

TYLER COUNTY COMMISSIONER'S COURT  
SPECIAL MEETING  
JANUARY 5, 1981

Vol. 6 Pg. 165

A Special Meeting of the Commissioner's Court, met on Monday January 5, 1981 at 10:00 A.M. All members being present. The meeting was opened with prayer by County Judge Allen Sturrock.

A motion was made by Commissioner Riley and seconded by Commissioner Odom to advertise for Bids, for a patrol car for the Sheriff's Department, and to also seek bids on leasing additional cars, for the Sheriffs Office. The Bids to be opened January 26, 1981. All voted yes and none no.

A motion was made by Commissioner Odom and seconded by Commissioner Lowe to solicit Bids for a long carriage Typewriter for the District Clerk's Office. Bids to be opened January 12, 1981. All voted yes and none no.

RECESS FOR 15 MINUTES

IN SESSION-----RECESS UNTIL 2:0'CLOCK TUESDAY

OPEN SESSION TUESDAY AT 2:0'CLOCK

A motion was made by Commissioner Mahan to accept the low Bid of Richard DeFee Construction, of Livingston, Texas, with leaving off alternate #3. This motion died, because of no second motion. This is for the Courthouse Elevator.

RECESS UNTIL 3:30 P.M.---IN SESSION-----RECESS UNTIL 11:0'CLOCK WEDNESDAY.

IN SESSION- WEDNESDAY

A motion was made by Commissioner Riley and seconded by Commissioner Lowe to reject all bids and go out for negotiation, because all bids were to high. Commissioners Riley, Lowe and Odom voted yes and Commissioner Mahan voted no, on elevator bids.

There being no further business, the meeting adjourned.

SIGNED: Allen Sturrock Allen Sturrock, County Judge  
Maxie Riley Maxie Riley, Comm. Pct. #1  
H.K. Lowe H.K. Lowe, Comm. Pct. #2  
Jerry Mahan Jerry Mahan, Comm. Pct. #3  
Berton Adnell Odom Berton Adnell Odom, Comm. Pct. #4  
ATTEST: Grace Bostick Grace Bostick, County Clerk

LEASE AGREEMENT

THE STATE OF TEXAS §

COUNTY OF TYLER §

THIS AGREEMENT, made and entered into this 12th. day of December, 1980, by and between the COUNTY OF TYLER, STATE OF TEXAS, a political subdivision of the State of Texas, hereinafter called "Lessor", and CHEM-AIR SOUTH, INC., a Louisiana Corporation, P. O. Box 7241, Shreveport, Louisiana, 71103, hereinafter called "Lessee".

WITNESSETH:

That the Lessor does hereby lease, demise and let unto the Lessee the following described premises:

(See Exhibit "A" Attached)

which premises are located in Tyler County, Texas, and are a portion of the property owned by Lessor described on Exhibit "A" attached hereto and hereby incorporated by this reference.

The term of this lease is for one (1) year, running from and including the 12th. day of December, 1980, up to and including the 12th. day of December, 1981, unless sooner terminated as herein provided.

The Lessee to have the exclusive right to the possession of the leased premises during the term hereof and may make such excavations and lay such foundations as may be necessary for buildings, trailers, fuel tanks, machinery and fixtures, and roads or roadways when and if necessary.

During the initial lease year of this lease, Lessee shall pay as base rent to Lessor the sum of FIVE HUNDRED AND NO/100 (\$500.00) DOLLARS, payable in advance on the execution of this agreement.

It is understood and agreed by the parties hereto that the land herein involved is to be used as a materials storage site, to include storage of trucks, trailers, parts, spray materials,

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and the location of offices for Lessee in Tyler County, Texas. Lessee agrees to construct adequate fences surrounding the portion of the leased premises to be used for the storage of chemical spray materials so as to prevent access to such area by the general public.

Lessee may not assign this lease or any part thereof without the prior written permission of Lessor. Lessee may sublet the premises, or any part thereof, provided that Lessee shall, at all times, remain primarily responsible to Lessor for the payment of rentals due hereunder and the performance of all the terms and conditions hereof. No subletting shall, in any manner, be for any term greater than that granted Lessee herein.

Lessee accepts the premises in its present condition and subject to any and all defects, whether patent or latent, known or unknown. Lessee agrees to keep, defend and hold Lessor harmless from any liability or claim for damages or loss to persons or property both real or asserted, accruing from any cause or causes in, on or connected with or about the leased premises, or arising out of Lessee's occupancy of said premises, including, but not limited to, claims by Lessee, its customers, its employees or others.

Lessee agrees to procure and maintain a policy or policies of insurance at its own cost and expense, insuring Lessor and Lessee from all claims, demands or action for injury to or death of any one person in an amount of not less than \$100,000.00 and for injury to or death of more than one person in any one accident to the limit of \$300,000.00, and for damage to property in an amount of not less than \$50,000.00 made by or on behalf of any person or persons, firm or corporation arising from, related to or connected with the conduct and operation of Lessee's business on the leased premises. Lessor shall pay at its expense all ad valorem taxes, if any, on the leased premises.

Lessee shall pay at its expense all personal property tax levied upon the personal property on the demised premises during the term of this lease, or any extension thereof.

It is understood and agreed that the leased premises, during the term hereof and any extensions thereof, may be used and occupied by Lessee as a material storage site and for all other legal, commercial business operations conducted in connection therewith. Lessee agrees that in the conduct of its business it will abide by all state and federal laws.

Lessee agrees to be responsible, at Lessee's cost and expense, during the term of this lease and any extensions thereof, for keeping the leased premises free of all weeds to the extent necessary or required to comply with all health and environmental requirements, and shall keep the leased premises mowed at all times. In the event Lessee fails to properly keep the leased premises in a condition meeting all health and environmental requirements, Lessor may do so at Lessee's expense, and Lessee shall reimburse Lessor for the cost thereof. Lessee will surrender the leased premises at the expiration or termination of this lease free and clear of litter and trash, and further agrees to remove all buildings, trailers, tanks, and other materials used by Lessee in the operation of its business.

Lessee shall provide and pay for all utilities to the leased premises, including, but not limited to, gas, water and electricity, if any be necessary.

Lessee may place or install on the leased premises such trade fixtures and equipment as Lessee shall deem desirable for the conduct of business therein. Upon the expiration of this lease, Lessee may remove from the leased premises all such equipment, fixtures and merchandise, provided Lessee is not then in default with respect to any of Lessee's rental obligations or other obligations hereunder, and provided further that such

removal shall be performed in a workmanlike manner, leaving the premises in good condition.

All rents, reports and notices shall be given either to Lessor or to Lessee in writing delivered by mail or in person. Notices, if given by mail, shall be sent by Registered or Certified Mail, postage prepaid. If to Lessor, they shall be addressed to Lessor, Honorable Allen Sturrock, Tyler County Courthouse, Woodville, Texas, 75979, or such other address as Lessor may, from time to time, designate by written notice to Lessee. If to Lessee, they shall be addressed to Lessee at P. O. Box 7241, Shreveport, Louisiana, 71107, or such other address as Lessee may, from time to time, designate by written notice to Lessor.

It is expressly agreed and understood that in the event Lessee (1) shall fail to pay any annual rent herein provided for when it shall mature and become due and payable, or (2) shall fail for thirty (30) days to do and perform any other act, obligation or thing herein agreed by Lessee to be done and performed by Lessee, then Lessor may, at Lessors' option, declare this lease terminated, and upon giving written notice to Lessee of such election, as herein provided, this lease shall thereupon cease and terminate as fully, finally and completely as if it had expired by lapse of time, and Lessee shall thereupon surrender and deliver said premises to Lessor, paying Lessor any accrued rentals, damages or amounts otherwise then due. Thereafter, all rights and claims of Lessee in and to the use and enjoyment of such premises shall cease.

If the Lessee is adjudicated as bankrupt, or if a permanent receiver is appointed for any of Lessee's property, including any of Lessee's interest in the premises, and such receiver is not removed within sixty (60) days after written notice from the Lessor to the Lessee to obtain such removal; or if, whether

voluntary or involuntary, Lessee takes advantage of any debtor or relief proceedings under any present or future law, whereby the rent or any part thereof is, or is proposed to be, reduced or payment thereof deferred or if the premises of Lessee' effects or interest therein shall be levied upon or attached under any process against Lessee, and not satisfied or dissolved within thirty (30) days after notice from the Lessor to the Lessee to obtain satisfaction thereof; then, in any of such events, the Lessor, at Lessors' option, may at once, during continuance of such default or condition, terminate this lease by written notice to the Lessee, whereupon, this lease shall end and be terminated. Should this lease be terminated by reason of the foregoing, the premises will be surrendered immediately by the Lessee, and upon failure to surrender the premises to Lessor, Lessor shall have the accumulative privilege of pursuing any remedy provided by law for obtaining possession of the premises as if the terminated Lessee were holding over beyond the term and/or for failure to pay rent, and the Lessor shall be entitled to recover any reasonable attorney's fees and costs incurred in connection therewith. The foregoing shall be without prejudice to any remedies which might otherwise be used for the collection of arrearages in rent or curing breaches of covenants contained herein.

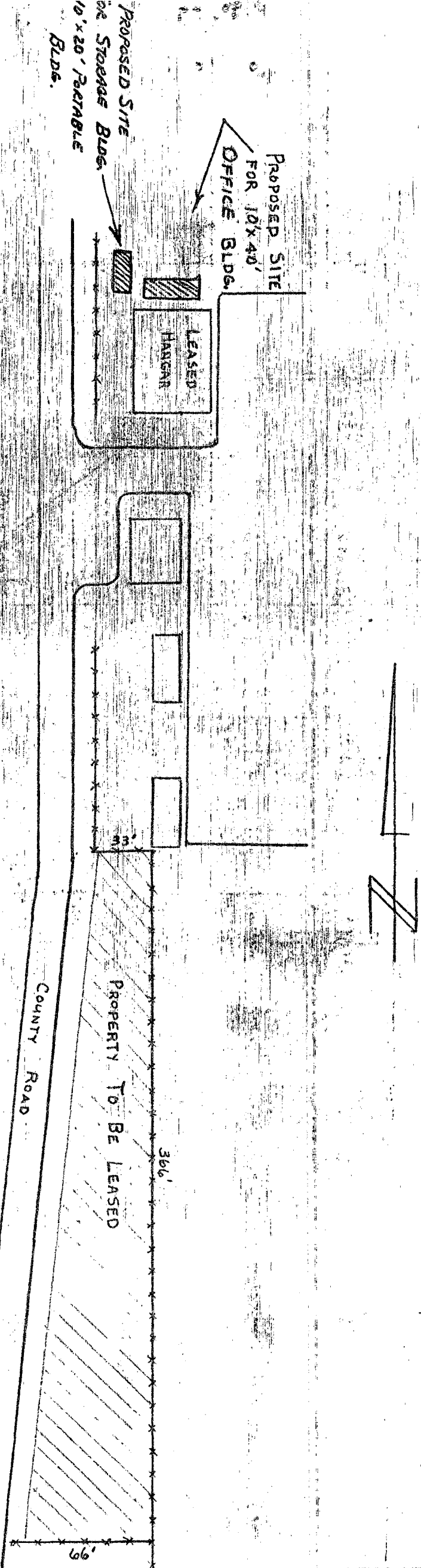
It is specifically understood and agreed by the parties this lease will terminate on the last day of the term hereinbefore set forth without notice from either party to the other. Accordingly, in the event the Lessee remains in possession of the premises after the expiration of this lease or any extensions thereof, the Lessee shall be in wrongful possession of the premises and a trespasser and the Lessor shall have the right any time thereafter to evict the Lessee from the premises and remove Lessee and Lessee's property from the premises, and take any other action

available to Lessor at law or equity to regain possession of the premises, and Lessee shall be obligated to pay to Lessor all expenses incurred by Lessor in connection with any such eviction or other action, including reasonable attorney's fees. Further, Lessee will be liable for any other damages which Lessor may sustain resulting from Lessee's wrongful possession, including reasonable attorney's fees Lessor may sustain in connection with any suit brought by Lessor against Lessee resulting from any other such damages. However, Lessor grants Lessee an option to renew this lease for a period of one (1) year after the expiration of its original terms, on the same terms as this lease, except that the extension will be subject to increase in additional rent. Lessee shall give Lessor written notice of its intention to renew at least sixty (60) days prior to the expiration of this lease.

#### MISCELLANEOUS PROVISIONS

A. WAIVER: Waiver or failure on the part of the Lessor to complain of any action or inaction on the part of the Lessee, no matter how long the same may continue, shall never be deemed to be a waiver by the Lessor of any of Lessors' rights hereunder. Further, it is covenanted and agreed that no waiver at any time of the provisions hereof by the Lessor shall be construed as a waiver of any of the other provisions hereunder, and that a waiver at any time of any of the provisions hereof shall not be construed as a waiver at any subsequent time of the same provisions. The consent or approval by the Lessor to or for any action by the Lessee requiring Lessors' consent or approval shall not be presumed as approval or consent for any subsequent similar act by the Lessee.

B. GOVERNING LAW: This lease shall be governed exclusively by the provisions hereof and by the laws of the State of Texas, as the same may, from time to time, exist. Moreover, this lease





Bank of the Southwest

NATIONAL ASSOCIATION, HOUSTON

P. O. BOX 2629 • HOUSTON, TEXAS 77001

CUSTODY DEPARTMENT

3 10 1986

DATE

05/02/80

RECEIPT NO. 429593

REDF FROM RECEIPT 337907

ACCOUNT

97300000

PLEGED TO

(FOR PLEDGE TERMS, SEE REVERSE SIDE)

CITIZENS STATE BANK  
P O BOX 109  
WOODVILLE TX 75979

TYLER COUNTY  
COMMISSIONERS COURT

SECURITY DESCRIPTION

FEDERAL NATIONAL MORTGAGE  
ASSOCIATION, 8.20% DEBENTURE  
TD 3-10-1978, DUE 3-10-1986

CUSIP # 313586026  
HELD AT: HOUSTON BRANCH  
FEDERAL RESERVE BANK  
OF DALLAS

PAR VALUE/NO. SHARES

NEXT INTEREST PAYABLE

SUBSEQUENT INTEREST PAYABLE

100,000.00

09-10-80

4,100.00

03-10

4,100.00

09-10

4,100.00

1 UNITS @ 100,000.00

*Dee Armstrong*  
AUTHORIZED SIGNATURE

NON-NEGOTIABLE

PROPOSED PLAN

FOR

TYLER COUNTY



HOSPITAL CHARGES

BED PATIENT CARE FOR SICKNESS, SURGERY, OR ACCIDENT:

- Semi-Private Room (no dollar limit)
- Intensive Care Unit (no dollar limit)
- Coronary Care Unit (no dollar limit)
- Hospital Services Such as:
  - Emergency Room
  - Operating Room
  - Recovery Room
  - Cystocopy Room
  - Drugs & IV Solution
  - Blood & Plasma
  - Crossmatching, etc.
  - X-Rays
  - Laboratory Work
  - Physical Therapy
  - Casts, Bandages, etc.
- Radiation Therapy (Coalt, Chemotherapy, etc.)

OUT-PATIENT CARE FOR:

- Accident Care (within 3 days of accident)
- Minor Surgery (on date of surgery)

OTHER CHARGES

DOCTORS' CHARGES FOR:

- Surgery (performed anywhere)
- Assistant Surgery
- Consultation
- Hospital Visits, Office Visits
- House Calls
- Dental Care (Resulting from an accident)

OTHER CHARGES FOR:

- Prescription Drugs
- Ambulance Service
- Anesthesia
- Private Duty Nurses
- Physical Therapy (out-patient)
- Diagnostic X-Ray (out-patient)
- Diagnostic Laboratory (out-patient hospital or clinic)
- Radiation Therapy, etc. (out-patient)
- Durable Medical Equipment
- Oxygen and its Administration
- Blood Transfusions, etc.
- Therapeutic Center
- Artificial Limbs, Eyes, etc.
- Orthopedic Braces

\$100 DEDUCTIBLE PER CALENDAR YEAR ( MAXIMUM 3 PER FAMILY) THEN  
 BLUE CROSS PAYS 80% OF THE FIRST \$ 5000 , THEN 100% to \$ 250,000  
 THE MAXIMUM THE PATIENT EVER PAYS TOWARD THESE SERVICES IN ANY  
 YEAR IS \$ 1000 PLUS THE DEDUCTIBLE  
 (DEDUCTIBLE IS WAIVED ON ACCIDENTS)

OUT-PATIENT PSYCHIATRIC CARE: 50% paid up to \$1000 yearly maximum.

MATERNITY CARE: Paid as any other illness on female participants.

\*\*\* Rates are also being quoted excluding maternity benefits.

ADDITIONAL ACCIDENT BENEFIT: \$300 PAID; DEDUCTIBLE IS WAIVED, THEN REGULAR BENEFITS.

# SUMMARY OF BENEFITS

Prepared by  
**BLUE CROSS & BLUE SHIELD OF TEXAS**

Prepared for

TYLER COUNTY

## HOSPITAL EXPENSES

*1. Deductible per admission	\$	**
2. Semi-private room with average semi-private toward private		80 %
3. All usual hospital services including blood, plasma and intensive care		80 %
4. Out-patient care		80 %
5. Number of days available other than for psychiatric care		Unlimited
6. Number of days available for psychiatric care per calendar year		0 days
7. Maternity	Applied for <input checked="" type="checkbox"/>	Not Applied for <input type="checkbox"/>
		80 %***

## ALL OTHER MEDICAL EXPENSES

*1. Deductible each calendar year, 3-month carryover included	\$	**
2. Number of participants required for maximum family deductible		3
3. All other eligible expenses except psychiatric care		80 %
4. Maximum benefits for psychiatric care per calendar year	\$	1000
5. For psychiatric care the Plan pays		50 %
6. For out-of-hospital drugs the Plan pays		80 %
7. Maternity	Applied for <input checked="" type="checkbox"/>	Not Applied for <input type="checkbox"/>
		80 %***

\*THE DEDUCTIBLE IS WAIVED ON ACCIDENT CASES. \$300 ACCIDENTAL INJURY BENEFIT.  
\*\*\$100 Common Front-End Deductible.

## SECURITY PROVISION

Applied for  Not Applied for  Coinsurance Amount \$ 1000

## MAXIMUM BENEFITS

Maximum Lifetime Benefits available to each participant \$ 250,000

## RATES

CHOICE OF RATE STRUCTURE -	<u>With Maternity Benefits</u>	<u>Without Maternity***</u>
1.) Employee Only Rate	\$38.82	\$38.04
Employee & Dependent(s)	\$103.76	\$100.32
Employees Over 65	\$25.23	\$24.73
OR		
2.) Employee Only Rate	\$38.82	\$38.04
Employee & Child(ren)	\$73.31	\$72.58
Employee & Spouse	\$98.25	\$94.81
Employee & Family	\$107.60	\$104.17
Employees Over 65	\$25.23	\$24.73

These rates are guaranteed for twelve months.  
Dependent children may be covered to age 25; disabled children to any age.  
Pre-existing conditions are covered immediately on present and future employees.  
Rates are contingent upon 70% participation from the County.

- PREPARED FOR TYLER COUNTY -  
Blue Cross & Blue Shield of Texas

SAMPLE CASE: Patient is a new-born child which was premature, complicated with a congenital heart defect.

Intensive Care - 29 days at \$495.00 per day	\$ 14,355.00
Semi-private Room - 14 days at \$165.00 per day	2,310.00
Operating Room	700.00
X-Ray Examination	185.00
Anesthesia	125.00
Medicines and I.V. Solutions	3,040.00
Laboratory	4,144.00
Dressings and Oxygen	2,480.00
Blood & Plasma	55.00
Special Equipment	<u>2,240.00</u>
TOTAL	\$ 29,634.00
Patient's Deductible	<u>- 100.00</u>
	29,534.00
Amount Payable at 80% - Blue Cross Pays \$4,000	- 5,000.00
Patient Pays \$1,000	<u>  </u>
	24,534.00
Amount Payable at 100% / Blue Cross Pays \$24,534.00	<u>- 24,534.00</u>
Patient Pays -0-	

TOTAL BLUE CROSS PAYS: \$28,534.00

TOTAL PATIENT PAYS: 1,100.00

Patient has met his "out-of-pocket" maximum and deductible for the remainder of the calendar year. Any additional hospital stays or doctor's charges during the remainder of this calendar year will be paid at 100% up to \$250,000.

- COST SUMMARY FOR TYLER COUNTY -  
Blue Cross & Blue Shield of Texas

HEALTH -

Employee Only Rate	\$ 38.02	(With Maternity)
Employee & Dependent Coverage	\$103.76	

LIFE -

\$10,000 x \$.70 = \$7.00

DISABILITY -

\$1.09 x 5 = \$5.45

DENTAL -

Employee Only Rate	\$ 5.55
Employee & Dependent Coverage	\$ 13.65

TOTAL RATES:

\$54.75 with Health, \$10,000 Term Life & AD&D, Disability and dental coverages.

\$49.20 with Health, \$10,000 Term Life & AD&D, and Disability.



HOSPITAL CHARGES

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- Semi-Private Room (no dollar limit)
- Intensive Care Unit (no dollar limit)
- Coronary Care Unit (no dollar limit)
- Hospital Services Such as:
  - Emergency Room
  - Operating Room
  - Recovery Room
  - Cystoscopy Room
  - Drugs & IV Solutions
  - Blood & Plasma
  - Crossmatching, etc.
  - X-Rays
  - Laboratory Work
  - Physical Therapy
  - Casts, Bandages, etc.
- Radiation Therapy (Cobalt, Chemotherapy, etc.)

OUT-PATIENT CARE FOR:

- Accident Care (within 3 days of accident)
- Minor Surgery (on date of surgery)

OTHER CHARGES

DOCTORS' CHARGES FOR:

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- House Calls
- Dental Care (Resulting from an accident)

OTHER CHARGES FOR:

- Prescription Drugs
- Ambulance Service
- Anesthesia
- Private Duty Nurses
- Physical Therapy (out-patient)
- Diagnostic X-Ray (out-patient)
- Diagnostic Laboratory (out-patient hospital or clinic)
- Radiation Therapy, etc. (out-patient)
- Durable Medical Equipment
- Oxygen and its Administration
- Blood Transfusions, etc.
- Therapeutic Center
- Artificial Limbs, Eyes, etc.
- Orthopedic Braces

\$100 DEDUCTIBLE PER CALENDAR YEAR (MAXIMUM 3 PER FAMILY) THEN  
 BLUE CROSS PAYS 80% OF THE FIRST \$2500 , THEN 100% TO \$1,000,000  
 THE MAXIMUM THE PATIENT EVER PAYS TOWARD THESE SERVICES IN ANY  
 YEAR IS \$500 PLUS THE DEDUCTIBLE  
 (DEDUCTIBLE IS WAIVED ON ACCIDENTS)

**ACCIDENTAL INJURY BENEFIT:** Pays the first \$300, then waives deductible and pays 80%.  
**NO PSYCHIATRIC COVERAGE.**

**MATERNITY:** Paid as any other illness on all female participants.

<b>RATES:</b> 1.) Employee Only	\$39.34	OR	2.) Employee Only	\$39.34
Employee & Dependent(s)	\$105.12		Employee & Child(ren)	\$74.32
Employees Over 65	\$25.57		Employee & Spouse	\$99.54
			Employee & Family	\$109.01
			Employees Over 65	\$25.57

## ADVANTAGES OF BLUE CROSS & BLUE SHIELD OF TEXAS

- 1.) Hospital claims are filed directly to Blue Cross by the hospital, thus eliminating the County's involvement in claims filing.
- 2.) Pre-existing conditions, including maternity\*\*\*, are covered immediately for present and future employees.
- 3.) Service is provided by a salaried district representative from our district office in Lufkin. The Lufkin office is equipped with a CRT which gives immediate claims inquiry information.
- 4.) Hospital prices are negotiated by Blue Cross & Blue Shield of Texas. Any charges above the negotiated price are not the responsibility of the patient or Blue Cross. This is bound by our contract with the hospitals.
- 5.) The Blue Cross programs have an "out of pocket" maximum for the patient's share. This can save a patient from financial disaster during a catastrophic illness.
- 6.) No dollar limit is placed on room charges or hospital charges. Our comprehensive Blue Cross program keeps pace with today's rising medical costs.
- 7.) The Blue Cross & Blue Shield identification card offers national acceptance by hospitals when your employees need medical care.
- 8.) A two or four rate structure can be chosen by the County. A four rate structure can sometimes allocate the cost more evenly when a large number of employees carry only one dependent or only carry children.
- 9.) Blue Cross offers a dental benefit which can be integrated into the health program with no increased administrative load on the County.
- 10.) Dependent children may be covered to age 25 without having to be enrolled in school.

# COMPREHENSIVE BLUE CROSS AND BLUE SHIELD PLAN

## LIMITATIONS AND EXCLUSIONS:

Benefits are not available for:

- A. A hospital admission for diagnostic or evaluation procedures unless the tests could not have been performed on an out-patient basis without adversely affecting the patient's physical condition or the quality of medical care rendered;
- B. Any services or supplies rendered in connection with a routine physical examination; or any services or supplies which are not medically necessary for the diagnosis or treatment of an illness, injury, or bodily malfunction;
- C. Any hospital services or supplies furnished by any institution or facility other than a member hospital, an approved non-member hospital, or a therapeutic center;
- D. Any services or supplies for which benefits are, or could upon proper claim be provided under the Workmen's Compensation law, or any other present or future laws enacted by the Legislature of any state, or by the Congress of the United States, or the laws, regulations or established procedures of any county or municipality, provided, however, that the exclusions of this Section D shall not be applicable to any coverage held by the participant for hospitalization and/or medical-surgical expenses which is written as a part of or in conjunction with any automobile insurance policy;
- E. Any services or supplies rendered for a pre-existing condition during the period of time, if any, shown on the Benefit Summary page, commencing with the effective date of the participant's coverage hereunder;
- F. Any items of Other Medical Expense or Out-Patient Hospital Expense incurred for dental care and treatments, dental surgery, or dental appliances, (1) except for covered oral surgery, or (2) unless such services are made necessary by accidental bodily injury effected solely through external means and occurring while the participant is covered hereunder; provided, however, that this Section F shall not be applicable to services and supplies rendered to a newborn child which are necessary for treatment or correction of a congenital defect;
- G. Eye glasses including contact lenses, hearing aids, or examinations for the prescription or fitting thereof;
- H. Services or supplies for cosmetic purposes, except for the correction of defects incurred through traumatic injuries sustained by the participant while covered hereunder, provided, however, that this Section H shall not be applicable to services and supplies rendered to a newborn child which are necessary for treatment or correction of a congenital defect;
- I. Travel, whether or not recommended by a physician, except as provided for professional ground ambulance;



# COMPREHENSIVE BLUE CROSS AND BLUE SHIELD PLAN

## LIMITATIONS AND EXCLUSIONS (CONT.):

- J. Any services or supplies provided during the course of a hospital admission which commences before the patient is covered as a participant hereunder or after the termination of his coverage;
- K. Services or supplies rendered to any person who requires them by reason of acting as a donor of any organ or element of his body, unless such person is a participant hereunder;
- L. Any medical social services or occupational therapy services;
- M. Any services or supplies rendered to any participant for treatment of obesity or for weight reduction;
- N. Services or supplies not specifically defined as Bed-Patient Hospital Expense, Out-Patient Hospital Expense, or Other Medical Expense.

*This proposal is not a contract. The necessary detailed provisions affecting the program would be contained in a master contract.*

AMERICAN NATIONAL INSURANCE COMPANY

J. W. RAY, ASSISTANT GENERAL AGENT  
1006 WEST BLUFF  
P. O. BOX 777  
WOODVILLE, TEXAS 75979  
BUS.: 713/283-3781 RES.: 713/547-2558

SCHEDULE OF BENEFITS

Life Insurance	\$6,000.00
Additonal Death & Dismemberment (24 hour coverage)	\$6,000.00
Weekly Indemnity Benefit (Payable beginning first day for accident, 8th day for sickness for 26 weeks; not to exceed 2/3 of basic weekly earnings)	\$ 50.00
Hospital Expense	
Room & Board, 70 days per disability	\$ 40.00
Miscellaneous Hospital	\$ 600.00
Surgical Expense Benefit (Basic \$300 Expanded)	\$ 450.00
Diagnositc X-Ray and Lab (Unscheduled)	\$ 100.00
In-Hospital Medical Expense Benefit 70 days per disability	\$ 5.00
Supplemental Accident	\$ 300.00
Major Medical Expense	
Lifetime Maximum	\$250,000.00
Deductible Calendar year Accumulation Period	\$ 100.00
Coinsurance	80%
Room and Board Other than private room-Most common semi-private Private room limit - Most common semi-private plus \$4.00	



A MEMBER OF THE AMERICAN NATIONAL FAMILY OF COMPANIES

AMERICAN NATIONAL INSURANCE COMPANY

J. W. RAY, ASSISTANT GENERAL AGENT  
1006 WEST BLUFF  
P. O. BOX 777  
WOODVILLE, TEXAS 75979  
BUS.: 713/283-3781 RES.: 713/547-2558

Present PLAN ✓

RE: G-720 TYLER COUNTY EMPLOYEES ASSOCIATION

Rates for Present Plan

Weekly Income (\$10.)	\$1.02
Life	.74
AD & D	.09
Employee Medical	40.05
Additional for Dependents	64.63
Medicare	26.54
Employee & Dependent over 65	19.12
Employee under 65, dependent over 65	40.75

Present Plan has 250,000 Maximum Major Medical

Employees under 65=Total Premium	\$50.13
Employees & Dependents under 65=Total Premium	114.76

Additional Premium for Dependent Life-\$2,000 Spouse, \$1,000 Children=\$1.19	
Additional Premium for Dental Employee=	\$ 4.39
Additional Premium for Dental Dependents=	8.07



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1006 WEST BLUFF  
P. O. BOX 777  
WOODVILLE, TEXAS 75979  
BUS.: 713/283-3781 RES.: 713/547-2558

*New Proposal*

RE: G-720 TYLER COUNTY EMPLOYEE ASSOCIATION

NEW PROPOSAL

	<u>Without Maternity</u>	<u>With Maternity</u>
W.I.B. (per \$10.00)	\$ 1.02	
Life	.74	
AD & D	.09	
Employee Medical	33.90	\$35.56
Additional for Dependents	47.00	51.04
Supplement Medicare Insurance	23.14	
Total Premium for Employee	\$43.98	\$45.64
Total Premium for Employee & Dependent	90.98	96.68
Additional Premium For Dependent Life \$2,000 Spouse, \$1,000 Children		\$ 1.19
Additional Premium For Dental-Employee		4.39
Additional Premium For Dental-Dependents		8.07



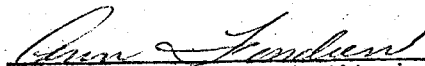
A MEMBER OF THE AMERICAN NATIONAL FAMILY OF COMPANIES

TYLER COUNTY, TEXAS

RECONCILLIATION OF COUNTY AUDITORS FUND BALANCE  
WITH COUNTY TREASURERS CASH BALANCE  
MARCH 31, 1981

	Auditor Fund Balance	Less Certificate Deposit	Treasurer Cash Balance
<u>OPERATING FUNDS</u>			
General	\$ 73,293.21	\$118,205.97	\$(44,912.76)
Road & Bridge I	30,353.29	27,848.01	2,505.28
Road & Bridge II	28,740.95	39,365.93	(10,624.98)
Road & Bridge III	52,487.16	48,468.91	4,018.25
Road & Bridge IV	51,256.94	40,213.41	11,043.53
Airport Maintenance	804.71	-0-	804.71
<u>SPECIAL REVENUE FUNDS</u>			
Library	9,828.28	-0-	9,828.28
* Federal Revenue Sharing	95,275.78	51,000.00	44,275.78
<u>DEBT SERVICE FUNDS</u>			
Permanent Improvement I&S	2,519.03	-0-	2,519.03
Right-of-Way I&S	12,702.20	-0-	12,702.20
Solid Waste I&S	5,470.80	2,051.50	3,419.30
<u>CAPITAL PROJECTS FUNDS</u>			
Capital Improvements	78,724.53	71,802.14	6,922.39
County Wide Right-of-Way	82,926.81	9,000.00	73,926.81
Right-of-Way II	314.25	-0-	314.25
Right-of-Way IV	6,505.75	-0-	6,505.75
<u>TRUST &amp; AGENCY FUNDS</u>			
County Employee Savings	1,035.00	-0-	1,035.00
Criminal Justice State Cost	3,218.50	-0-	3,218.50
State CVC	262.00	-0-	262.00
D.A. Check Processing Fees	30.00	-0-	30.00
Co. Atty. Check Processing Fees	852.48	-0-	852.48
Undivided Fund	9,195.31	-0-	9,195.31
<b>TOTAL</b>	<b>\$545,796.98</b>	<b>\$407,955.87</b>	<b>\$137,841.11</b>
<u>*Auditor's Fund Balalce:</u>			
<u>FEDERAL REVENUE SHARING:</u>			
General	40,445.99		
Road & Bridge I	3,706.16		
Road & Bridge II	12,578.76		
Road & Bridge III	21,557.40		
Road & Bridge IV	10,584.95		
Solid Waste	5,003.24		
Jail Construction	1,399.28		
<b>TOTAL</b>	<b>\$ 95,275.78</b>		

I hereby certify that this report is correct to the best of my knowledge and belief, according to records of this office.

  
Ann Fondren, Co. Auditor

NOTICE OF TIME AND PLACE OF MEETING  
COMMISSIONER'S COURT  
TYLER COUNTY, TEXAS

THIS NOTICE POSTED IN ACCORDANCE WITH V. A. T. S. \_ Art. 6252-17

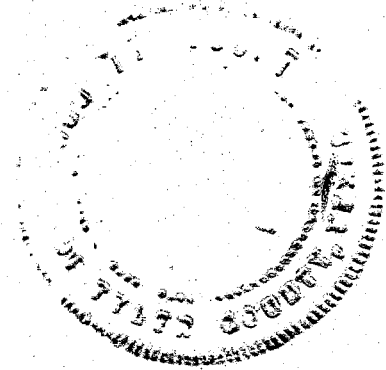
Notice is hereby given that Commissioners Court will hold its ~~regular~~ <sup>Special</sup> meeting on Monday January 5, 1981 at 10:00 A. M. in the Commissioners Courtroom, First Floor, Tyler County Courthouse.

A G E N D A  
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1. CONSIDER TABLED BIDS ON ELEVATOR.

2. Consider opening and reading bids on Typewriters, Tinting Machine & Cars for SO *JMR*

*Allen Sturrock*  
Allen Sturrock, County Judge  
Tyler County, Texas



NO. \_\_\_\_\_ TIME: 11:15  
DEC 31 1980  
GRACE BOSTICK, COUNTY CLERK  
TYLER COUNTY TEXAS  
BY: *Trina Hodks*  
TRINA HODKS