PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

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Meeting Date: September 1, 2015 [X] Consent [] Regular [] Ordinance [] Public Hearing
Department Submitted By: Community Services Submitted For: Ryan White Part A
I. EXECUTIVE BRIEF
Motion and Title: Staff recommends motion to approve: Amendment No. 1 to Contract for Provision of Ryan White Part A HIV Health Support Services with FoundCare, Inc. (R2015-0616), for the period March 1, 2015, through February 29, 2016 to increase funding by \$88,587, for a total not to exceed \$3,669,024.
Summary: This amendment is necessary to allow for payment of services rendered during the grant year. The allocation of additional funds is necessary due to additional GY15 Minority AIDS Initiative (MAI) funds received on the final notice of grant award. Additional MAI funds of \$88,587 will be allocated to Medical Case Management MAI. Employees Lilia Perez and Quinton Dames serve on a County advisory board, the HIV CARE Council. The HIV CARE Council provides no regulation, oversight, management, or policy-setting recommendations regarding the agency contract listed above. Disclosure of these contractual relationships at a duly noticed public meeting is being provided in accordance with the provisions of Sect. 2-443, of the Palm Beach County Code of Ethics. No County funds are required. (Ryan White) Countywide (HH)
Background and Justification: Funds are used to provide various services to serve persons living with HIV/AIDS. Grant adjustments are made during the contract year to align services with needs.
Attachments: Amendment No. 1 with FoundCare, Inc.
Recommended By: Department Director Date
Approved By: Assistant County Administrator Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2015	2016	2017	2018	2019				
Capital Expenditures									
Operating Costs	88,587								
External Revenue	(88,587)								
Program Income									
In-Kind Match (County)									
NET FISCAL IMPACT	0								
# ADDITIONAL FTE POSITIONS (Cumulative)									
Budget Account No.: Fund 1010 Dept 142 Unit 1 B. Recommended Sou	Is Item Included in Current Budget? Yes X No Budget Account No.: Fund 1010 Dept 142 Unit 1477 Object 8201 Program Code RA64 Program Period GY15								
Funding source is County funds are re		tment of Healti	n and Hum	an Servic	es. No				
C. Departmental Fisca	***************************************	na Malhotra, Dir	ector, Finar	ncial & Sup	pport Svcs				
	III. REVIEW	COMMENTS							
A. OFMB Fiscal and/o	r Contract Adm	ninistration Co	mments:						
Sheny J OFMB KN CH	Br	Contract D	evelopment	acolog and Conti	DI //7/				
B. Legal Sufficiency:									
Assistant County Att	d 8-17-15 brney	_							
C. Other Department I	Review:								
Department Director		_							

This summary is not to be used as a basis for payment.

AMENDMENT TO CONTRACT FOR PROVISION OF RYAN WHITE PART A HIV HEALTH SUPPORT SERVICES

THIS AMENDMENT TO	CONTRACT	FOR PROV	VISION C	F RYAN	WHITE	PART A
HIV HEALTH SUPPORT	SERVICES	(R2015 0616	made a	nd entered	into at W	est Palm
Beach Florida, on this	day of	_, 2015 by an	d between	PALM BE	ACH CO	UNTY, a
political subdivision of the St	ate of Florida	ı, by and throi	igh its Bo	ard of Coun	ity Comm	issioners,
hereinafter referred to as the	COUNTY a	and FoundCa	are, Inc.	hereinafter,	referred	to as the
AGENCY, a non-profit corp	oration, author	orized to do	business i	n the State	of Florid	la, whose
address is 2330 South Congre	ess Avenue, W	Vest Palm Bea	ch, Florid	a 33406 and	l whose F	ederal ID
is <u>54-2083748</u>						

WITNESSETH:

WHEREAS, the need exists to amend the contract to increase funding for Medical Case Management Minority AIDS Initiative (MAI).

NOW THEREFORE, the above named parties hereby mutually agree that the Contract entered into on May 19, 2015 is hereby amended as follows:

- I. New Work Plan Exhibits "A1" attached hereto shall replace the Work Plan Exhibits "A" in its entirety.
- II. New Budget Exhibits "B1" attached hereto showing the new total budgets for funding shall replace the New Budget Exhibits "B" in its entirety.
- III. Increase funding for Medical Case Management MAI as follows:
 - Increase **Medical Case Management MAI** by \$88,587 not to exceed \$573,425.
- IV. Total contract not to exceed amount will be \$3,669,024.

OTHER PROVISIONS

All provisions in the Contract or exhibits to the Contract in conflict with this First Amendment to the Contract shall be and are hereby changed to conform to this Amendment.

All provisions not in conflict with this Amendment are still in effect and are to be performed at the same level as specified in the Contract.

IN WITNESS WHEREOF, the parties hereto have caused this two (2) page Amendment to be executed by their officials thereupon duly authorized.

ATTEST: Sharon R. Bock Clerk and Comptroller	PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS
By: Deputy Clerk	By:Shelley Vana, Mayor
	Date
WITNESS: RRULL Signature RIK PAVLESAK, COO Witness Name	AGENCY: FoundCare, Inc. By: Signature Yolette Bonnet Chief Executive Officer Date
APPROVED AS TO FORM AND LEGAL SUFFICIENCY	APPROVED AS TO TERMS AND CONDITIONS
Assistant County Attorney	Channell Wilkins, Director Palm Beach County Department of Community Services

#	Agency	Service	Total # to be served	Unit Definition	Total Units Provided	Estimated Unit Cost	HRSA Implementation Plan Objective	Activities	Non-Duplicating Statement: Indicate any other program in your agency or other agency in Palm Beach County which provides similar services. Explain how you will avoid duplication of services, or why additional units of services are needed.	Impact Statement: When the objective is accomplished, what impact will it have?
1	FoundCare	Emergency Financial Assistance	41	1 unit = 1 EFA Encounter	82 .	Varies based on cost; estimated average of \$500 per access,up to \$1000	b. 85 % of clients receiving EFA will have at least one primary care	Provide eligible clients with emergency financial assistance to remove barriers to care.	l '	41 individuals will improve their access and retention in care as a result of emergency financial assistance that removes barriers to access.
2	FoundCare	Food Bank/Home Delivered Meals	502	1 unit = 1 voucher	12,048	\$27.19 per voucher	a. 100 % of clients have received an annual nutritional assessment. b. 75 % of clients linked to care will have at least two CD4/Viral Load tests per year.	Provide eligible clients with \$50 in food vouchers each month- and 1 or 2 extra at Thanksgiving and Christmas.	with HIV/AIDS in Palm Beach County. Compass and	502 individuals living with HIV/AIDS will have improved health outcomes as a result of nutritional support through the food program.
3	FoundCare	Health Insurance Premium and Cost Sharing Assistance	203	1 unit = 1 monthly premium, 1 copay, or 1 deductible	835	Varies based on actual costs for copays, deductibles, and premium payments.		At the inception of grant year, continue to provide health insurance assistance to 203 eligible individuals	assistance program dedicated to serve people living with HIV/AIDS in Palm Beach	203 men, women and children living with HIV/AIDS will have improved health outcomes and maintenance of health as a result of payments for health insurance premiums, co-pays, and deductibles.

4	FoundCare	Home and Community Based Health Care	9	1 unit = 1 hourly session	697	Average of \$29.73; varies based on intensity/level of service.	 a. 75% of clients linked to care will have at least two CD4/Viral Load tests per year. b. 100% of clients will have a documented care plan signed by a Case Manager in the client file 	Procure home health services for eligible clients with a prescription for home health services.	services through the Visiting Nurses Endownment and uses	9 eligible individuals are able to retain in their homes as a result of assistance provided by home health care.
5	FoundCare	Housing Services	17	1	1530 days/204 weeks	Average of \$61.25 per day of housing assistance; could vary based on actual cost for rent/transitional housing facility	a. 75% of eligible recipients of emergency housing services will have at least two CD4/Viral Load tests per year	Provide eligible clients with transitional housing services to move them toward stable/permanent housing.	FoundCare is the only agency in the county offering this service dedicated to individuals living with HIV/AIDS. FoundCare assists clients from other agencies with these funds.	17 individuals living with HIV/AIDS will have improved health outcomes as a result of a stabilized housing situation.
6	FoundCare	Substance Abuse- Residential	4	1 unit = 1 day of substance abuse residential treatment	332 bed days	\$135 per day; varies based on treatment provider.	a.75 % of clients receiving residential substance abuse services will have at least one primary care appointment per year b. 100% of discharged patients have an aftercare plan documented in record.	Enroll eligible clients into a licensed substance abuse treatment program.	FoundCare contracts with licensed substance abuse treatment providers to offer this service. FoundCare assists clients from other agencies with these funds.	4 individuals living with HIV/AIDS will have improved health outcomes as a result of participation in residential substance abuse treatment services.
7	FoundCare	Medical Transportation Services	150	1 unit = I bus pass/1 cab voucher/1 ticket to ride booklet	1800	Varies based on actual costs. Cab vouchers are more costly than bus passes.	a. 75% of clients receiving medical transportation services will have at least two CD4/Viral Load tests per year b. 100% of clients are determined eligible for medical transportation services.	Provide eligible clients with bus passes, cab vouchers and tickets to ride to attend medical appoinments and dialysis treatments.	FoundCare accesses Palm Tran and its program when feasible to assist individuals living with HIV/AIDS. FoundCare contracts with a licensed transportation company to offer cab	150 individuals living with HIV/AIDS will have improved health outcomes as a result of increased attendance at medical appointments/treatments due to transportation assistance.

8	FoundCare	Medical Case Management	720	1 unit = 1 (15) minute MCM session	73,920	\$13.40 per unit	a. 100% of clients receiving MCM have an initial Plan of Care which is reviewed every 6 months. b. 75% of MCM clients have two or more CD4/Viral Load tests per year	medical case management	FoundCare is one of the two agencies in the county offering case management services. Clients choose their service provider. FoundCare uses the CAREWare system	720 men, women, and children living with HIV/AIDS will have improved health outcomes and maintenance of health as a result of medical case management services
9	FoundCare	Medical Case Management/ MAI	480	1 unit = 1 (15) minute MCM session	48,960	\$11.71 per unit	 a. 75% of MCM clients have 2 or more CD4/Viral Load tests per year b. 100% of clients receiving receiving MCM/MAI services have an initial plan of care which is reviewed every six months 	medical case management	FoundCare is the only agency in the county offering this service dedicated to minority individuals living with HIV/AIDS.	420 men, women, and children living with HIV/AIDS will have improved health outcomes and maintenance of health as a result of medical case management services
1		Non Medical Case Management Determining Eligibility	1,500	1 unit = 1 eligibility screening	14.950	\$76.22 per screening	a. 100% of clients receiving eligibility screening will receive at least two CD4/Viral Load tests per year	At the inception of grant year, continue to provide eligibility determination services to 1,500 eligible living with HIV/AIDS in Palm Beach County.	offering eligibility	1,500 men, women, and children living with HIV/AIDS will have improved health outcomes and maintenance of health as a result of maintained access to medical care, medications, and support services facilitated by eligibility determination services.

11	FoundCare	Non Medical Case Management	144	1 unit = 1 (15) minute case management session	14,784	\$8.46 per unit	 a. 100% of eligibility screenings are completed at least once every six months. b. 75% of non medically case managed clients have at least two CD4/Viral Load tests per year 	At the inception of grant year, continue to provide supportive case management to 144 eligible clients.	FoundCare is one of the two agencies in the county offering case management services. Clients choose their service provider. FoundCare uses the CAREWare system	144 men, women, and children living with HIV/AIDS will have improved health outcomes and maintenance of health as a result of supportive services that help
12	FoundCare	Peer Mentor	800	1 unit = 1 (15) minute peer mentor session	13,315	\$10.50 per unit	a. 75% of clients receiving peer mentor services will have at least two CD4/Viral Load tests per year	At the inception of grant year, continue to provide peer mentor services to 800 eligible clients.		800 individuals living with HIV/AIDS will have improved health outcomes as a result of interaction with a peer mentor that guides them through the service system, encourages them to remain in care.
13	FoundCare	Oral Health	125	1 unit = 1 Oral Health visit	427	\$207	a. 100% of non-urgent patients under oral nutritional education during routine visits b.100% of clients receiving Oral Health services will have current CD4/Viral Load test results	At the inception of grant year, continue to provide oral health services to 125 eligible patients.		
14	FoundCare	OAMC primary care	187	1 unit = 1 OAMC visit	750	\$132.00	a. 75 % of Part A primary care clients will have at least two CD4/Viral Load tests per year b. 80% of clients prescribed ART will have viral load suppression	At the inception of grant year, continue to provide medical care to 187 eligible patients.	·	
15	FoundCare	Nurse Care Coordination	230	1 unit = 1 (15) minute NCC session	3696	\$9.77	a. 75% of clients receiving NCC services will have at least two CD4/Viral Load tests per year	At the inception of grant year, continue to provide nurse care coordination to 230 eligible patients.		

16	FoundCare	Labs & Diagnostic Testing	119	1 unit = 1 lab test	1000	Varies widely based on type of test as cost per test varies.	CD4/Viral Load tests per year b. 100% of available lab data will be	At beginning of grant year, continue to provide lab services to 119 eligible patients
17	FoundCare	Early Intervention Services (MAI)	900	1 unit = 1 HIV antibody test	900	\$98.86	a. 75% of clients diagnosed will have at least one primary care appointment per year	At the beginning of the grant year, begin offering targeted outreach and HIV antibody testing and linkage to care services yielding 900 tests. Link 100% of positive cients to medical appointments.

EXHIBIT B-1 FOUNDCARE, INC. MEDICAL CASE MANAGEMENT - MAI

MEDICAL CASE MANAGEMENT - MAI CURRENT & PROPOSED OPERATING BUDGET FISCAL YEAR RW-GY15

FISCAL YEAR RW-GY15							
ACCT#	TITLE	BUDGE	T AMOUNT				
PROGRAM EXPENSES	D. J. O. Leries and Wagon Bram	\$	352,810				
820.1201	Regular Salaries and Wages - Prgm	\$	26,990				
820.2101	FICA Taxes - Prgm	Ψ					
820.2105	FICA Medicare - Pgrm						
820.2112	Other Benefits - Pgrm	\$	10,580				
820.2201	Retirement Contributions - Pgrm	\$	61,954				
820.2301	Life and Health Insurance - Pgrm	\$	14,110				
820.2401	Workers Compensation - Pgrm	\$	2,080				
820.2501	Unemployment Compensation - Pgrm	\$	2,660				
820.4101	Communication Services - Pgrm	\$	4,080				
820.4301	Utilities - Pgrm	\$	29,640				
820.4401	Rent - Pgrm	3	29,040				
820.8000	Other Program Costs						
820.9515	Pgrm Costs - Indirect						
140.3101	Professional Services						
140.3103	Medical/Health Care and Nutrition Services						
140.3118	Dental Services						
140.3125	Legal Services						
140.3126	Interpreter Services						
140.3127	Health Disabilities						
140.3140	Consultant Services						
140.3201	Audit Services						
140.3203	Accounting and Consulting Services						
140.3401	Other Contractual Services						
140.3419	Contracted Food						
140.3421	Training						
140.3431	Laboratory Testing						
140.3438	Emergency Assistance						
	Travel Per Diem and Mileage	\$	1,100				
140.4001	Child Transportation Services	Ψ	.,				
140.4200	Other Transportation						
140.4201							
140.4205	Postage/Shipping						
140.4405	Rent-Other Equipment	\$	4,680				
140.4601	Repair and Maintenance	-	4,000				
140.4701	Printing and Graphics						
140.4909	Licenses, Permits and Certifications						
140.4932	Parent Activity						
140.4945	Advertising		0.400				
140.5101	Office Supplies	\$	2,400				
140.5111	Office Furniture And Equipment						
140.5121	Data Processing Software/Accessories						
140.5201	Materials/Supplies Operating						
140.5202	Janitorial Supplies						
140.5230	Medicine and Drugs						
140.5231	Medical-Surgical Supplies						
140.5233	Laboratory Supplies						
140.5242	Food Prep and Serving Supplies						
140.5243	Personal Care Items						
140.5244	Food and Dietary						
140.5401	Books, Publications and Subscriptions						
140.5402	Educational Training Materials						
140.5412	Dues and Memberships						
140.6401	Machinery and Equipment						
140.6405	Data Processing Equipment	\$	3,000				
		Ψ	0,000				
140.6406	Data Processing Software						
140.8000	Unit Cost - Direct Services	•	E40 004				
Total Program Expenses		\$	516,084				

	EXHIBIT B-1	
	FOUNDCARE, INC.	
	MEDICAL CASE MANAGEMENT - MAI	
CU	RRENT & PROPOSED OPERATING BUDGET	
	FISCAL YEAR RW-GY15	
ADMIN EXPENSES		05.440
800.1201	Salaries and Wages Regular Admin	\$ 35,110
800.2101	FICA-Taxes Admin	\$ 2,690
800.2105	FICA Medicare Admin	
800.2112	Other Benefits Admin	4.050
800.2201	Retirement Contributions-FRS Admin	\$ 1,050
800.2301	Insurance-Life and Health Admin	\$ 2,780
800.2401	Workers' Compensation Admin	\$ 700
800.2501	Unemployment Compensation Admin	\$ 80
800.3201	Audit Services Admin	\$ 2,590
800.3203	Accounting and Consulting Service Admin	
800.4001	Travel And Per Diem Admin	
800.4101	Communication Services Admin	
800.4301	Utilities Admin	
800.4401	Rent Admin	
800.5101	Office Supplies Admin	
800.5201	Materials/Supplies Operating Admin	
800.5242	Food Prep and Serving Supplies Admin	
800.6401	Machinery and Equipment Admin	
800.8000	Other Administrative	\$ 12,341
800.9515	Admin Costs-Indirect	
Total Admin Expenses	(NOT TO EXCEED 10% OF BUDGET)	\$ 57,341
Grand Total		\$ 573,425
Total Admin %		10%
Total Program %		90%

FOUNDCAR

Client#: 22525

ACORD.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/15/2015

\$1,000,000

\$1,000<u>,0</u>00

\$1,000,000

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Bouchard Insurance (CLW) 101 N Starcrest Dr.	E-MAIL closets@bouchordingurance.com	7 449-1267
Clearwater, FL 33765 727 447-6481	INSURER(S) AFFORDING COVERAGE	NAIC#
121 441-0461	INSURER A: Allied World Surplus Line Insur	24319
INSURED	INSURER B : Wesco Insurance Company	25011
FoundCare, Inc. 2330 S Congress Ave	INSURER C:	
-	INSURER D:	
West Palm Beach, FL 33406	INSURER E :	
	INSURER F:	

CO	/ER	RAGES CE	RTIFIC	ATE	NUMBER:	REVISION NUMBER:							
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAME INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMEN' CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.									SUMENT WITH RESPECT TO WHICH THIS IEREIN IS SUBJECT TO ALL THE TERMS,				
NSR LTR		TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS					
Α	GE	NERAL LIABILITY	Y	Y	03090166	06/01/2015	06/01/2016	EACH OCCURRENCE	\$1,000,000				
	Х	COMMERCIAL GENERAL LIABILITY		ĺ				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$50,000				
		CLAIMS-MADE X OCCUR						MED EXP (Any one person)	\$5,000				
								PERSONAL & ADV INJURY	\$1,000,000				
				.				GENERAL AGGREGATE	\$3,000,000				
	GEN'L AGGREGATE LIMIT APPLIES PER:							PRODUCTS - COMP/OP AGG	\$1,000,000				
		POLICY PRO- JECT LOC						•	-\$				
Α	AUTOMOBILE LIABILITY			Y	03090166	06/01/2015	06/01/2016	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000				
		ANY AUTO						BODILY INJURY (Per person)	\$				
		ALL OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$				
	X	HIRED AUTOS X NON-OWNED AUTOS			·			PROPERTY DAMAGE (Per accident)	\$				
			}						¢				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

03090167

03090166

03090166

FITWC364992015

Attn: Ryan White Program Manager

DED X RETENTION \$5000
WORKERS COMPENSATION
AND EMPLOYERS' LIABILITY

ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?

UMBRELLA LIAB

EXCESS LIAB

Mandatory in NH)
f yes, describe under
DESCRIPTION OF OPERATIONS be

Professional Liab

Abuse/Molestation

В

*Full Certificate Holder Name: Palm Beach County Board of County Commissioners, a Political Subdivision of the State of Florida, its Officers, Employees and Agents, c/o Department of Community Services. Professional Liability is Claims-Made coverage with a retro date of 02/27/2009. It is agreed by endorsement to the general liability, professional, auto policy that this policy shall not be cancelled by the insurance (See Attached Descriptions)

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Palm Beach County c/o Insurance Tracking Services, Inc. PO Box 20270 Long Beach, CA 90801

X OCCUR

CLAIMS-MADE

N

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

06/01/2015 06/01/2016 EACH OCCURRENCE

06/01/2015 06/01/2016 X WC STATU-

06/01/2015 06/01/2016 \$1,000,000/\$3,000,000

06/01/2015 06/01/2016 \$1,000,000/\$3,000,000

AGGREGATE

E.L. EACH ACCIDENT

E.L. DISEASE - EA EMPLOYEE \$1,000,000

E.L. DISEASE - POLICY LIMIT \$1,000,000

AUTHORIZED REPRESENTATIVE

TA

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KIMCA



Palm Beach County Division of Community Services 810 Datura Avenue West Palm Beach, FL 33401

February 19, 2015

Re: Vehicles

To whom it may concern:

Please be advised that FoundCare, Inc. has no owned motor vehicles and does not intend to own any vehicles throughout the Ryan White grant period dated March 1, 2015 through February 29, 2016.

My signature bellows certifies that the above statement is true to the best of my knowledge.

Rik Pavlescak, Chief Operating Officer

February 19, 2015