricardo Jaime to address the Board regarding the item. Mr. Jaime explained that at some point in the past Jennifer Garcia had brought up the idea to develop a PSA highlighting the public's reluctance to visit emergency rooms due to COVID-19 concerns. The Chairman supported the idea. The SFRAC administrator referred the Board to a proposal the company had submitted which included a cost for the proposed 30-second PSA.

The SFRAC administrator informed the Board that he had spoken to Pixel Labs representative Eliud Diaz-Cortez and had asked him to be present for the meeting. During discussion of the item the Board had several questions about the PSA. However, Pixel Labs was not present during the meeting to address the Board's questions.

A motion to table the item due to lack of information to make a based decision was made by Juan Meza and seconded by Jorge Delgado. Motion carries unanimously.

21-23(Tab 7) Item 21-23: Presented to the Board for Review and Possible Action is the Approval to Transfer Training Equipment Purchased by the Seven Flags RAC under the FY21 Local Planning Grant (LPG) for Training Purposes to City of Laredo Fire Department Fire/EMS for the Purpose of Implementing a Regional CPR/Code Blue Infant and HAL PPR+D Adult Training and Certification Program - Chairman.

SFRAC Administrator reminded the Board of equipment which had been purchase under the FY21 Local Planning Grant project, consisting of an adult HAL PPR+D and a CPR /Code Blue infant training manikins. He explained that the SFRAC had purchased the equipment on behalf of the City of Laredo Fire Department and that the equipment would now be transferred to the City of Laredo Fire Department.

He referred the Board to the form contained in the packet illustrating that the form itself would be the instrument in making the transfer. A motion to approve the transfer of equipment was made by Juan Canavati and seconded by Jorge Delgado. Motion carries unanimously.



21-24(Tab 8) Item 21-24: Presented to the Board for Review and Possible Action is the Approval of the Third Quarter Senate Bill 500 Financial Report - Chairman.

A motion to accept the 3rd. Quarter Senate Bill 500 Financial Report as presented was made by Juan Canavati and seconded by Ricardo Jaime. Motion carries unanimously.

21-25(Tab 9) <u>Item 21-25:</u> Presented to the Board for Review and Possible Action is the Approval of the Revised Final FY20 Program Financial Report as Re-Submitted to DSHS Consisting of the EMS RAC, System Development (Tobacco) and Local Planning Grant (LPG) -Chairman.

SFRAC Administrator explain to the Board that this item consisted of a revised element in the previously submitted report affecting the Tobacco (i.e., System Development) portion of the report. He went on the explain that the report consisted of revised award totals for the Tobacco grant as a result of a decision by the Board to allow Doctors Hospital to receive the Tobacco grant after having defaulted on the deadline in the submittal of reimbursement documents.

A motion to accept the revised report was made by Jorge Delgado and seconded by Juan Meza. Motion carries unanimously.

21-26(Tab 10) Item 21-26: Presented to the Board for Review and Possible Action is the Approval of the FY20 Annual Year-End EMS RAC and System Development Narrative Reports – Chairman.

SFRAC Administrator presented the Board with both reports. A motion to accept the FY20 Annual Year-End EMS RAC and System Development Narrative Reports was made by Juan Canavati and seconded by Jorge Delgado. Motion carries unanimously.

21-27 <u>Item 21-27</u>: SFRAC Committees Reports – Chairman.

Trauma/Injury Prevention Committee (Chairman: Letisia Colon; Vice-Chairman: Joe Gonzalez)

No items to report to the Board.

Perinatal/NICU Committee (Chairman: Amy Guerra; Vice-Chairman: Gilda Villarreal)

SFRAC Chairman delivered the report for the Perinatal Committee which stated that the Committee met and nominated a Chairman (Nancy Puig), Vice-Chair (Lupita Cisneros) and Secretary (Rochelle Gonzalez) for FY21. Also, on the maternal side the committee plans on working with the RAC on a project. Similarly, Neonatal group released a video between Doctors Hospital and Laredo Medical Center which is being broadcast by the City of Laredo.



EMS/Prehospital Committee: (Chairman - Chief Juan Meza; Vice-Chairman - Victor Villarreal)

No items to report to the Board.

Stroke/STEMI Committee: (Chairman: Jennifer Garcia; Vice-Chairman: Geovanni Melchor)

No items to report to the Board.

21-28(Tab 11) Item 21-28: Other Business - Chairman.

Report on FY21 October Membership Summary

SFRAC Administrator presented the Board with information contained in the Membership Summary which was also available to respective members as contained in each Board member's packet. He indicated that several members had already submitted all the necessary documents, but other had not. He urged all who had documents and fees pending to submit them as soon as possible.

b. City of Laredo Health Department Report on COVID-19 Status.

Ms. Amelia Solis with the City of Laredo Health Department presented the Board with informational items and current status in the city regarding COVID-19.

- c. Report on Hospital Preparedness Program: Coastal Bend RAC Representative.
- **21-29** <u>Item 21-29</u> Communications/Correspondence Chairman.

No correspondence to present the Board.

- 21-30 <u>Item 21-30</u>: Open Forum Chairman.
- 21-31 <u>Item 21-31</u>: Next SFRAC Board meeting Chairman.

	FY21 Meeting Schedule
Date	Location
Friday, October 30, 2020	TBD
Thursday, December 17, 2020	TBD
Friday, January 29, 2021	TBD
Tuesday, March 30, 2021	TBD
Friday, May 28, 2021	TBD
Friday, July 30, 2021	TBD
Monday, August 30, 2021	TBD



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Name	Title/Location	Cell
Guillermo Heard	TSA-T Chair	(956) 236-3254
John Keiser	TSA-T Administrator	(956) 693-0536

21-32 Item 21-32: Adjournment – Chairman.

SEVEN FLAGS REGIONAL ADVISORY COUNCIL (SFRAC) BOARD MEETING

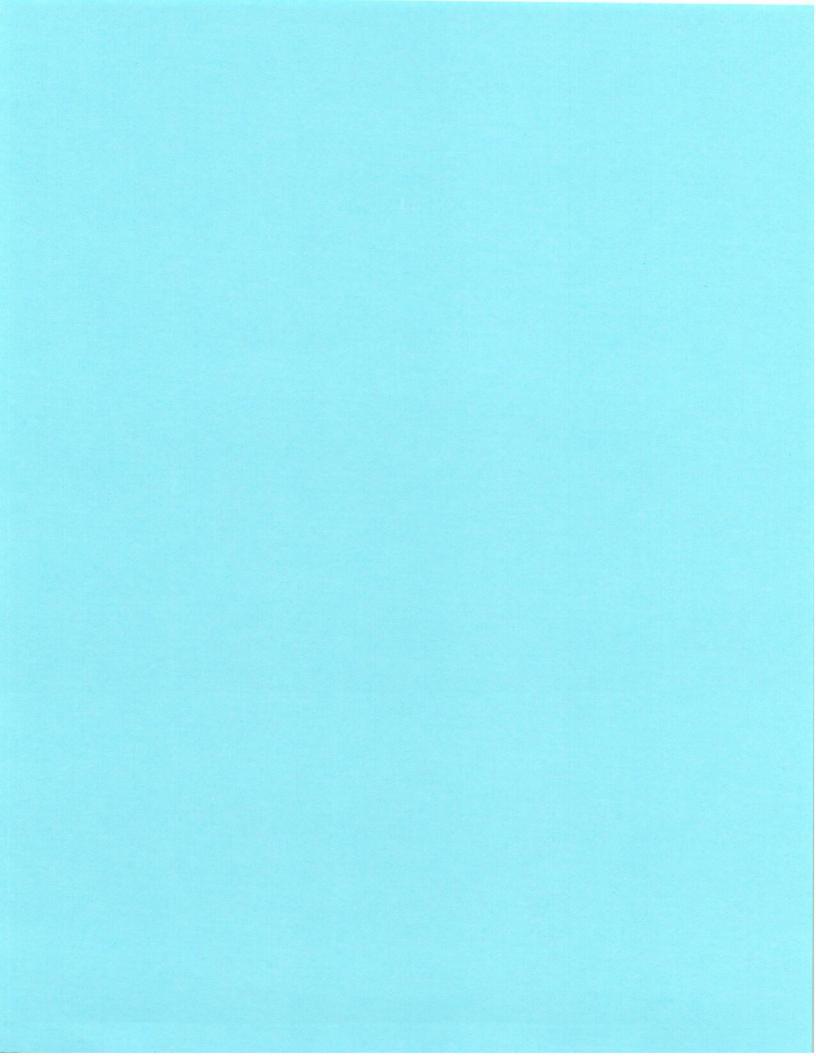
ITEM 21-35 (TAB 2)

SEVEN FLAGS REGIONAL ADVISORY COUNCIL TRAUMA SERVICE AREA "T"

Thurssday, December 17, 2020, 10:00 A.M.

ACCOUNTS STATEMENT REPORT

SFRJ	AC BANK PROGR	AM FUND ACCO	UNTS SUMMAF	RY AND ENDING	SFRAC BANK PROGRAM FUND ACCOUNTS SUMMARY AND ENDING BALANCE REPORT	रा
Period Ending	EMS County Assistance Fund Closing Balance	EMS RAC Fund Closing Balance	General Fund Closing Balance	System Development (i.e. Tobacco) Fund Closing Balance	Holding Account Fund Closing Balance	TOTAL
September 30, 2020 (Start of the New 2021 Fiscal Year)	\$11,824.40	\$32,085.00	\$16,191.64	\$11,084.40	\$68,588.02	\$139,773.46
October 31, 2020	\$66,511.40	\$32,091.00	\$17,982.13	\$7,275.36	\$142,229.02	\$266,088.91
November 30, 2020	\$66,511.40	\$32,091.00	\$22,394.63	\$7,275.36	\$142,229.02	\$270,501.41





P.O. Box 659507 San Antonio, Texas 78265-9507 00000142 TI307S10312002581900 05 000000000 0000000 003

SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON P O BOX 450094 Laredo TX 78045

Customer Number: Statement Date: Statement Period: Enclosure Items: Page Number:

2210910129 10/31/2020 10/01/2020 - 10/31/2020 1 of 3

Contact Information



Address:

Commerce Bank 5800 SAN DARIO LAREDO TX 78041

Bank Phone: IBC Voice:

Nisit us Online:

Mobile Banking:

1- (956) 724-1616 1- (956) 791-1616

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Biz Rit	е		Accour	nt Recap	Account Numb	er: 2210910129
Beginning Number of Balance Credits 11,824.40 3			alance Credits Credits Debits		Withdrawals & Debits 11,860.00	Closing Balance 66,511.40
			Balance	Summary		
Averag	e Collected Bala	ance	43,437.72			
			Deposits	(Credits)		
Date 10/07	Deposit #	Amount 20.00				
			Checks	(Debits)	THE STREET	
Date 10/08	Check #	Amount 11,825.00				
		* Indi		neck number seque	ence	
			Electroni	c Activity	用。但是是是是	
Date	Descri	ption	С	redits		Amount
10/07 10/13		Ret Item Chrg Rev 00579957 Returned Item Charge115 Transfer Deposit FROM ACCOUNT XXXXXX0188				
D-4-			0	ebits		
Date 10/06	Descri					Amount
10/06	NSF R	eturn Item Fee For	Ck# 8 in the Amount			35.0
			Daily Endi	ng Balance		
Date 10/01 10/06	Amo 11,824 11,789	.40	Date 10/07 10/08	Amount 11,844.40 19.40	Date 10/13	Amoun 66,511.40

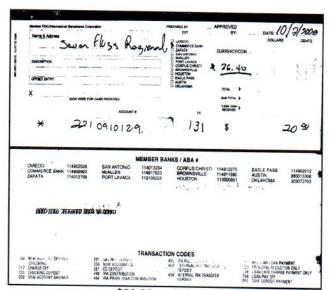




Customer Number: Statement Date: Statement Period: Page Number:

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\$20.00 10/07/2020



0008 \$11,825.00 10/08/2020





P.O. Box 659507 San Antonio, Texas 78265-9507 00000097 TI307S12012004255800 05 000000000 0000000 001

SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON P O BOX 450094 Laredo TX 78045

Customer Number: 2210910129 Statement Date: 11/30/2020 Statement Period: 11/01/2020 - 11/30/2020 Enclosure Items: Page Number: 1 of 1 Junty Assistance

Contact Information



Address:

Commerce Bank 5800 SAN DARIO LAREDO TX 78041

Mobile Banking:

Bank Phone: IBC Voice: Visit us Online:

1- (956) 724-1616 1- (956) 791-1616

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Download app or visit at: www.myIBC.com

Please examine and report any discrepancies within 14 days from your statement date.

Biz Rite		Account	t Recap	Account Numb	per: 2210910129
Beginning Number of Balance Credits 66,511.40 0		Deposits & Credits 0.00	Number of Debits 0	Withdrawals & Debits 0.00	Closing Balance 66,511.40
		Balance S	Summary	APPENDING SE	E LEADER W
Average Collec	ted Balance	66,511.40			
	利德斯斯克斯克斯	Daily Endin	g Balance		
Date 11/01	Amount 66,511.40				

ERROR RESOLUTION

In case of errors or questions about your Electronic Transfers call us at 1-866-902-5860 OPTION 4 or write us to IBC Fraud Prevention, 8770 Tesoro, San Antonio, TX 78217.

For errors or question about IBC ATM transactions call us at (210) 930-9875 or write us to IBC Fraud Prevention, 8770 Tesoro, San Antonio, TX 78217.

Call us or write us as soon as you can if you think your statement is wrong or if you need more information about a transfer listed on the statement. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

1.Tell us your name and account number.

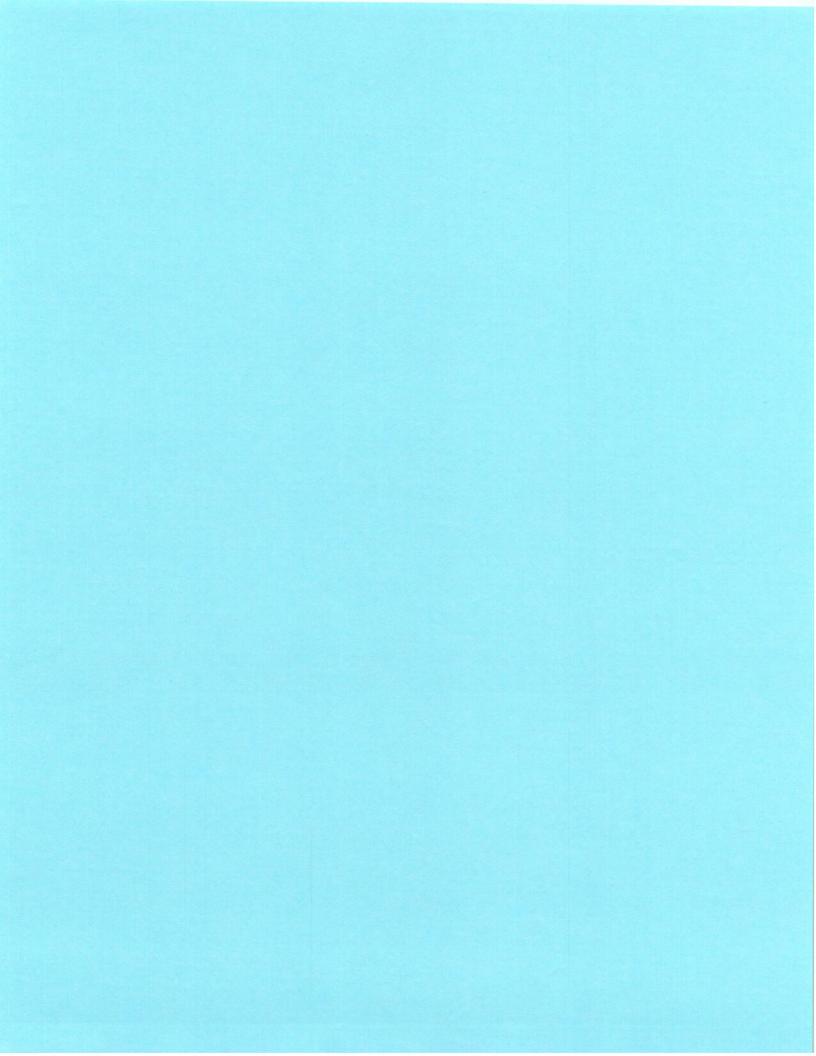
2.Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information. Tell us the dollar amount of the suspected error.

For U.S. Residents with Personal Accounts:

We will tell you the results of our investigation within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days (90 days if the transfer involved a point-of-sale transaction, or was initiated outside the U.S.A. and Puerto Rico) to investigate your complaint or question. If we decide to do this, we will credit your account within 10 business days for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation. For new accounts, the Bank is allowed 20 business days to resolve an error before it must provisionally credit the card holder's account and up to 90 calendar days to complete this investigation. A new account is one open less than 30 days. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account. If we decide that there was no error, we will send you a written explanation within 3 business days after we finish our investigation. You may ask for copies of the documents that we used in our investigation.



We will promptly investigate your case after we hear from you and will correct any error identified promptly. We may take up to 90 days to investigate your complaint or question. We will send you a written explanation after we finish our investigation. You may ask for copies of the documents that we used in our investigation.





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SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON TRAUMA TRAUMA SERVICE AREA T PO BOX 450094 LAREDO TX 78045

Customer Number: Statement Date: Statement Period: Enclosure Items:

Page Number:

2210910161 10/31/2020 10/01/2020 - 10/31/2020

1 of 1

Contact Information



Address:

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Please examine and report any discrepancies within 14 days from your statement date.

Biz Rite		Accoun	t Recap	Account Numb	er: 2210910161
Beginning Balance 32,091.00	Number of Credits 0	Deposits & Credits 0.00	Number of Debits 0	Withdrawals & Debits 0.00	Closing Balance 32,091.00
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Average Collec	ted Balance	32,091.00			
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Date 10/01	Amount 32,091.00				

ERROR RESOLUTION

In case of errors or questions about your Electronic Transfers call us at 1-866-902-5860 OPTION 4 or write us to IBC Fraud Prevention, 8770 Tesoro, San Antonio, TX 78217.

For errors or question about IBC ATM transactions call us at (210) 930-9875 or write us to IBC Fraud Prevention, 8770 Tesoro, San Antonio, TX 78217.

Call us or write us as soon as you can if you think your statement is wrong or if you need more information about a transfer listed on the statement. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

1.Tell us your name and account number.

2.Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.

Tell us the dollar amount of the suspected error.

For U.S. Residents with Personal Accounts:

We will tell you the results of our investigation within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days (90 days if the transfer involved a point-of-sale transaction, or was initiated outside the U.S.A. and Puerto Rico) to investigate your complaint or question. If we decide to do this, we will credit your account within 10 business days for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation. For new accounts, the Bank is allowed 20 business days to resolve an error before it must provisionally credit the card holder's account and up to 90 calendar days to complete this investigation. A new account is one open less than 30 days. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account. If we decide that there was no error, we will send you a written explanation within 3 business days after we finish our investigation. You may ask for copies of the documents that we used in our



For all other accounts:

We will promptly investigate your case after we hear from you and will correct any error identified promptly. We may take up to 90 days to investigate your complaint or question. We will send you a written explanation after we finish our investigation. You may ask for copies of the documents that we used in our



P.O. Box 659507 San Antonio, Texas 78265-9507 00000100 Ti307\$12012004255800 05 000000000 0000000 002

SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON TRAUMA TRAUMA SERVICE AREA T PO BOX 450094 LAREDO TX 78045

Customer Number: Statement Date: Statement Period: Enclosure Items: Page Number:

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Contact Information



Address:

Commerce Bank 5800 SAN DARIO LAREDO TX 78041

Mobile Banking:

Bank Phone: Nisit us Online:

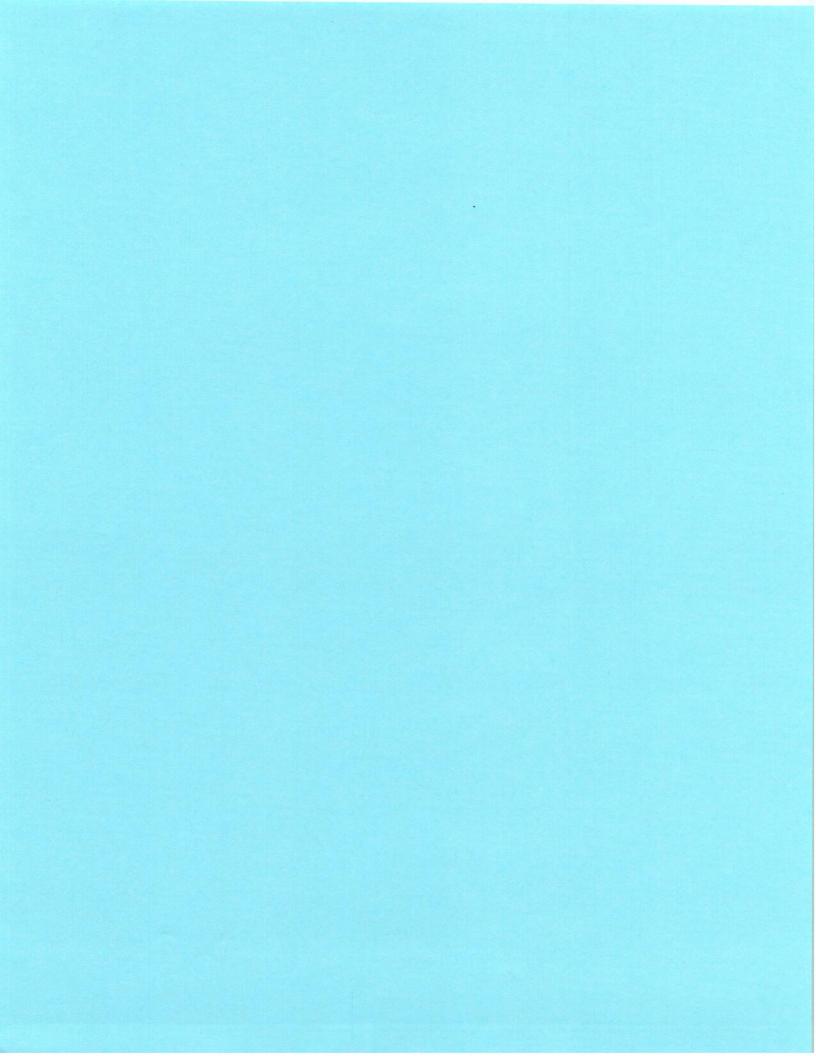
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Biz Rite		Accoun	t Recap	Account Numb	er: 2210910161
Beginning Number of Balance Credits 32,091.00 0		Deposits & Credits 0.00	Number of Debits 1	Withdrawals & Debits 5.00	Closing Balance 32,086.00
		Balance S	Summary		
Average Collected Balance		32,091.00			
		Electronic	Activity		
Date	Description	De	ebits		
11/30	Service Fee Inactive Ac	count Fee			Amount 5.00
		Daily Endin	g Balance		
Date 11/01	Amount 32,091.00	Date 11/30	Amount 32,086.00		







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SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON P O BOX 450094 Laredo TX 78045 Customer Number: Statement Date: Statement Period: Enclosure Items: Page Number:

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Contact Information



Commerce Bank 5800 SAN DARIO LAREDO TX 78041

Mobile Banking:

Bank Phone:
IBC Voice:
Visit us Online:

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Download app or visit at: www.mylBC.com

Biz Rit	e			Account F	Recap	Acc	count Numbe	r: 2210910145
Bala	inning ance 91.64	Number of Credits 3	Cre	osits & edits 50.00	Number of Debits 2	Witho	Irawals & ebits 59.51	Closing Balance 17,982.13
				Balance Su	mmary			
Average	e Collected Ba	lance	16	5,283.06				
				Deposits (C	redits)			
Date 10/28	Deposit #	Amount 750.00	- 410	Deposit #	Amount 750.00		Deposit #	Amount 750.00
				Checks (D	ebits)			
Date 10/28	Check #	Amount 106.00	Date 10/20	Check #	Amount 353.51			
		* In	dicates a	skip in chec	k number seque	nce		
			D	aily Ending	Balance			
Date 10/01	Amo 16,19		Dat 10/:		Amount 15,838.13		Date 10/28	Amount 17,982.13





Customer Number: Statement Date: Statement Period: Page Number: 2210910145 10/31/20 10/01/20 - 10/31/20 3 of 4



IBC BANK. COMMERCE BANK			
Amount: 750.00 USD			Checking Deposit
Account #: 2210910145			
Business Date: 20201028 Branc	h: 0201		
Transaction Time: 20201028 03:			
Teller Id: aracely zapata Drawer:			
Customer Name:	0002		
Currency:	\$0.0	0	
Checks:	\$750.0		
Subtotal:	\$750.0		Sign Here For Cash Received
Less Cash Received:	\$0.0	0	
Total:	\$750.0	0	
1	0002 0201 202010	28 0002 28 2	
\$7	50.00	10/28/20	020

Amount: 750.00 USD		Checking Deposit
Account #: 2210910145		Checking Deposit
	70217 2427 D	
Business Date: 20201028 Bran	0111 0201	
Transaction Time: 20201028 0:	3:21 PM	
Teller Id: aracely zapata Drawe	r: 0002	
Customer Name:		
Currency:	\$0.00	
Checks:	\$750.00	
Subtotal:	\$750.00	Sign Here For Cash Received
Less Cash Received:	\$0.00	
Total:	\$750.00	
	0002 0201 20201028 0002 29 2	
	0002 0201 20201028 0002 29 2	
	0002 0201 20201028 0002 29 2	
	0002 0201 20201028 0002 29 2	

10/28/2020

\$750.00

Amount: 106.00 USD
Account #: 2210910145
Business Date: 20201028 Branch: 0201
Transaction Time: 20201028 03:24 PM
Teller Id: aracely zapata Drawer: 0002
Customer Name:

Sign Here For Cash Received

\$106.00 10/28/2020



Customer Number: Statement Date: Statement Period: Page Number: 2210910145 10/31/20 10/01/20 - 10/31/20 4 of 4





0005 \$353.51 10/20/2020





P.O. Box 659507 San Antonio, Texas 78265-9507 00000099 TI307S12012004255800 05 000000000 0000000 004

SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON P O BOX 450094 Laredo TX 78045

Customer Number: Statement Date: Statement Period: Enclosure Items: Page Number:

2210910145 11/30/2020 11/01/2020 - 11/30/2020

> 5 1 of 4

Fund eneral

Contact Information



Address:

Commerce Bank 5800 SAN DARIO LAREDO TX 78041

Mobile Banking:

Bank Phone: IBC Voice: Wisit us Online:

1- (956) 724-1616 1- (956) 791-1616

www.IBC.com

Download app or visit at: www.myIBC.com

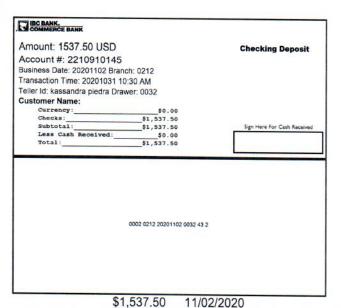
Biz Rite				Account R	Account Recap		Account Number: 2210910145	
Beginning Number of Balance Credits 17,982.13 5		dits	Cr	osits & edits 12.50	Number of Debits 0		drawals & Debits 0.00	Closing Balance 22,394.63
	A ELECTION			Balance Sun	nmary			4.00
Average	e Collected Balance)	20	,164.21				
				Deposits (Cr	edits)			
Date 11/02 11/23	Deposit #	Amount 1,537.50 750.00		Deposit #	Amount 750.00 750.00	Date 11/23	Deposit #	Amount 625.00
			D	aily Ending E	Balance			
Date 11/01	Amount 17,982.13		Da		Amount 19,519.63		Date 11/23	Amount 22,394.63





Customer Number: Statement Date: Statement Period: Page Number: 2210910145 11/30/20 11/01/20 - 11/30/20 3 of 4

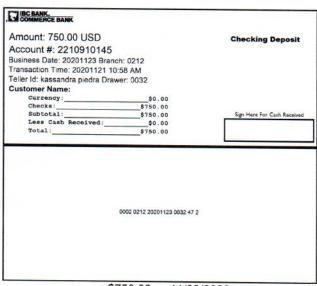




Amount: 625.00 USD		Checking Deposit
Account #: 2210910145		
Business Date: 20201123 Brand	h: 0212	
Transaction Time: 20201121 12		
Teller Id: kassandra piedra Draw		
Customer Name:	ver: 0032	
Checks:	\$625.00	
Subtotal:	\$625.00	Sign Here For Cash Received
Less Cash Received:	\$0.00	Springer or Cash Received
Total:	\$625.00	
	0002 0212 20201123 0032 72 2	
	0002 0212 20201123 0032 72 2	

\$625.00 11/23/2020

IBC BANK. COMMERCE BANK			
Amount: 750,00 USD			Checking Deposit
Account #: 2210910145			Checking Deposit
Business Date: 20201123 Brand			
Transaction Time: 20201121 10			
Teller Id: kassandra piedra Drav	wer: 0032		
Customer Name:			
Currency:	\$0.		
Checks:	\$750.		
Subtotal: Less Cash Received:	\$750.		Sign Here For Cash Received
Total:	\$750.		
Total.	\$ 750.0	30	
	0002 0212 20201	123 0032 45 2	
\$	750.00	11/23/20	20



\$750.00 11/23/2020

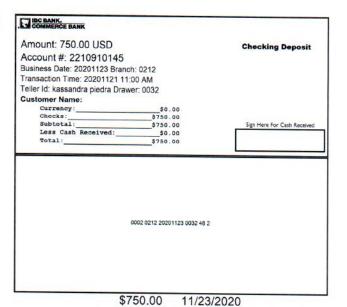




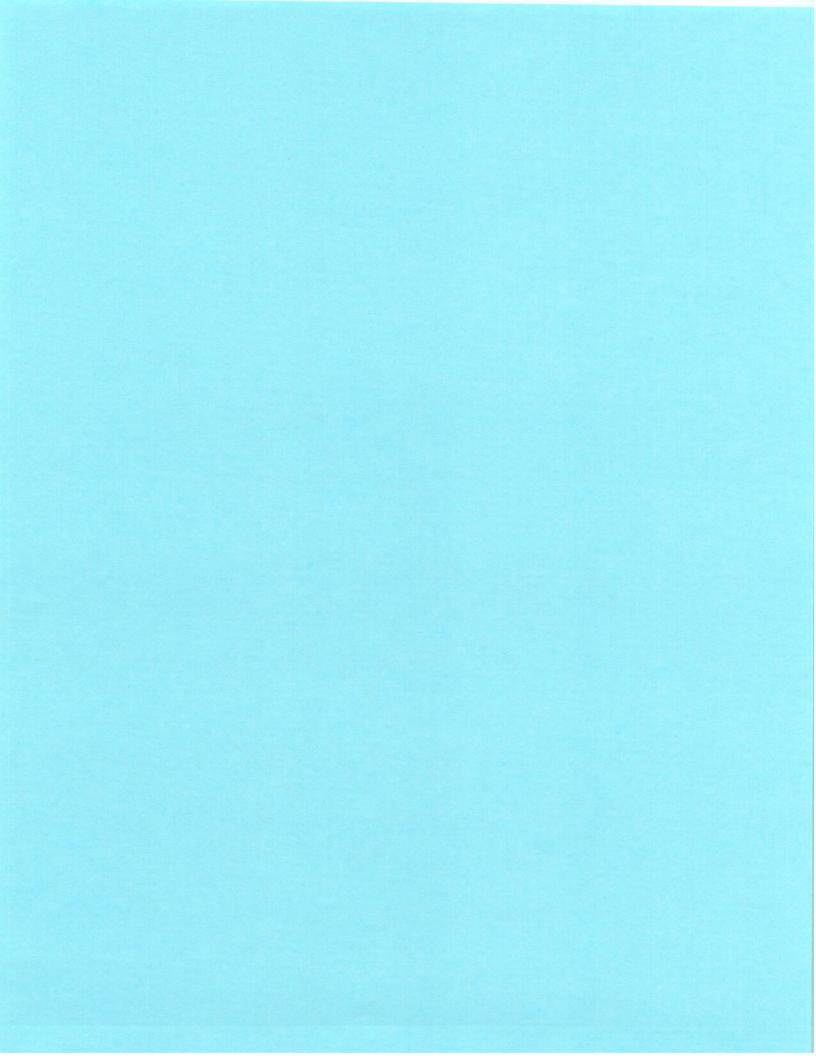
Customer Number: Statement Date: Statement Period: Page Number:

2210910145 11/30/20 11/01/20 - 11/30/20 4 of 4











P.O. Box 659507 San Antonio, Texas 78265-9507 00000143 TI307S10312002581900 05 000000000 0000000 003

SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON P O BOX 450094 Laredo TX 78045

Customer Number: Statement Date: Statement Period: Enclosure Items: Page Number:

2210910137 10/31/2020 10/01/2020 - 10/31/2020

1 of 3 from Development

Contact Information



Address:

Commerce Bank 5800 SAN DARIO LAREDO TX 78041

Mobile Banking:

Bank Phone: IBC Voice: Nisit us Online:

1- (956) 724-1616 1- (956) 791-1616

www.IBC.com

Download app or visit at: www.mylBC.com

Biz Rite			Account	Recap	Account Number: 2210910137	
Begir Bala 11,08	ince Cre	ber of edits 0	Deposits & Credits 0.00	Number of Debits 1	Withdrawals & Debits 3,809.04	Closing Balance 7,275.36
	ing an except		Balance S	ummary		
Average	Collected Balance	е	9,978.55			
	ANDALT SEAL		Checks (Debits)	CALETY!	
Date 10/23	Check # 11	Amount 3,809.04				
		* Indi	cates a skip in che	eck number seque	ence	
			Daily Endin		Mary Townson	
Date 10/01	Amount 11,084.40		Date 10/23	Amount 7,275.36		





Customer Number: Statement Date: Statement Period: Page Number: 2210910137 10/31/20 10/01/20 - 10/31/20 3 of 3





0011 \$3,809.04 10/23/2020





P.O. Box 659507 San Antonio, Texas 78265-9507 00000098 TI307S12012004255800 05 000000000 0000000 001

SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON P O BOX 450094 Laredo TX 78045

Customer Number: 2210910137 Statement Date: 11/30/2020 Statement Period: 11/01/2020 - 11/30/2020 Enclosure Items: Page Number: 1 of 1 Davelspuren

Contact Information

Address:

Commerce Bank 5800 SAN DARIO LAREDO TX 78041

Bank Phone: IBC Voice:

Visit us Online:

Mobile Banking:

1- (956) 724-1616 1- (956) 791-1616

www.IBC.com

Download app or visit at: www.mylBC.com

Please examine and report any discrepancies within 14 days from your statement date.

Biz Rite		Accoun	t Recap	Account Number: 2210910137		
Beginning Balance 7,275.36	Number of Credits 0	Deposits & Credits 0.00	Number of Debits 0	Withdrawals & Debits 0.00	Closing Balance 7,275.36	
		Balance S	Summary			
Average Collect	ed Balance	7,275.36				
		Daily Endir	ng Balance	ELECTION OF		
Date 11/01	Amount 7,275.36					

ERROR RESOLUTION

In case of errors or questions about your Electronic Transfers call us at 1-866-902-5860 OPTION 4 or write us to IBC Fraud Prevention, 8770 Tesoro, San Antonio, TX 78217.

For errors or question about IBC ATM transactions call us at (210) 930-9875 or write us to IBC Fraud Prevention, 8770 Tesoro, San Antonio, TX 78217.

Call us or write us as soon as you can if you think your statement is wrong or if you need more information about a transfer listed on the statement. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

1.Tell us your name and account number.

2.Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.

3.Tell us the dollar amount of the suspected error.

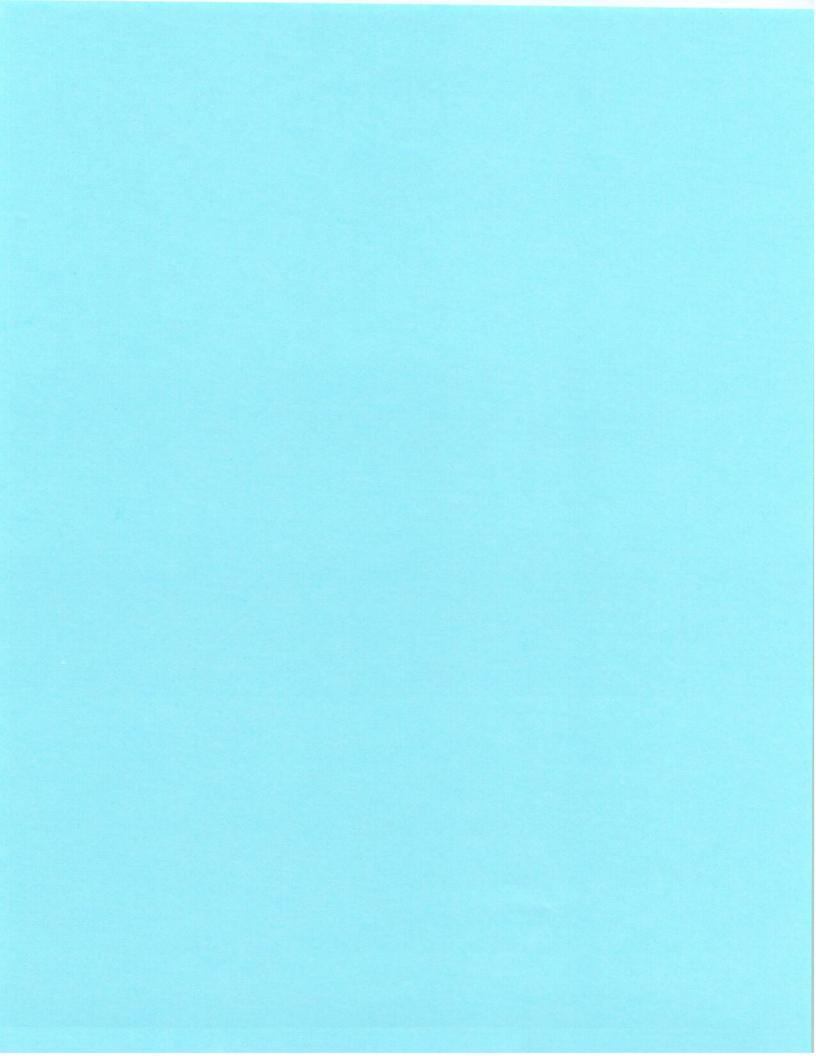
For U.S. Residents with Personal Accounts:

We will tell you the results of our investigation within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days (90 days if the transfer involved a point-of-sale transaction, or was initiated outside the U.S.A. and Puerto Rico) to investigate your complaint or question. If we decide to do this, we will credit your account within 10 business days for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation. For new accounts, the Bank is allowed 20 business days to resolve an error before it must provisionally credit the card holder's account and up to 90 calendar days to complete this investigation. A new account is one open less than 30 days. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account. If we decide that there was no error, we will send you a written explanation within 3 business days after we finish our investigation. You may ask for copies of the documents that we used in our



For all other accounts:

We will promptly investigate your case after we hear from you and will correct any error identified promptly. We may take up to 90 days to investigate your complaint or question. We will send you a written explanation after we finish our investigation. You may ask for copies of the documents that we used in our investigation.





P.O. Box 659507 San Antonio, Texas 78265-9507 00000146 TI307S10312002581900 05 000000000 0000000 003

SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON TRAUMA TRAUMA SERVICE AREA T PO BOX 450094 LAREDO TX 78045

Customer Number: 2210910188 Statement Date: 10/31/2020 Statement Period: 10/01/2020 - 10/31/2020 Enclosure Items: Page Number: Hocomt

Contact Information

Address:

Commerce Bank 5800 SAN DARIO LAREDO TX 78041

Mobile Banking:

Bank Phone: IBC Voice: Nisit us Online:

1- (956) 724-1616 1- (956) 791-1616

1 of 3

www.IBC.com

Download app or visit at: www.myIBC.com

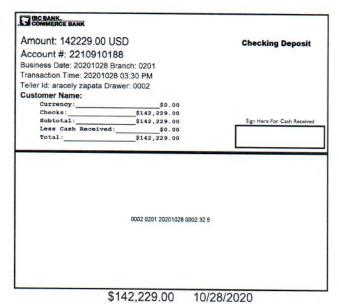
Biz Rit	e		Account	Recap	Account Numb	per: 2210910188
Beginning Number of Balance Credits 68,588.02 1		Deposits & Credits 142,229.00	Number of Debits 2	Withdrawals & Debits 68,588.00	Closing Balance 142,229.02	
		Historia (Charles	Balance S	ummary		
Average	e Collected B	alance	41,193.28			
			Deposits	(Credits)		
Date 10/28	Deposit #	Amount 142,229.00				
			Checks (Debits)	光 显示于于1500年	
Date 10/26	Check #	Amount 2,096.00				
		* Indi	cates a skip in che	ck number seque	ence	
			Electronic	Activity		
Date	Des	cription	De	bits		Amount
10/13	Tran	sfer Withdrawal TO A	CCOUNT XXXXXXX012	9		66,492.00
			Daily Endin	g Balance		
Date 10/01 10/13	68,5	nount 88.02 96.02	Date 10/26	Amount 0.02	Date 10/28	Amount 142,229.02





Customer Number: Statement Date: Statement Period: Page Number: 2210910188 10/31/20 10/01/20 - 10/31/20 3 of 3







0002 \$2,096.00 10/26/2020





P.O. Box 659507 San Antonio, Texas 78265-9507 00000101 TI307S12012004255800 05 000000000 0000000 001

SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON TRAUMA TRAUMA SERVICE AREA T PO BOX 450094 LAREDO TX 78045

Customer Number: 2210910188 Statement Date: 11/30/2020 Statement Period: 11/01/2020 - 11/30/2020 Enclosure Items: Page Number: 1 of 1 Holding Account

Contact Information

Address:

Commerce Bank 5800 SAN DARIO LAREDO TX 78041

Bank Phone: IBC Voice:

1- (956) 724-1616 1- (956) 791-1616 www.IBC.com

Nisit us Online: Mobile Banking:

Download app or visit at: www.myIBC.com

Please examine and report any discrepancies within 14 days from your statement date.

Biz Rite	er colette	Account	Recap	Account Number: 2210910188		
Beginning Balance 142,229.02	Number of Credits 0	Deposits & Credits 0.00	Number of Debits 0	Withdrawals & Debits 0.00	Closing Balance 142,229.02	
		Balance S	Summary			
Average Colle	cted Balance	142,229.02				
		Daily Endin	g Balance		STATE OF STA	
Date 11/01	Amount 142,229.02					

ERROR RESOLUTION

In case of errors or questions about your Electronic Transfers call us at 1-866-902-5860 OPTION 4 or write us to IBC Fraud Prevention, 8770 Tesoro, San Antonio, TX 78217.

For errors or question about IBC ATM transactions call us at (210) 930-9875 or write us to IBC Fraud Prevention, 8770 Tesoro, San Antonio, TX 78217.

Call us or write us as soon as you can if you think your statement is wrong or if you need more information about a transfer listed on the statement. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

1.Tell us your name and account number.

2.Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.

3.Tell us the dollar amount of the suspected error.

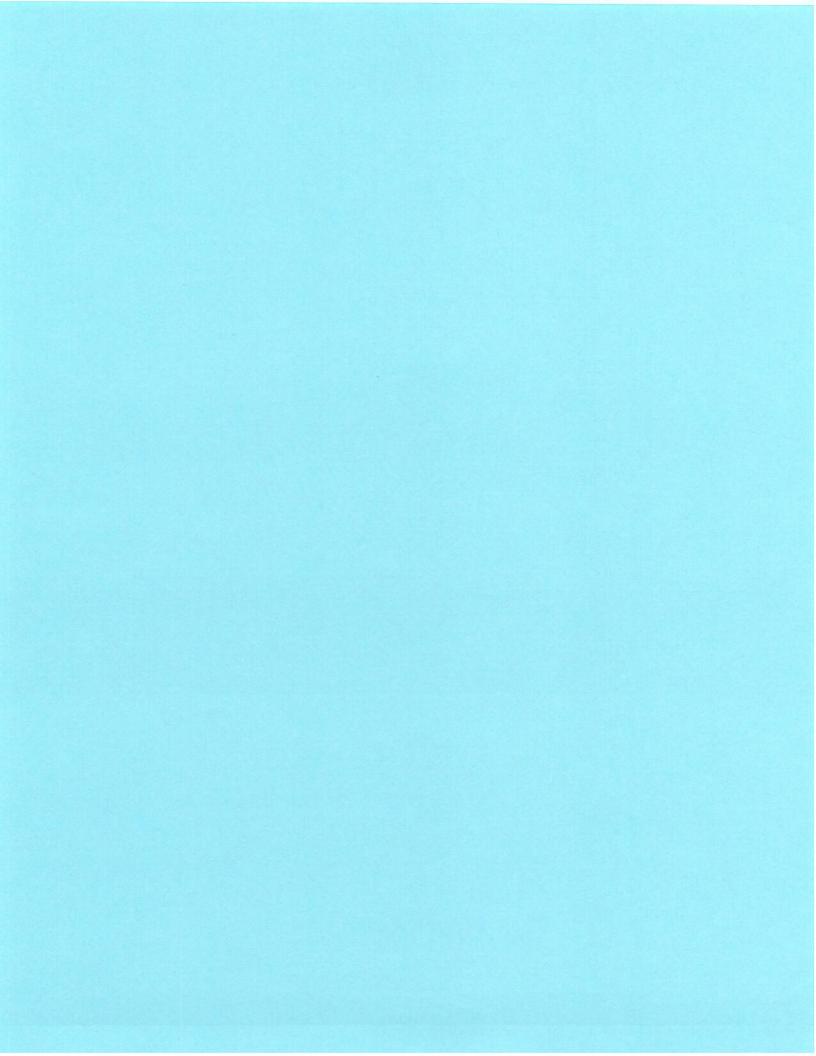
For U.S. Residents with Personal Accounts:

We will tell you the results of our investigation within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days (90 days if the transfer involved a point-of-sale transaction, or was initiated outside the U.S.A. and Puerto Rico) to investigate your complaint or question. If we decide to do this, we will credit your account within 10 business days for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation. For new accounts, the Bank is allowed 20 business days to resolve an error before it must provisionally credit the card holder's account and up to 90 calendar days to complete this investigation. A new account is one open less than 30 days. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account. If we decide that there was no error, we will send you a written explanation within 3 business days after we finish our investigation. You may ask for copies of the documents that we used in our investigation.



For all other accounts:

We will promptly investigate your case after we hear from you and will correct any error identified promptly. We may take up to 90 days to investigate your complaint or question. We will send you a written explanation after we finish our investigation. You may ask for copies of the documents that we used in our investigation.



FISCAL YEAR 21 OPERATING BUDGET (Sept. 1, 2020 Thru Aug. 31, 2021) Version: Revision No.1 (December 31, 2020, Including DSHS Additional Alignment Funding) FY21 EMS FY21 EMS FY21 System County Asst. FY21 EMS County Asst. FY21 EMS Development FY20-21 FY22 LPG Grant Grant **RAC Grant RAC Grant** (Tobacco) Senate Bill (Local Regular 'Alignment" Regular 'Alignment" General **Grant Regular** 500 Planning Grant Programs/General Account **Funding Funding** Funding **Funding** Account **Fudning Funding** Grant) **Grant Awards Projected Totals/General Fund** \$66,492.00 \$66,492.00 **Account Annual Projected Totals** \$32,085.00 \$32,085.00 \$43,652.00 \$27,811.00 TBD Projected Membership Fee Revenue \$12,750.00 **Operating Expenses** Postal Box Annual Fee (Paid) (\$106.00) VFIS Insurance (Adjusted 3% increase) (\$1,431.00) **TETAF Dues** (\$900.00) Administrator Fee1st Quarter (\$8,021.25) Administrator Fee 2nd Quarter (\$8,021.25) Administrator Fee 3rd Quarter (\$8,021.25) Administrator Fee 4th Quarter (\$8,021.25) (\$2,915.00) CPA Tax Return for 2014/Form 990 EZ (\$600.00) GTAC Travel - November 2020- Fort Worth, Tx. Cancelled due to COVID-19 \$0.00 GETAC Travel- Feb. 2021 - Austin, Tx. (Required) Cancelled due to COVID. \$0.00 GTAC Travel- May. 2021- Austin, Tx. (\$1,500.00) GTAC Travel- August 2021 - Austin, Tx. (Required) (\$1,500.00)TETAF Annual Workshop/Conference) (\$400.00) Cost of Web Page Hosting & Domain with GoDaddy: Renewal for One Year on Nov. 1, 2020) (Paid) (\$354.00) Other RAC Business Related Travel (Projected) \$0.00 BronzeStar Ambulance (Awards Issued) (\$7,693.00) (\$7,693.00) (\$3,357.85)Laredo Fire Department (Awards Issued) (\$7,693.00) (\$7,693.00)(\$3,357.80)Angel Care Ambulance (Awards Issued) (\$7,693.00) (\$7,693.00)(\$3,357.85)South Texas Ambulance Response (Awards Issued) (\$7,693.00) (\$7,693.00)(\$3,357.85) Webb Co. Vol. EMS/Fire (Awards Issued) (\$7,693.00) (\$7,693.00) (\$3,357.85)Zapata County Fire Department (Awards Issued) (\$12,641.00) (\$12,641.00) (\$3,357.85) Doctors Hospital of Laredo \$0.00 \$0.00 (\$3,357.85)Laredo Medical Center \$0.00 \$0.00 (\$3,357.85)Victorious Ambulance (Awards Issued) (\$7,693.00) (\$7,693.00) (\$3,357.85)

(\$7,693.00)

0.00

(\$7,693.00)

0.00

\$0.00

\$3,044

(\$3,357.85)

(\$3,357.85)

(\$3,357.85)

(\$3,357.85)

**\$0.00

\$0.00 \$27,811.00

Prestige EMS (Awards Issued)

Texas Superior Ambulance

Lalitas Ambulance Care (**Member Not in Good

Laredo Lifeline

Captial Care EMS

PROJECTED BALANCE

Standing)

ITEM 21-36 (TAB 3)

Seven Flags Regional Advisory Council

Seven Flags Regional Advisory Council Trauma Service Area "T"

EMS Membership RAC Application Form FY 2021

(PLEASE PRINT)			
Name of Organization:	Skyline EMS Inc.		
Name of CEO or Chief:	Maria I. Rodriguez		
Phone Numbers:	Office: 956-682-7222	Fax: 956-424-3665	
Email Address:	skyline.ems@gmail.com		
Physical Address:	1352 E. 1st ST, Suite Q, Mission, TX. 78572		
Mailing Address:	310 E. Main PMB 213, Alton, TX. 78573		
Person Representing the Organization as Director or Officer on the RAC:	Kevin Harris EMT-P DO		
Phone Numbers:	Office: 956-682-7222 Cell: 956-478-5284	Pager: Fax:	956-424-3665
Email Address:	kharris286@gmail.com		
Mailing Address:	1352 E. 1st ST, suite Q, Mission, TX. 78572		
Alternate Representative:	Juan F. Cordero ECA CFO		
Phone Numbers:	Office: 956-682-7222 Cell: 956-240-4448	Pager: Fax:	956-424-3665
Email Address:	skyline.ems@gmail.com		
Mailing Address:	310 E. Main PMB 213, Alton, TX. 78573		
Alternate Representative:	Maria I. Rodriguez CEO		
Phone Numbers:	Office: 956-682-7222 Cell: 956-458-3403 F	Pager: Fax:	956-424-3665



				ביהתיים כבי יוכר יוירם			
Email Address:	skyline	skyline.ems@gmail.com	E				
Mailing Address:	310 E.	310 E. Main, PMB 213, Alton, TX. 78573	, Alton,	TX. 78573			
Alternate Representative:	Gilbert	Gilbert Garza EMT					
Phone Numbers:	Office:9	Office:956-682-7222	Cell:	956-599-2979	Pager:	Fax:	956-424-3665
Email Address:	gilgarza	gilgarza.skylineems@gmail.com	ymail.co	EI EI			0000
Mailing Address:	1352 E.	1352 E. 1st, Suite Q, Mission, TX. 78572	Ssion, T	TX. 78572			

ITEM 21-37 (TAB 4)

Pixl Labs, LLC 8719 Puerto Amarante Laredo, TX 78045 US (956) 351-6000 info@pixl.co www.pixl.co

Estimate



ADDRESS

John R. Keiser South Texas Development Council 1002 Dicky Lane Laredo, Texas 78043 U.S.A.

ESTIMATE #	DATE	
1094	10/13/2020	

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
	Video Spot (30 Second)	Video Production: 30 Seconds Promotional Video Clips (Testimonials, or to Promotion of specific Practice Areas) 1-2 Hours, Same Day Video Shoot 1-2 Locations HD Broadcast Quality Full Video & Audio Production Original Price \$650 Discounted Rate \$530 SPECIAL DEAL: Buy 3 and get 1 FREE!	1	530.00	530.00
	Voice Over	Voice over talent.	1	80.00	80.00

TOTAL

\$610.00

Accepted By

Accepted Date

ITEM 21-38 (TAB 5)

FISCAL YEAR 21 OPERATING BUDGET (S	ept. 1. 2020	Thru Aug 3	31 2021) V	arcion: Do	icion No 1	/December		
31, 2020, Inicia	ding DSHS	Additional /	Alignment F	Funding)	ision No.1	. (December		
Grant Programs/General Account	FY21 EMS County Asst. Grant Regular Funding	FY21 EMS County Asst. Grant "Alignment" Funding	FY21 EMS RAC Grant Regular Funding	FY21 EMS RAC Grant "Alignment" Funding	General Account	FY21 System Development (Tobacco) Grant Regular Fudning	Senate Bill	FY22 LPG (Local Planning Grant)
Grant Awards Projected Totals/General Fund Account Annual Projected Totals	¢55 402 05	455 455 55		90000				
Projected Membership Fee Revenue	\$66,492.00	\$66,492.00	\$32,085.00	\$32,085.00		\$43,652.00	\$27,811.00	TBD
Projected Membership Fee Revenue					\$12,750.00	林夏林 智		
Operating Expenses								
Postal Box Annual Fee (Paid)					10.25			
VFIS Insurance (Adjusted 3% increase)					(\$106.00)			
TETAF Dues					(\$1,431.00)			
Administrator Fee1st Quarter			/60.021.25\		(\$900.00)			
Administrator Fee 2nd Quarter			(\$8,021.25)					
Administrator Fee 3rd Quarter			(\$8,021.25) (\$8,021.25)					
Administrator Fee 4th Quarter			(\$8,021.25)		(42.045.00)			
CPA Tax Return for 2014/Form 990 EZ			(30,021.25)		(\$2,915.00)			
GTAC Travel - November 2020- Fort Worth, Tx.					(\$600.00)			
Cancelled due to COVID-19					\$0.00	1		
GETAC Travel- Feb. 2021 - Austin, Tx. (Required)					\$0.00			
Cancelled due to COVID.					\$0.00			
GTAC Travel- May. 2021- Austin, Tx.					(\$1,500.00)			
					(91,500.00)			
GTAC Travel- August 2021 - Austin, Tx. (Required)					(\$1,500.00)			
TETAF Annual Workshop/Conference)					(\$400.00)			
Cost of Web Page Hosting & Domain with GoDaddy: Renewal for One Year on Nov. 1, 2020) (<i>Paid</i>)					(\$354.00)			
Other RAC Business Related Travel (Projected)					\$0.00			
BronzeStar Ambulance (Awards Issued)	(\$7,693.00)	(\$7,693.00)			50.00	(\$3,357.85)		
Laredo Fire Department (Awards Issued)	(\$7,693.00)	(\$7,693.00)				(\$3,357.80)		
Angel Care Ambulance (Awards Issued)	(\$7,693.00)	(\$7,693.00)				(\$3,357.85)		
South Texas Ambulance Response (Awards Issued)	(\$7,693.00)	(\$7,693.00)				(\$3,357.85)		
Webb Co. Vol. EMS/Fire (Awards Issued)	(\$7,693.00)	(\$7,693.00)				(\$3,357.85)		
Zapata County Fire Department (Awards Issued)	(\$12,641.00)	(\$12,641.00)				Control of the Control		
Doctors Hospital of Laredo	\$0.00	\$0.00				(\$3,357.85)		
Laredo Medical Center	\$0.00	\$0.00				(\$3,357.85)		
Victorious Ambulance (Awards Issued)	(\$7,693.00)	(\$7,693.00)				(\$3,357.85) (\$3,357.85)		
Prestige EMS (Awards Issued)	(\$7,693.00)	(\$7,693.00)				(\$3,357.85) (\$3,357.85)		
Laredo Lifeline						(\$3,357.85)		
Lalitas Ambulance Care (**Member Not in Good						(23,327.63)		
Standing)						**\$0.00		
Texas Superior Ambulance						(\$3,357.85)		
Captial Care EMS						(\$3,357.85)		
PROJECTED BALANCE	0.00		0.00	\$0.00	\$3,044		\$27,811.00	

FYZB May 1, 2019 thru August 31, 2020 (16 Month Contract)
FYZI: May 1, 2020 thru August 31, 2021 (16 Month Contract)
FYZE September 1, 2021 thru August 31, 2022 (12 Month Contract)

Jun Jul Aug 31, 2020 FY20 CURRENT CONTRACT TERM: September 1, 2019 - August 31, 2020 May FYZO CURRENT CONTRACT TERM: May 1, 2019 - August 31, 2020 FY20 CURRENT CONTRACT TERM: May 1, 2019 - August 31, 2020 Apr May 1, 2019 Jun Jul Aug Sep Oct Nov Dec Jan Feb Mar CURRENT CONTRACT TERM FY20 FY20 CURRENT CONTRACT TERM: 5/1/2019 - 8/31/2019 PROGRAM EMS/RAC EMS/CO RAC SYS DEV 106

If LPG funds are availble an amendment will be processed in January 2021 FY21 AMENDMENT: 5/1/2020-8/31/2020 Jul Aug 31, 2021 ALLOCATIONS will consist of 5/1/2020

REMS/COUNTY funding which is available to expend 5/1/2020 through 8/31/2021.

As well as 9/1/2020

RENS/CO ALIGNMENT funding which is available to expend 5/1/2020 through 8/31/2021. PY21 ALIGNMENT FUNDING: September 1, 2020 - August 31, 2021 FY21 ALIGNMENT FUNDING: September 1, 2020 - August 31, 2021 FY21 CONTRACT FUNDING: September 1, 2020 - August 31, 2021 Jun May Apr FY21 CONTRACT FUNDING: May 1, 2020 - August 31, 2021 FY21 CONTRACT FUNDING: May 1, 2020 - August 31, 2021 Feb Mar Dec Jan 72 Aug Sep Oct Nov FYZ1 NEW CONTRACT FUNDING: 5/1/2020 - 8/31/2020 Jul May 1, 2020 Jun PROGRAM EMS/RAC EMS/CO EMS/RAC RACSYS EMS/CO LPG

PROGRAM ID						-	FYZZ					
	Sep 1, 2021	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	P	Jul Aug 31, 2022
EMS/CO			122 CO	FY22 CONTRACT TERM: September 1, 2021 thru August 31, 2022	TERM:	Septem	ber 1, 2	021 thm	August	131, 202	2	
EMS/RAC		-	122 COI	FY22 CONTRACT TERM: September 1, 2021 thru August 31, 2022	TERM:	Septem	lber 1, 2	021 thru	August	131, 202	7	
RAC SYS DEV		•	122.00	FY22 CONTRACT TERM: September 1, 2021 thru August 31, 2022	TERM:	Septem	lber 1, 20	021 thru	August	31, 202	7	
83	H.	og fund be p	s are av	If LPG funds are availble an amendment will be processed in January 2022	namend uary 20	lment w	-	1	FYZZ (FY22 CONTRACT TERM: 1, 2022 - August 31, 2022	CT TER	M: May 31, 2022

ITEM 21-39 (TAB 6)

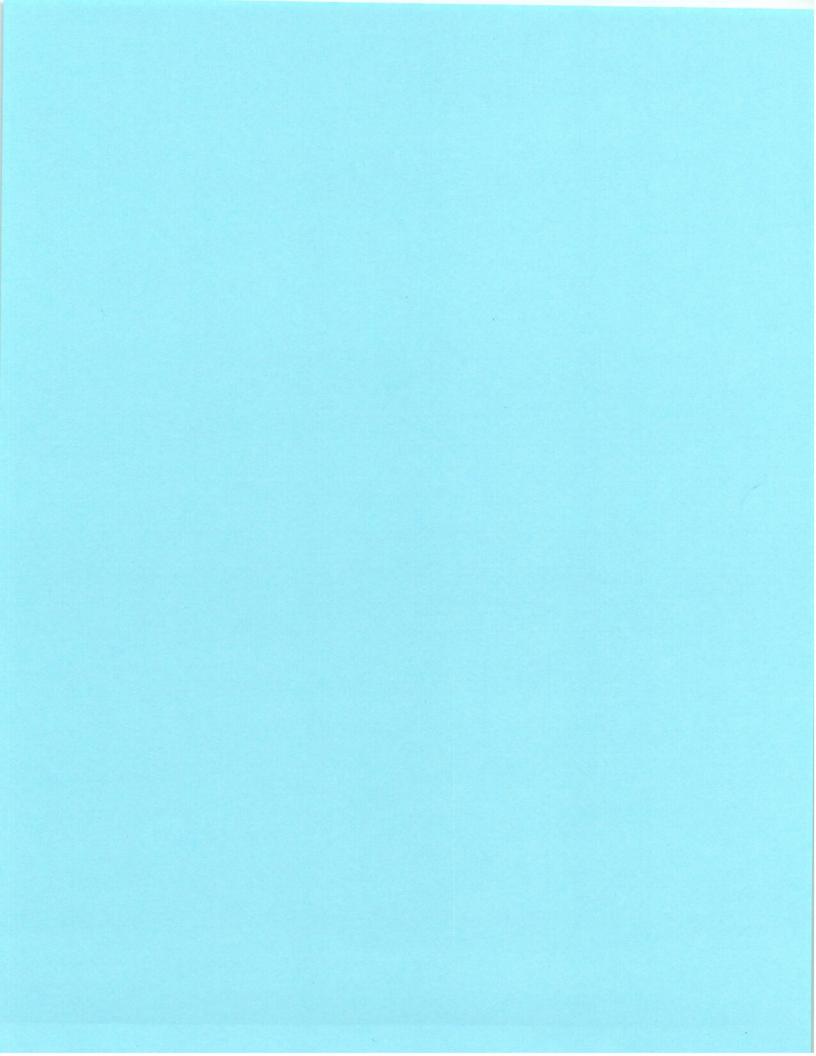
FISCAL YEAR 21 OPERATING BUDGET (Se	pt. 1, 2020	Thru Aug. 3	1, 2021) V	ersion: Rev	ision No.1	(December		
31, 2020, Iniciu								
	FY21 EMS County Asst. Grant Regular	FY21 EMS County Asst. Grant "Alignment"	FY21 EMS RAC Grant Regular	FY21 EMS RAC Grant "Alignment"	General	FY21 System Development (Tobacco) Grant Regular	FY20-21 Senate Bill 500	FY22 LPG (Local Planning
Grant Programs/General Account	Funding	Funding	Funding	Funding	Account	Fudning	Funding	Grant)
Grant Awards Projected Totals/General Fund	455 455 55					4		aparantos.
Account Annual Projected Totals	\$66,492.00	\$66,492.00	\$32,085.00	\$32,085.00	CHARLES AND A CONTRACTOR	\$43,652.00	\$27,811.00	TBD
Projected Membership Fee Revenue			ALC: N		\$12,750.00			The state of
Oneveties Funerase								
Operating Expenses						at a small of the		
Postal Box Annual Fee (Paid)					(\$106.00)			
VFIS Insurance (Adjusted 3% increase)					(\$1,431.00)			
TETAF Dues					(\$900.00)			
Administrator Fee1st Quarter			(\$8,021.25)		(\$500.00)			
Administrator Fee 2nd Quarter			(\$8,021.25)					
Administrator Fee 3rd Quarter			(\$8,021.25)					
Administrator Fee 4th Quarter			(\$8,021.25)		(\$2,915.00)			
CPA Tax Return for 2014/Form 990 EZ			(90,021,25)		(\$600.00)			
GTAC Travel - November 2020- Fort Worth, Tx.					(\$000.00)			
Cancelled due to COVID-19					\$0.00			
GETAC Travel- Feb. 2021 - Austin, Tx. (Required)					75.00			
Cancelled due to COVID.					\$0.00			
GTAC Travel- May. 2021- Austin, Tx.					(\$1,500.00)			
GTAC Travel- August 2021 - Austin, Tx. (Required)					(\$1,500.00)			
TETAF Annual Workshop/Conference)					(\$400.00)			
Cost of Web Page Hosting & Domain with GoDaddy: Renewal for One Year on Nov. 1, 2020) (<i>Paid</i>)					(\$354.00)			
Other RAC Business Related Travel (Projected)					\$0.00			
BronzeStar Ambulance (Awards Issued)	(\$7,693.00)	(\$7,693.00)				(\$3,357.85)		
Laredo Fire Department (Awards Issued)	(\$7,693.00)	(\$7,693.00)				(\$3,357.80)		
Angel Care Ambulance (Awards Issued)	(\$7,693.00)	(\$7,693.00)				(\$3,357.85)		
South Texas Ambulance Response (Awards Issued)	(\$7,693.00)	(\$7,693.00)				(\$3,357.85)		
Webb Co. Vol. EMS/Fire (Awards Issued)	(\$7,693.00)	(\$7,693.00)				(\$3,357.85)		
Zapata County Fire Department (Awards Issued)	(\$12,641.00)	(\$12,641.00)				(\$3,357.85)		
Doctors Hospital of Laredo	\$0.00	\$0.00				(\$3,357.85)		
Laredo Medical Center	\$0.00	\$0.00				(\$3,357.85)		
Victorious Ambulance (Awards Issued)	(\$7,693.00)	(\$7,693.00)				(\$3,357.85)		
Prestige EMS (Awards Issued)	(\$7,693.00)	(\$7,693.00)				(\$3,357.85)		
Laredo Lifeline						(\$3,357.85)		
Lalitas Ambulance Care (**Member Not in Good								
Standing)						**\$0.00		
Texas Superior Ambulance						(\$3,357.85)		
Captial Care EMS						(\$3,357.85)		
PROJECTED BALANCE	0.00		0.00	\$0.00	\$3,044	\$0.00	\$27,811.00	

ITEM 21-40 (TAB 7)

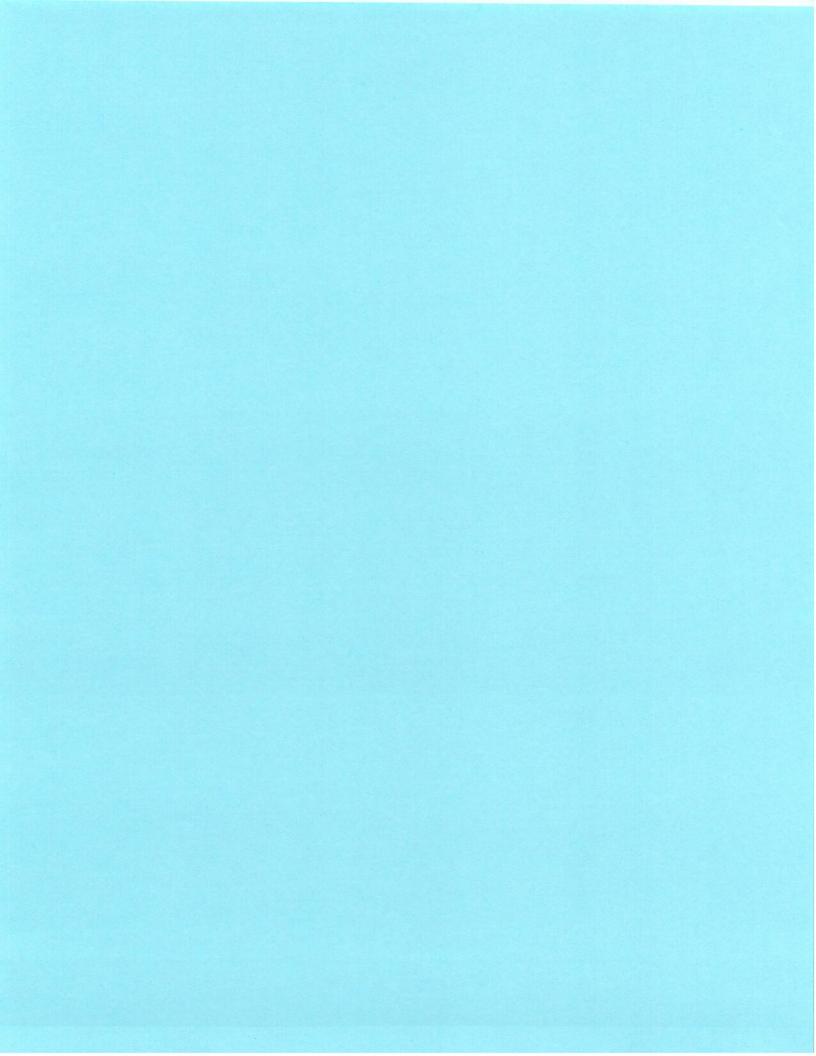
In Support of Reimbursement Requests for EMS/RAC EXPENDITURES (5/1/2020 - 8/31/2021) RAC NAME Seven Flags Reginal Advisory Council Total FY21 EMS/RAC Expenditures \$ 1 \$ Program Costs Enter RAC Name \$ Administrative Costs TOTAL of ADMINISTRATIVE and PROGRAM COSTS Program Income Enter funds Program funds generated. 1st Quarter May 2020 June 2020 July 2020 August 2020 1st Quarter Total FY21 Contract Activities List employees FRINGE BENEFITS Frings Benefits TRAVEL Report TOTAL costs for each Conference attended on a single line. List each individual expense SUPPLIES CONTRACTUAL List each individual expense. STDC Commiscled Administrative Fee List each individual expense. INDIRECT COSTS MONTHLY BREAKDOWN OF PROGRAM & ADMINISTRATIVE COSTS May 2019 June 2019 July 2019 August 2019 1st Quarter Totals Program Costs PERSONNEL FRINGE BENEFITS TRAVEL EQUIPMENT SUPPLIES CONTRACTUAL Administrative Costs PERSONNEL PERSONNEL FRINGE BENEFITS TRAVEL EQUIPMENT SUPPLIES CONTRACTUAL Name & phone number of Person Completing this Form John R. Keiser / 956-722-3965

COMMENTAL COSTS POSTAN TO CONTROL OF THE CONTROL OF THE COSTS CONTROL OF THE COSTS OF THE COST	vities	September 202 \$ - 000 \$ 000 \$ 000	O October	Coun	arter November 2020	S S S S S S S S S S S S S S S S S S S	FAC N Page 15 S S S S S S S S S S S S S		3rd Quarti Council 3rd Quarty 2021 Fe - \$ - \$ - \$		3rd Quarter Totals \$ \$ \$ \$ \$
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AVEL 187 AVE	con individual expense Leach individual exp	5	\$ 5	. s	000	\$			- \$		\$
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AVEL 187 AVE	con individual expense Leach individual exp	5	\$ 5	. s	000	\$			- \$		\$
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EMS/PAC	EXPENDITURES (5/1/2020 - 8/31/2021)	In Support	of Reimbursemer			In Support	of Reimbursemen	t Requests for		
LINGINAC	EXPENDITORES (3/1/2020 - 8/3/1/2021)	RAC NAME	Seven Flags (Reginal Advisory ouncil		RAC NAME	Seven Flags F Co	Reginal Advisory nuncil		
Total FY21 EMS/RAC Expenditures	s .									
Program Costs		Ī								
Administrative Costs	•	1								
TOTAL of ADMINISTRATIVE and PROGRAM COSTS		-								
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- reg are source		The second	4th	Quarter			5th (Quarter		1
		March 2021	April 2021	May 2021	4th Quarter Totals	June 2021	July 2021	August 2021	5th Quarter Totals	Total Expenditure
FY21 Contract A										
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PRINCE BENEFITS	Frince Benefits	\$	\$ -	\$	5	\$	*	1	\$.	5 .
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on a single line.										
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	this Form			William .				74		

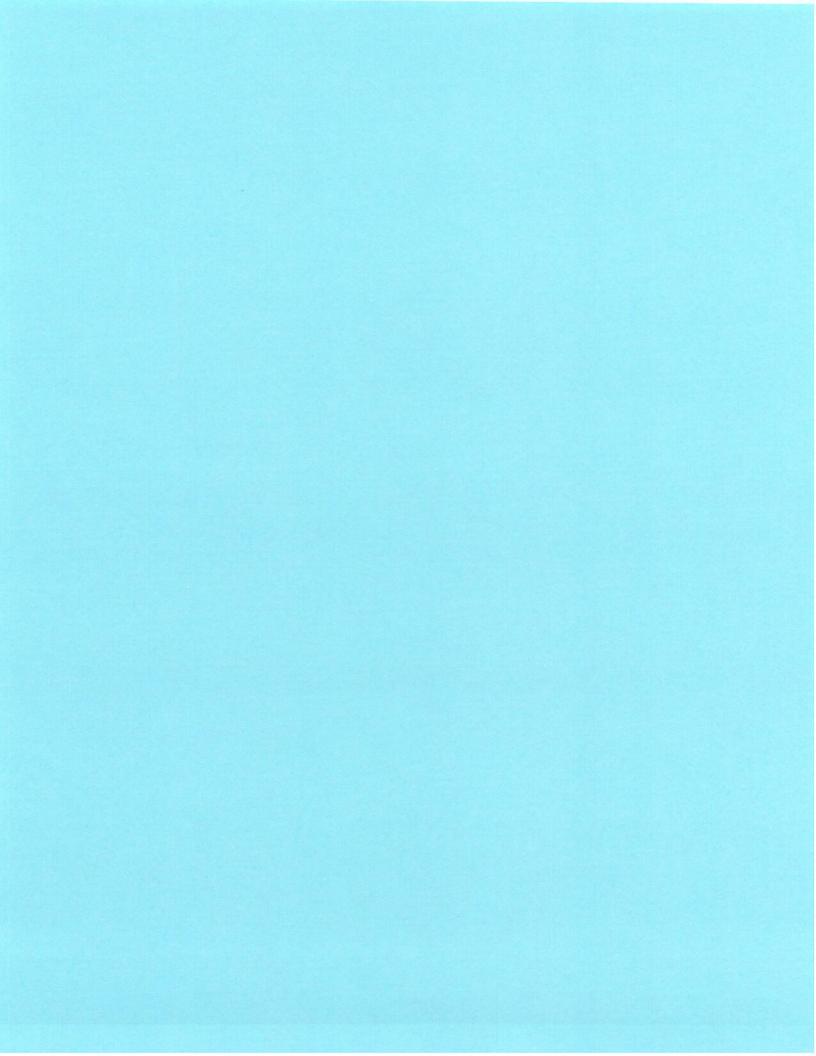


O FORD	EVDENITI DES JEMPONO GOLDON		In Support of	In Support of Reimbursement Requests for	nt Requests for	
EMS/LP(EMS/LTG EXPENDITURES (5/1/2020 - 8/31/2020)	RAC NAME	Seven Flags	Seven Flags Regional Advisory Council	sory Council	
Total FY2021 EMS/LPG Expenditures	12,946.00			Enter RAC Name		
			1st Quarter	uarter		
		May 2020	June 2020	July 2020	August 2020	Total Expenditures
FY20 Contract Activities	Activities					
EQUIPMENT	List each individual expense. NVA			49.	•	
Supplies	List each individual expense. NA	, o	. 000	000	000	
CONTRACTUAL	List each individual expense. N/A	0.00	00:0	00.00	00.00	,
OTHER TOTAL COSTS	List each individual expense CPR Ecards BLS 85 50 folds. ACLS @ \$10 00 fear. Heartsaver @20 00 PYZOZY Anual Training Site Fee @ \$1,000 1 x qty Code Bus Headerin CPR Training Manekin 1 x qty Modred Physio Definituation Sings Accessory 1 x qty LAL Adult CPR-D Sitiss Trainer Manekin Handling & Freignt Name & phone number of Person Completing	, 88 88 88 88 88 88 88 88 88 88 88 88 88		**	\$ 12,946.00 \$ 12,946.00 \$ \$ 12,946.00 \$ \$ 12,946.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	12,946.00 12,946.00
	this Form		John R. Keiser / 956-722-3995	356-722-3995		



In Support of Reimbursement Requests for In Support of Reimbursement Requests for EMS/RAC EXPENDITURES (9/1/2020 - 8/31/2021) RAC NAME Seven Flags Regional Advisory Council RAC NAME Seven Flags Regional Advisory Council 1 Program Costs \$ Enter RAC Name Administrative Costs \$ TOTAL of ADMINISTRATIVE and PROGRAM COSTS Enter Program funds generated. 1st Quarter December 2020 January 2021 February 2021 2nd Quarter Totals September 2020 October 2020 November 2020 1st Quarter Total FY21 Contract Activities FRINGE BENEFITS Fringe Benefits TRAVEL Report TOTAL costs each Conference after on a single line. EQUIPMENT List each individual expense N/A SUPPLIES List costs by individual, if applicable and report all Non-Personnel indirect costs as one lump sum MONTHLY BREAKDOWN OF PROGRAM & ADMINISTRATIVE COSTS September 2019 October 2019 November 2019 2nd Quarter Totals December 2019 January 2020 February 2020 3rd Quarter Totals PERSONNEL FRINGE BENEFITS TRAVEL EQUIPMENT SUPPLIES PERSONNEL FRINGE BENEFITS TRAVEL EQUIPMENT SUPPLIES CONTRACTUAL Name & phone number of Person Completing this Form John R. Keiser / 956-722-3995

FY21 Contract Activities	EMS/RAC	EXPENDITURES (9/1/2020 - 8/31/2021)	RAC NAME	of Reimbursemen Seven Flags R Co	t Requests for egional Advisory uncil		In Support	of Reimbursement Seven Flags Re Cor	t Requests for egional Advisory uncil		
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Monthly Breakdown of PROGRAM & Administrative Costs											
Monthly Breakdown of PROGRAM & Administrative Costs							VATABLE.				
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Ambusance INDIRECT COSTS List costs by individual, if applicable and report all Non-Personnel indirect costs as one lump TOTAL COSTS MONTHLY BREAKDOWN OF PROGRAM & ADMINISTRATIVE COSTS March 2020 April 2020 May 2020 3rd Quarter Totals June 2020 July 2020 August 2020 4th Quarter Totals Total Expenditures Program Costs PERSONNEL FRINGE BENEFITS
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ITEM 21-42 (TAB 8)

ITEM 21-42-a. (TAB 8)

FY21 SFRAC Membership Summary for December 2020

TSA	Entity Name	County	Application Submitted	EMS Affidavit Submitted	Needs Assessment Submitted	Date Paid/ Date Deposited	Check Number	Check Number Amount Due/Paid	Board Meeting Scheduled for September 30, 2020	Board Meeting Scheduled October 30, 2020	No Board Meeting Scheduled for November 1 2020	Board Meeting Scheduled S December Ja 17, 2020	Board I Meeting Scheduled January 29, F 2021	Meeting Scheduled No February fo 2021	Board Neeting Scheduled Scheduled Scheduled So. 2021	No Board Meeting Scheduled Sign April 2021	Board Neeting 1 Scheduled Scheduled	No Board Meeting 7 Scheduled Scheduled Scheduled 2021	Board Meeting Scheduled July 30,	Board Meeting Scheduled August 30, 2021
	Air Evac I feream (Vested)	Webb	S	_	o z			FY21 Membership Fees: \$750/Paid :\$0.00		۵										
Ā	Ansel Gare Ambulance Service. LLC (Vested)	Webb	Yes	Yes		10-01-2020 / Deposited 10- 24-2020	#11105	FY21 Membership Fee: \$750/Paid: \$750.00 / Bal. \$0.00		۵										
	BronzeStar Ambulance Service, LLC (Vested)	Webb	Yes	Yes		11-4-2020 / Deposited 11- 21-2020		FY21 Membership Fee: \$750/Paid: \$750.00 / 8al. \$0.00	۵.	d										
Ü	City of Laredo Fire Department (Vested)	Webb	o _N	Ŷ.	o _N			FY21 Membership Fee:\$750/Paid: \$0.00		Ь										
a a	Doctors Hospital of Laredo (Vested)	Webb	Yes	N/A		9-15-20 / Deposited 9-28-2020	62103086	FY21 Membership Fee: \$1,500 + \$450 TETAF Fee = \$1,950 / Paid: \$1,950.00 / Bal. \$0.00	٩	Ь										
10 01	Genesis Emergency Service, Inc. (Member Since 10/30/20	Webb	Yes	Yes		11-18-2020 / Deposited 11- 21-2020		FY21 Membership Fee:\$625/Paid: \$625.00 /Bal. \$0.00	0											
	alitas Ambulance (are (Member Since 7/31/19)	Webb	Yes	Yes	Yes			FY20 Membership Fees: \$750 w/Late Fees Added = \$850 + FY21 Membership Fees: \$750/Total Due: \$1,600 Paid: \$0.00	s s o	A										
E P	aredo Lifeline, LLC (Member Since 5/30/19)	Webb	o Z	Yes	No No	10-6-2020 / Deposited 10-24-2020	#2263	FY21 Membership Fee: \$750/Paid: \$750.00 / Bal. \$0.00	۵	۵								**************************************		
الم	Texas Superior Ambulance (Member Since 2/26/19)	Webb	Yes	Yes		10-30-2020/ Deposited 10- 31-2020	#1118	FY21 Membership Fees: \$750/Total Due: \$750.00 Paid: \$750.00 Bal. \$0.00	4	م										
3	Capital Care EMS (Member Since 10/30/20)	Webb	Yes	Yes	Yes	10-6-2020 / Deposited 10-24-2020		FY21 Membership Fee: \$750/ Paid: \$750.00 /Bal. \$0.00		Ą										
Lai	aredo Medical Center (Vested)	Webb	No.	N N	No			\$1,500 + \$450 TETAF Fee = \$1,950/Paid: \$0.00	ه.	Ь										
Pre	Prestige EMS, LLC (Vested)	Webb	No	No	No			FY21 Membership Fee: \$750/Paid: \$0.00	ď	Ч										
ž	Medpoint Ambulance, Inc. (Member Since 8/18/20)		Yes	Yes	Yes	10-30-2020 / Deposted 11-21-2020	#2987	FY21 Membership Fee: \$750/Paid: \$750.00 / Bal. \$0.00	۵	Ь										
So	South Texas Ambulance Response, Inc. (Vested)	Webb	Yes	Yes	Yes			FY21 Membership Fee: \$750/Paid: \$0.00	۵	d										
, S	Victorious Care Ambulance (Vested)	Webb	Yes	Yes	Yes	9-23-2020/ Deposited 9-28-2020	#1429	FY21 Membership Fee: \$750/Paid: \$750.00/Bal. \$0.00	٧	٩										
×	Webb County Volunteer Fire/EMS (Vested)	Webb	Yes	Yes	Yes	11/5/2020 Deposted 11- 21-2020	#19181	FY21 Membership Fee: \$750/ Paid: \$750.00 / Bal. \$0.00	۵	ď										
70,0			2	200		9-15-20 / Deposited 9-	#302545	FY21 Membership Fee: \$750/Paid: \$750.00/8al. \$0.00	<	۵										



ITEM 21-43



John Hellerstedt, M.D.

Commissioner

December 7, 2020

Mr. Enrique Gallegos Chief Executive Officer Laredo Medical Center 1700 East Saunders Street Laredo, Texas 78041

Dear Mr. Gallegos:

This letter is to inform you of the department's decision to administratively extend your facility's Primary (Level II) Stroke Facility designation due to the precautionary measures taken by your certification agency to postpone onsite visits during the COVID-19 pandemic.

The department has approved this request. Your facility's designation has been extended until **April 1, 2021**.

If you have any questions concerning this letter, please contact Patricia Brachel, R.N., Performance Improvement Designation Coordinator via email at patricia.brachel@dshs.texas.gov or by phone (512) 834-6604, any time.

Sincerely,

Elizabeth Stevenson, R.N.

Designation Program Manager - Stroke

Colegabeth Stevenson, RN

EMS/Trauma Systems

cc: Erika Cavazos-Juarez, R.N., Stroke Program Manager Guillermo Heard, RAC Chair