



Kane County

KC Human Services Committee

Agenda

Government Center
719 S. Batavia Ave., Bldg. A
Geneva, IL 60134

SURGES, Linder, Allan, Garcia, Gripe, Lewis, Tarver, ex-officios Roth (County Vice Chair) & Pierog (County Chair)

Wednesday, July 9, 2025

9:00 AM

County Board Room

2025 Committee Goals

- Expand measures to improve employee morale through equitable compensation, new and comprehensive benefits options, and employee appreciation efforts
 - Committee recognizes the value to the County and the community in internship and volunteer opportunities. The Committee would like to review policy and procedures to ensure the resources are available to support County departments in the creation and effective implementation of internship opportunities
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- 1. Call To Order**
 - 2. Roll Call**
 - 3. Remote Attendance Requests**
 - 4. Approval of Minutes: June 11, 2025**
 - 5. Public Comment**
 - 6. Monthly Financial Reports**
 - A. Monthly Finance Reports**
 - 7. Department of Human Resource Management**
 - A. Monthly Blue Cross Blue Shield Invoice**
 - B. Monthly BCBS and MERP Totals**
 - C. Monthly Assured Partners Report**
 - D. Monthly Applicants and Staff Changes**
 - E. Monthly Workers Comp and Liability**
 - 8. Compliance**
 - A. Monthly Training Report**
 - 9. Old Business**
-

10. New Business

- A. Resolution:** Authorizing Contract Extension for Workers Compensation and Liability Claims Third Party Administrator
- B. Resolution:** Approving the 2026 Holiday Schedule for Kane County Offices
- C.** Human Resources Budget Update

11. Reports Placed On File**12. Executive Session**

- A. Release of Closed Session Minutes

13. Open Session

- A. Vote on Release of Closed Session Minutes

14. Adjournment

STATE OF ILLINOIS)




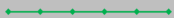




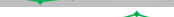

SS.

COUNTY OF KANE)


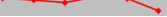































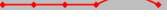


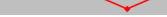



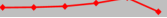





REPORT NO. TMP-25-815

MONTHLY FINANCE REPORTS

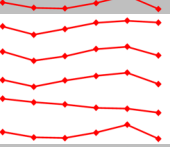





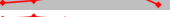













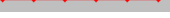





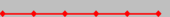


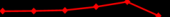
Committee Revenue Budget Report - by Account Detail
Through June 30, 2025 (58.3% YTD)
*2020, 2021, 2022, 2023 Actual Full Fiscal Year **2024 (DRAFT)

Department / Fund / Account Classification	2020 Actual Amount*	2021 Actual Amount*	2022 Actual Amount*	2023 Actual Amount*	2024 Actual Amount**	2025 Actual Amount	2025 Amended Budget	2025 Adopted Budget	2025 YTD% Actual/Amended Budget	2020 - 2025 Trend
120 Human Resource Management	\$ 934	\$ 401	\$ 320	\$ 1,596	\$ 2,284	\$ 919	\$ 1,509	\$ 1,509	60.9%	
246 Employee Events Fund	\$ 934	\$ 401	\$ 320	\$ 1,596	\$ 2,284	\$ 919	\$ 1,509	\$ 1,509	60.9%	
Revenue	\$ 934	\$ 401	\$ 320	\$ 1,596	\$ 2,284	\$ 919	\$ 1,509	\$ 1,509	60.9%	
Other	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	
39900 - Fund Balance Utilization	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	
Interest Revenue	\$ 313	\$ (1)	\$ (256)	\$ 981	\$ 1,280	\$ 334	\$ 709	\$ 709	47.1%	
38000 - Investment Income	\$ 313	\$ (1)	\$ (256)	\$ 981	\$ 1,280	\$ 334	\$ 709	\$ 709	47.1%	
Reimbursements	\$ 621	\$ 402	\$ 575	\$ 616	\$ 1,004	\$ 585	\$ 800	\$ 800	73.2%	
37900 - Miscellaneous Reimbursement	\$ 621	\$ 402	\$ 575	\$ 616	\$ 1,004	\$ 585	\$ 800	\$ 800	73.2%	
Grand Total	\$ 934	\$ 401	\$ 320	\$ 1,596	\$ 2,284	\$ 919	\$ 1,509	\$ 1,509	60.9%	

Committee Expense Budget Report - by Account Detail
Through June 30, 2025 (58.3% YTD, 53.85% Payroll Expense through Pay Period Ending 06/07/2025)
***2020, 2021, 2022, 2023 Actual Full Fiscal Year **2024 (DRAFT)**

Department / Fund / Account Classification	2020 Actual Amount*	2021 Actual Amount*	2022 Actual Amount*	2023 Actual Amount*	2024 Actual Amount**	2025 Actual Amount	2025 Amended Budget	2025 Adopted Budget	2025 YTD% Actual/Amended Budget	2020 - 2025 Trend
120 Human Resource Management	\$ 3,512,266	\$ 3,544,253	\$ 3,710,258	\$ 4,496,888	\$ 5,684,740	\$ 2,468,328	\$ 5,308,930	\$ 5,294,814	46.5%	
001 General Fund	\$ 248,652	\$ 230,337	\$ 205,373	\$ 263,976	\$ 245,588	\$ 126,596	\$ 289,731	\$ 285,884	43.7%	
Expenses	\$ 248,652	\$ 230,337	\$ 205,373	\$ 263,976	\$ 245,588	\$ 126,596	\$ 289,731	\$ 285,884	43.7%	
Personnel Services- Salaries & Wages	\$ 181,653	\$ 166,938	\$ 160,097	\$ 199,425	\$ 220,962	\$ 120,147	\$ 231,481	\$ 227,634	51.9%	
40000 - Salaries and Wages	\$ 181,794	\$ 166,938	\$ 160,097	\$ 199,425	\$ 220,962	\$ 120,147	\$ 231,481	\$ 227,634	51.9%	
40002 - Non-Union Wage Increase	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	
40003 - Cost of Living Increase	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	
40007 - Equity Study Adjustments	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	
40009 - Salaries and Wages Subsidy	\$ (142)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	
Personnel Services- Employee Benefits	\$ 35,578	\$ 31,088	\$ 29,810	\$ 49,754	\$ 59,224	\$ -	\$ 99,554	\$ 99,554	0.0%	
45000 - Healthcare Contribution	\$ 34,218	\$ 30,049	\$ 28,816	\$ 47,913	\$ 57,116	\$ -	\$ 63,646	\$ 63,646	0.0%	
45009 - Healthcare Subsidy	\$ (60)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	
45010 - Dental Contribution	\$ 1,414	\$ 1,039	\$ 993	\$ 1,841	\$ 2,108	\$ -	\$ 2,117	\$ 2,117	0.0%	
45019 - Dental Subsidy	\$ 5	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	
45100 - FICA/SS Contribution	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 17,420	\$ 17,420	0.0%	
45200 - IMRF Contribution	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 12,431	\$ 12,431	0.0%	
53010 - Workers Compensation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,940	\$ 3,940	0.0%	
Contractual Services	\$ 26,163	\$ 26,863	\$ 10,471	\$ 12,018	\$ 16,905	\$ 4,420	\$ 48,500	\$ 48,500	9.1%	
50000 - Project Administration Services	\$ -	\$ 77	\$ -	\$ -	\$ -	\$ -	\$ 10,000	\$ 10,000	0.0%	
52130 - Repairs and Maint- Computers	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	
52140 - Repairs and Maint- Copiers	\$ 1,282	\$ 1,171	\$ 1,072	\$ 1,210	\$ 605	\$ 500	\$ 1,500	\$ 1,500	33.3%	
53050 - Employment Advertising	\$ -	\$ -	\$ 85	\$ 731	\$ 4,752	\$ 41	\$ 6,800	\$ 6,800	0.6%	
53100 - Conferences and Meetings	\$ -	\$ -	\$ 500	\$ 3,043	\$ 4,392	\$ -	\$ 5,500	\$ 5,500	0.0%	
53110 - Employee Training	\$ -	\$ 952	\$ 256	\$ 1,479	\$ -	\$ -	\$ -	\$ -	0.0%	
53120 - Employee Mileage Expense	\$ -	\$ -	\$ 44	\$ 92	\$ 248	\$ -	\$ 150	\$ 150	0.0%	
53130 - General Association Dues	\$ -	\$ -	\$ -	\$ 732	\$ 528	\$ -	\$ 1,200	\$ 1,200	0.0%	
55000 - Miscellaneous Contractual Exp	\$ 24,882	\$ 24,663	\$ 8,514	\$ 4,730	\$ 6,380	\$ 3,879	\$ 23,350	\$ 23,350	16.6%	
Commodities	\$ 5,259	\$ 5,448	\$ 4,995	\$ 2,780	\$ 5,575	\$ 2,029	\$ 7,500	\$ 7,500	27.1%	
60000 - Office Supplies	\$ 5,029	\$ 2,071	\$ 4,267	\$ 2,295	\$ 2,740	\$ 1,506	\$ 4,800	\$ 4,800	31.4%	
60010 - Operating Supplies	\$ -	\$ 1,763	\$ -	\$ -	\$ 2,381	\$ 39	\$ 2,200	\$ 2,200	1.8%	
60080 - Employee Recognition Supplies	\$ 230	\$ 1,614	\$ 727	\$ 485	\$ 455	\$ 484	\$ 500	\$ 500	96.8%	
Capital	\$ -	\$ -	\$ -	\$ -	\$ 2,145	\$ -	\$ 2,250	\$ 2,250	0.0%	
70080 - Office Furniture	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,250	\$ 2,250	0.0%	
70090 - Office Equipment	\$ -	\$ -	\$ -	\$ -	\$ 2,145	\$ -	\$ -	\$ -	0.0%	
Services	\$ -	\$ -	\$ -	\$ -	\$ (59,224)	\$ -	\$ (99,554)	\$ (99,554)	0.0%	
45005 - Healthcare Contribution Contra Account	\$ -	\$ -	\$ -	\$ -	\$ (57,116)	\$ -	\$ (63,646)	\$ (63,646)	0.0%	
45015 - Dental Insurance Contra Account	\$ -	\$ -	\$ -	\$ -	\$ (2,108)	\$ -	\$ (2,117)	\$ (2,117)	0.0%	
45105 - FICA/SS Contribution Contra Account	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (17,420)	\$ (17,420)	0.0%	
45205 - IMRF Contribution Contra Account	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (12,431)	\$ (12,431)	0.0%	
53015 - Worker's Comp Contra Account	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (3,940)	\$ (3,940)	0.0%	
010 Insurance Liability	\$ 3,263,613	\$ 3,313,916	\$ 3,503,841	\$ 4,232,913	\$ 5,439,152	\$ 2,341,733	\$ 5,017,690	\$ 5,007,421	46.7%	
Expenses	\$ 3,263,613	\$ 3,313,916	\$ 3,503,841	\$ 4,232,913	\$ 5,439,152	\$ 2,341,733	\$ 5,017,690	\$ 5,007,421	46.7%	
Personnel Services- Salaries & Wages	\$ 136,111	\$ 105,936	\$ 133,016	\$ 154,916	\$ 171,310	\$ 120,963	\$ 267,026	\$ 264,084	45.3%	
40000 - Salaries and Wages	\$ 136,111	\$ 105,936	\$ 133,016	\$ 154,916	\$ 171,310	\$ 120,963	\$ 267,026	\$ 264,084	45.3%	
40002 - Non-Union Wage Increase	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	
40003 - Cost of Living Increase	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	

Committee Expense Budget Report - by Account Detail
Through June 30, 2025 (58.3% YTD, 53.85% Payroll Expense through Pay Period Ending 06/07/2025)
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Personnel Services- Employee Benefits	\$ 1,188,560	\$ 607,281	\$ 543,154	\$ 1,114,693	\$ 1,964,756	\$ 487,366	\$ 84,181	\$ 83,741	578.9%	
45000 - Healthcare Contribution	\$ 14,912	\$ 6,061	\$ 12,177	\$ 19,025	\$ 21,219	\$ 19,127	\$ 42,796	\$ 42,796	44.7%	
45010 - Dental Contribution	\$ 749	\$ 238	\$ 486	\$ 889	\$ 1,027	\$ 532	\$ 1,749	\$ 1,749	30.4%	
45100 - FICA/SS Contribution	\$ 10,151	\$ 8,035	\$ 9,988	\$ 11,455	\$ 12,515	\$ 8,864	\$ 20,433	\$ 20,206	43.4%	
45200 - IMRF Contribution	\$ 10,631	\$ 9,493	\$ 8,836	\$ 7,776	\$ 7,516	\$ 6,298	\$ 14,581	\$ 14,420	43.2%	
53010 - Workers Compensation	\$ 1,152,118	\$ 583,453	\$ 511,667	\$ 1,075,548	\$ 1,922,480	\$ 452,546	\$ 4,622	\$ 4,570	9,791.1%	
Contractual Services	\$ 1,938,929	\$ 2,182,801	\$ 2,801,437	\$ 2,959,226	\$ 3,299,104	\$ 1,728,469	\$ 3,159,104	\$ 3,158,994	54.7%	
50000 - Project Administration Services	\$ 106,928	\$ 117,829	\$ 103,715	\$ 87,090	\$ 79,432	\$ 53,770	\$ 108,975	\$ 108,975	49.3%	
50150 - Contractual/Consulting Services	\$ 182,847	\$ 82,494	\$ 112,114	\$ 831	\$ 1,094	\$ -	\$ 185,000	\$ 185,000	0.0%	
53000 - Liability Insurance	\$ 1,620,506	\$ 1,984,178	\$ 2,594,794	\$ 2,814,506	\$ 3,140,823	\$ 1,629,676	\$ 2,838,049	\$ 2,837,940	57.4%	
53020 - Unemployment Claims	\$ 28,648	\$ (1,700)	\$ (9,186)	\$ 56,799	\$ 77,756	\$ 44,759	\$ 27,080	\$ 27,079	165.3%	
53130 - General Association Dues	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 264	\$ -	\$ -	0.0%	
Commodities	\$ 13	\$ (13)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	
60000 - Office Supplies	\$ 13	\$ (13)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	
Capital	\$ -	\$ -	\$ 22,659	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	
70070 - Automotive Equipment	\$ -	\$ -	\$ 22,659	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	
Contingency and Other	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	
89000 - Addition to Fund Balance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	
Transfers Out	\$ -	\$ 417,912	\$ 3,575	\$ 4,078	\$ 3,981	\$ 4,935	\$ 4,935	\$ 4,935	100.0%	
99000 - Transfer To Other Funds	\$ -	\$ 417,912	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.0%	
99001 - Transfer to General Fund 001	\$ -	\$ -	\$ 3,575	\$ 4,078	\$ 3,981	\$ 4,935	\$ 4,935	\$ 4,935	100.0%	
Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,502,444	\$ 1,495,667	0.0%	
53011 - Worker's Compensation Claims	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 1,502,444	\$ 1,495,667	0.0%	
246 Employee Events Fund	\$ -	\$ -	\$ 1,044	\$ -	\$ -	\$ -	\$ 1,509	\$ 1,509	0.0%	
Expenses	\$ -	\$ -	\$ 1,044	\$ -	\$ -	\$ -	\$ 1,509	\$ 1,509	0.0%	
Commodities	\$ -	\$ -	\$ 1,044	\$ -	\$ -	\$ -	\$ 984	\$ 984	0.0%	
60080 - Employee Recognition Supplies	\$ -	\$ -	\$ 1,044	\$ -	\$ -	\$ -	\$ 984	\$ 984	0.0%	
Contingency and Other	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 525	\$ 525	0.0%	
89000 - Addition to Fund Balance	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 525	\$ 525	0.0%	
Grand Total	\$ 3,512,266	\$ 3,544,253	\$ 3,710,258	\$ 4,496,888	\$ 5,684,740	\$ 2,468,328	\$ 5,308,930	\$ 5,294,814	46.5%	



Human Services Accounts Payable by GL Distribution

Payment Date Range 06/01/25 - 06/30/25

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund 001 - General Fund										
Department 120 - Human Resource Management										
Sub-Department 120 - Human Resource Management										
Account 52140 - Repairs and Maint- Copiers										
4371 - Toshiba Business Solutions, Inc.	6568295	Finance copier charges - 02/16/25 - 05/15/25	Paid by Check # 387102		05/09/2025	05/19/2025	05/19/2025		06/02/2025	102.46
13153 - Toshiba America Business Solutions, Inc	6498806	Copier charges - 11/16/24 - 02/15/25	Paid by EFT # 97856		02/10/2025	06/18/2025	06/18/2025		06/30/2025	209.78
Account 52140 - Repairs and Maint- Copiers Totals									Invoice Transactions 2	\$312.24
Account 55000 - Miscellaneous Contractual Exp										
1299 - Kane County Regional Office of Education	8002500207	Background Checks - 2025 May Fingerprinting	Paid by EFT # 97723		06/09/2025	06/18/2025	06/18/2025		06/30/2025	800.00
Account 55000 - Miscellaneous Contractual Exp Totals									Invoice Transactions 1	\$800.00
Account 60000 - Office Supplies										
3509 - DS Services of America, Inc. dba Primo Water NA	23838934 051025	Water delivery 04/24 & 05/08/25	Paid by EFT # 97005		05/10/2025	05/19/2025	05/19/2025		06/02/2025	10.97
11058 - JP Morgan Chase Bank N.A.	5067-CD-05/25	May Pcard Charges & Statement	Paid by EFT # 97395		05/30/2025	06/04/2025	06/04/2025		06/16/2025	470.99
3509 - DS Services of America, Inc. dba Primo Water NA	23838934 060725	Water delivery 05/22/25 & Rental Fee	Paid by EFT # 97647		06/07/2025	06/18/2025	06/18/2025		06/30/2025	11.98
Account 60000 - Office Supplies Totals									Invoice Transactions 3	\$493.94
Account 60080 - Employee Recognition Supplies										
11058 - JP Morgan Chase Bank N.A.	5067-CD-05/25	May Pcard Charges & Statement	Paid by EFT # 97395		05/30/2025	06/04/2025	06/04/2025		06/16/2025	314.00
Account 60080 - Employee Recognition Supplies Totals									Invoice Transactions 1	\$314.00
Sub-Department 120 - Human Resource Management Totals									Invoice Transactions 7	\$1,920.18
Department 120 - Human Resource Management Totals									Invoice Transactions 7	\$1,920.18
Fund 001 - General Fund Totals									Invoice Transactions 7	\$1,920.18
Fund 010 - Insurance Liability										
Department 120 - Human Resource Management										
Sub-Department 130 - Insurance Liability- HRM										
Account 53000 - Liability Insurance										
12798 - West Bend Mutual Insurance Company	2646716	Notary Bonds - Berg-Meyer 2646716	Paid by Check # 387109		05/02/2025	05/22/2025	05/22/2025		06/02/2025	20.00
12798 - West Bend Mutual Insurance Company	2647032	Notary Bonds - Nelson 2647032	Paid by Check # 387109		05/06/2025	05/22/2025	05/22/2025		06/02/2025	20.00
12798 - West Bend Mutual Insurance Company	2648457	Notary Bond - Emerson 2648457	Paid by Check # 387221		05/21/2025	06/05/2025	06/05/2025		06/16/2025	20.00
12798 - West Bend Mutual Insurance Company	2648431	Notary Bond - Pacheco 2648431	Paid by Check # 387221		05/21/2025	06/05/2025	06/05/2025		06/16/2025	20.00
12798 - West Bend Mutual Insurance Company	2648560	Notary Bond - Soderdahl 2648560	Paid by Check # 387221		05/22/2025	06/05/2025	06/05/2025		06/16/2025	20.00



Human Services Accounts Payable by GL Distribution

Payment Date Range 06/01/25 - 06/30/25

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund 010 - Insurance Liability										
Department 120 - Human Resource Management										
Sub-Department 130 - Insurance Liability- HRM										
Account 53000 - Liability Insurance										
13382 - C&D Autobody Repair, Inc.	5825	Liability Repair Payment - 25D45M684508	Paid by EFT # 97289		05/15/2025	06/05/2025	06/05/2025		06/16/2025	2,592.83
8258 - CCMSI	0176825-IN	CCMSI GL Funding Reimbursement	Paid by EFT # 97294		05/31/2025	06/05/2025	06/05/2025		06/16/2025	4,417.00
9385 - H&H Electric Co.	45300	Liability Repair Payment - RPO-KC-25-0018	Paid by EFT # 97364		01/17/2025	02/17/2025	05/22/2025	05/19/2025	06/16/2025	512.00
9385 - H&H Electric Co.	45294	Liability Repair Payment - 25D45M695433	Paid by EFT # 97364		01/17/2025	06/05/2025	06/05/2025		06/16/2025	5,341.32
8728 - State Street Collision, Inc.	23108480	Liability Repair Payment - 25D45M662603	Paid by EFT # 97504		06/02/2025	06/05/2025	06/05/2025		06/16/2025	9,871.66
8728 - State Street Collision, Inc.	22736002	Liability Repair Payment - RPO-KC-25-0009	Paid by EFT # 97504		04/29/2025	06/05/2025	06/05/2025		06/16/2025	932.60
11377 - Via Carlita, LLC dba Hawk Ford St. Charles	99182	Liability Repair Payment - RPO-KC-25-0020	Paid by EFT # 97537		05/28/2025	06/05/2025	06/05/2025		06/16/2025	1,139.51
11377 - Via Carlita, LLC dba Hawk Ford St. Charles	99189	Liability Repair Payment - RPO-KC-25-0020	Paid by EFT # 97537		05/29/2025	06/05/2025	06/05/2025		06/16/2025	216.25
8728 - State Street Collision, Inc.	23403390	Liability Repair Payment - RPO-KC-25-0021	Paid by EFT # 97836		06/06/2025	06/18/2025	06/18/2025		06/30/2025	3,855.65
8258 - CCMSI	0169572-IN	CCMSI Admin Fees	Paid by EFT # 97616		06/17/2025	06/18/2025	06/18/2025		06/30/2025	17,770.00
3478 - Fox Valley Glass, Inc.	48513	Liability Repair Payment - RPO-KC-25-0023	Paid by EFT # 97669		05/14/2025	06/18/2025	06/18/2025		06/30/2025	752.55
3478 - Fox Valley Glass, Inc.	48609	Liability Repair Payment - RPO-KC-25-0024	Paid by EFT # 97669		06/05/2025	06/18/2025	06/18/2025		06/30/2025	750.00
12798 - West Bend Mutual Insurance Company	2649390	Notary Bonds - Tallitsch 2649390	Paid by Check # 387305		06/03/2025	06/18/2025	06/18/2025		06/30/2025	20.00
Account 53000 - Liability Insurance Totals							Invoice Transactions		18	<u>\$48,271.37</u>
Account 53010 - Workers Compensation										
8258 - CCMSI	0176824-IN	CCMSI WC Funding Reimbursement	Paid by EFT # 97294		05/31/2025	06/05/2025	06/05/2025		06/16/2025	79,982.78



Human Services Accounts Payable by GL Distribution

Payment Date Range 06/01/25 - 06/30/25

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund 010 - Insurance Liability										
Department 120 - Human Resource Management										
Sub-Department 130 - Insurance Liability- HRM										
Account 53010 - Workers Compensation										
13202 - Matthew J. Goncher	20250601	Goncher June 2025 PSEBA Payment	Paid by EFT # 97355		06/01/2025	06/05/2025	06/05/2025		06/16/2025	978.10
Account 53010 - Workers Compensation Totals							Invoice Transactions	2		\$80,960.88
Sub-Department 130 - Insurance Liability- HRM Totals							Invoice Transactions	20		\$129,232.25
Department 120 - Human Resource Management Totals							Invoice Transactions	20		\$129,232.25
Fund 010 - Insurance Liability Totals							Invoice Transactions	20		\$129,232.25
Grand Totals							Invoice Transactions	27		\$131,152.43

Kane County Purchasing Card Information
Human Services Committee
June 2025 Statement

HUMAN RESOURCE MANAGEMENT			
Transaction Date	Merchant Name	Additional Information	Transaction Amount
6/2/2025	AMAZON PRIME PMTS	AMZN.COM/BILL	(\$14.99)
6/16/2025	AMAZON MKTPL	AMZN.COM/BILL	\$118.43
6/19/2025	AMAZON MKTPL	AMZN.COM/BILL	\$17.59
			Total: \$121.03
			Total all: \$121.03



Tuition Reimbursement FYTD

Payment Date Range 12/01/24 - 06/30/25

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund 120 - Grand Victoria Casino Elgin										
Department 010 - County Board										
Sub-Department 020 - Riverboat										
Account 45420 - Tuition Reimbursement										
14449 - Emilia Gunty	2408-02	Tuition Reimbursement	Paid by EFT # 93326		12/09/2024	12/18/2024	11/30/2024		12/30/2024	931.20
14669 - Brenna E. Russell	2402-01	Tuition Reimbursement	Paid by EFT # 93457		12/02/2024	12/17/2024	11/30/2024		12/30/2024	1,105.00
10326 - Stephanie T Galley	2502-01	Tuition Reimb - MPA6460 Public Sector Law & Civil Liability	Paid by EFT # 95235		03/04/2025	03/03/2025	03/13/2025		03/24/2025	1,392.00
14449 - Emilia Gunty	2503-01	DMA 695 Thesis I - MPOP 575 Digital Medica Ethics	Paid by EFT # 95971		04/03/2025	04/09/2025	04/10/2025		04/21/2025	2,400.00
11129 - Gabriela Allison	2506-01	Intro to Biological Anthropology ANTH 101	Paid by EFT # 96929		05/08/2025	05/19/2025	05/22/2025		06/02/2025	1,197.60
12221 - Richard Malek II	2505-01	SOCW584 Policy, HDF5594 Statistical Analysis	Paid by Check # 387285		06/06/2025	06/16/2025	06/19/2025		06/30/2025	2,400.00
Account 45420 - Tuition Reimbursement Totals							Invoice Transactions	6		\$9,425.80
Sub-Department 020 - Riverboat Totals							Invoice Transactions	6		\$9,425.80
Department 010 - County Board Totals							Invoice Transactions	6		\$9,425.80
Fund 120 - Grand Victoria Casino Elgin Totals							Invoice Transactions	6		\$9,425.80
Grand Totals							Invoice Transactions	6		\$9,425.80

Health Insurance Fund

Revenue and Expenses

Through June 30, 2025 (58.3% YTD, 53.85% Payroll Expense through Pay Period Ending 06/07/2025)
with comparative for Full Fiscal Year 2022, 2023 and 2024

	2022 Actual	2023 Actual	2024 Actual	2025 Actual
Revenue				
652.800.000.38000 - Investment Income	\$ (89,645)	\$ 354,484	\$ 576,782	\$ 130,652
652.800.000.38900 - Miscellaneous Other	\$ 17,880	\$ -	\$ -	\$ -
652.800.000.38910 - Healthcare Employer Portion	\$ 13,116,149	\$ 14,469,417	\$ 16,153,512	\$ 10,014,834
652.800.000.38915 - Dental Employer Portion	\$ 425,507	\$ 407,933	\$ 473,351	\$ 284,757
652.800.000.38920 - Healthcare Employee Portion	\$ 3,197,317	\$ 2,925,521	\$ 3,385,325	\$ 2,107,240
652.800.000.38921 - Dental Employee Portion	\$ 281,567	\$ 269,619	\$ 299,829	\$ 180,588
652.800.000.38927 - MERP Employer Portion	\$ 998,731	\$ 1,120,209	\$ 1,324,816	\$ 811,152
652.800.000.38930 - Retiree Payments - Healthcare	\$ 609,359	\$ 707,560	\$ 689,732	\$ 384,274
652.800.000.38935 - Retiree Payments - Dental	\$ 2,615	\$ 3,815	\$ 2,886	\$ 1,846
652.800.000.38940 - Cobra Payments - Healthcare	\$ 47,684	\$ 24,367	\$ 20,799	\$ 39,853
652.800.000.38945 - Cobra Payments - Dental	\$ 2,696	\$ 2,010	\$ 1,644	\$ 2,046
Total Revenue	\$ 18,609,860	\$ 20,284,936	\$ 22,928,675	\$ 13,957,243
Expenses - Health Insurance General				
652.800.814.45000 - Healthcare Contribution	-	-	\$ -	\$ 204
652.800.814.45010 - Dental Contribution	\$ -	\$ -	\$ 132	\$ 24
652.800.814.50150 - Contractual/Consulting Services	\$ 114,000	\$ 108,000	\$ 110,250	\$ 65,750
652.800.814.50520 - Healthcare Admin Services	\$ 11,244	\$ 11,665	\$ 15,703	\$ 9,885
652.800.814.53005 - Healthcare - Stop Loss Insurance	\$ (624,786)	\$ (806,784)	\$ (2,027,628)	\$ (45,404)
652.800.814.53038 - Healthcare - Vision Insurance	\$ 74,975	\$ 81,318	\$ 83,696	\$ 49,580
652.800.814.53039 - Affordable Care Act Fee	\$ 3,210	\$ 5,217	\$ 5,699	\$ -
652.800.814.53300 - Healthcare - Health Insurance	\$ 23,031	\$ -	\$ -	\$ -
652.800.814.53310 - Healthcare - Dental Insurance	\$ 732,083	\$ 804,932	\$ 742,246	\$ 481,078
652.800.814.53320 - Healthcare - Life Insurance	\$ 42,029	\$ 40,678	\$ 57,705	\$ 13,320
652.800.814.53380 - Healthcare - Wellness	\$ -	\$ (100,000)	\$ (375,000)	\$ (50,000)
652.800.814.53381 - Healthcare - Wellness Surcharge Refunds	\$ -	\$ 46,550	\$ -	\$ -
652.800.814.53385 - Financial Wellness	\$ 7,500	\$ 10,000	\$ 10,000	\$ 5,000
Total Health Insurance General Expenses	\$ 383,286	\$ 201,575	\$ (1,377,197)	\$ 529,436

Health Insurance Fund

Revenue and Expenses

Through June 30, 2025 (58.3% YTD, 53.85% Payroll Expense through Pay Period Ending 06/07/2025)
with comparative for Full Fiscal Year 2022, 2023 and 2024

	2022 Actual	2023 Actual	2024 Actual	2025 Actual
Expenses - Health Insurance MERP				
652.800.814.53340 - MERP - Premium Reimbursement	\$ 55,424	\$ 62,949	\$ 83,841	\$ 7,811
652.800.814.45100 - MERP FICA/SS on Premium Reimbursement	\$ 4,202	\$ 8,216	\$ 6,465	\$ 383
652.800.814.53330 - MERP - Medical Expense Reimbursement	\$ 331,406	\$ 447,562	\$ 535,057	\$ 175,516
652.800.814.53350 - MERP - Shared Savings with Administrator	\$ 14,316	\$ -	\$ -	\$ -
Total MERP Expenses	\$ 405,349	\$ 518,727	\$ 625,362	\$ 183,710
Expenses - Health Insurance PPO				
652.800.817.53005 - Healthcare - Stop Loss Insurance	\$ 505,541	\$ 723,948	\$ 893,817	\$ 540,945
652.800.817.53031 - Self Insured Healthcare Claims	\$ 6,180,965	\$ 7,738,450	\$ 10,233,290	\$ 4,691,147
652.800.817.53032 - Self Insured Healthcare Claims Administration	\$ 218,379	\$ 245,663	\$ 289,635	\$ 162,029
652.800.817.53033 - Healthcare Facility Access Fee	\$ 76,025	\$ 13,041	\$ 231,063	\$ 27,209
652.800.817.53037 - Healthcare Credits	\$ (260,803)	\$ (350,324)	\$ (586,275)	\$ (344,677)
Total Health Insurance PPO Expenses	\$ 6,720,108	\$ 8,370,778	\$ 11,061,530	\$ 5,076,654
Expenses - Health Insurance HMO				
652.800.818.53005 - Healthcare - Stop Loss Insurance	\$ 462,946	\$ 555,815	\$ 604,545	\$ 327,772
652.800.818.53031 - Self Insured Healthcare Claims	\$ 6,714,631	\$ 6,963,453	\$ 7,279,419	\$ 4,144,203
652.800.818.53032 - Self Insured Healthcare Claims Administration	\$ 394,430	\$ 372,131	\$ 368,937	\$ 204,697
652.800.818.53034 - Healthcare HMO Managed Care Fee	\$ 92,087	\$ 104,647	\$ 104,847	\$ 50,839
652.800.818.53035 - Healthcare Physician Services Fee	\$ 2,658,797	\$ 2,594,715	\$ 2,612,488	\$ 1,208,440
652.800.818.53037 - Healthcare Credits	\$ (497,551)	\$ (564,106)	\$ (833,433)	\$ (447,154)
Total Health Insurance HMO Expenses	\$ 9,825,340	\$ 10,026,655	\$ 10,136,802	\$ 5,488,796
Expenses - Retiree				
652.800.820.53300 - Healthcare - Health Insurance	\$ 106,764	\$ 125,395	\$ 160,639	\$ 184,892
Total Expenses	\$ 17,440,846	\$ 19,243,130	\$ 20,607,136	\$ 11,463,487
Revenue Net Expenses	\$ 1,169,014	\$ 1,041,806	\$ 2,321,539	\$ 2,493,755
Fund Balance	\$ 6,416,869	\$ 7,458,675	\$ 9,780,214	\$ 12,273,969
<i>Target Fund Balance at 25%</i>	\$ 4,360,212	\$ 4,810,783	\$ 5,151,784	\$ 2,865,872
<i>Target Fund Balance at 50%</i>	\$ 8,720,423	\$ 9,621,565	\$ 10,303,568	\$ 5,731,744

STATE OF ILLINOIS)
COUNTY OF KANE) SS.

REPORT NO. TMP-25-801

MONTHLY BLUE CROSS BLUE SHIELD INVOICE

Group Health Plan	KANE COUNTY 719 BATAVIA AVENUE GENEVA, IL 60134-3077
Employer Account No.	IL1-238541
Bill Group	0579517327
Account ID Number	8253175154
Invoice Number	825312311328
Invoice Date	05/31/2025
Invoice Period	05/01/2025 - 05/31/2025
Billing Cycle	MONTHLY

Make Electronic (Wire¹ or ACH²) Payments to

Mellon Bank
Blue Cross and Blue Shield of Illinois

ABA Number 043000261

Bank Account Number 120-5032

Account ID Number 8253175154

Amount Due \$2,067,789.36
Date Due 07/02/2025

See footnotes for important Wire & ACH payment instructions

Claim Charges/Credits - Paid 5/1/25 – 5/31/25

Value Based Care-Value Incentive	282.47
Medical-Facility	639,422.17
Value Based Care-Care Coordination	504.50
Pharmacy	777,943.80
Medical-Professional	322,217.51
Total Claim Charges/Credits	\$1,740,370.45

Administration Fees
Calculation Method

RX Rebate Credit	Per Contract Per Month	(134,365.92)
IL Access Fee	Monthly IL Access Fee	2,846.71
HMO Managed Care Fee	Per Contract Per Month	8,438.39
Physician Service Fee - Allocated	Monthly Claims	19,429.31
Administration Fee	Per Contract Per Month	54,263.16
Specific Stop Loss	Per Contract Per Month	148,138.89
Physician Service Fee - Direct	Monthly Claims	220,147.20
APR Savings Program-Data Mining & Post Pay Recovery	Claim Based	26.93
APR Savings Program-Advanced Claim Edits and Coding Validation	Claim Based	1,122.88
APR Savings Program-Prepay Service Line Review	Claim Based	6,106.26

(continued on next page)
¹For Electronic payment via Wire

You MUST include the following in the "Reference for Beneficiary" (1@16) and "Originator to Beneficiary" (1@35) in the following order: **1** Account name, **2** IL, MT, NM, OK or TX (depending on sales location), **3** Account ID number and due date (mmddyy). Please reference the "Make Electronic Payments to" portion at the top right of your invoice for the correct information.

²For Electronic payment via ACH

The PPD and CCD formats have different fields named "Individual ID" or "Identification Number." Please add your account description as directed in the wire instructions in the "Company Description Data" field.

Administration Fees <i>(continued from previous page)</i>	Calculation Method
APR Savings Program-Provider Audit	Claim Based 1,265.10
Total Administration Fees	\$327,418.91

Total Claim Charges/Credits	\$1,740,370.45
Total Administration Fees & Adjustments	\$327,418.91
Total Charges	\$2,067,789.36

Administration Fees Notes

Draft schedule for monthly groups on autopay will be 15th of each month.

Billing Contact

ARCHANA KELAVKAR
Email: ASO_Billing_Team@bcbsil.com

Account Executive Contact

Dee Roberts
Email: Dee_Roberts@BCBSIL.COM

Electronic payment is preferred. Check payment is acceptable.

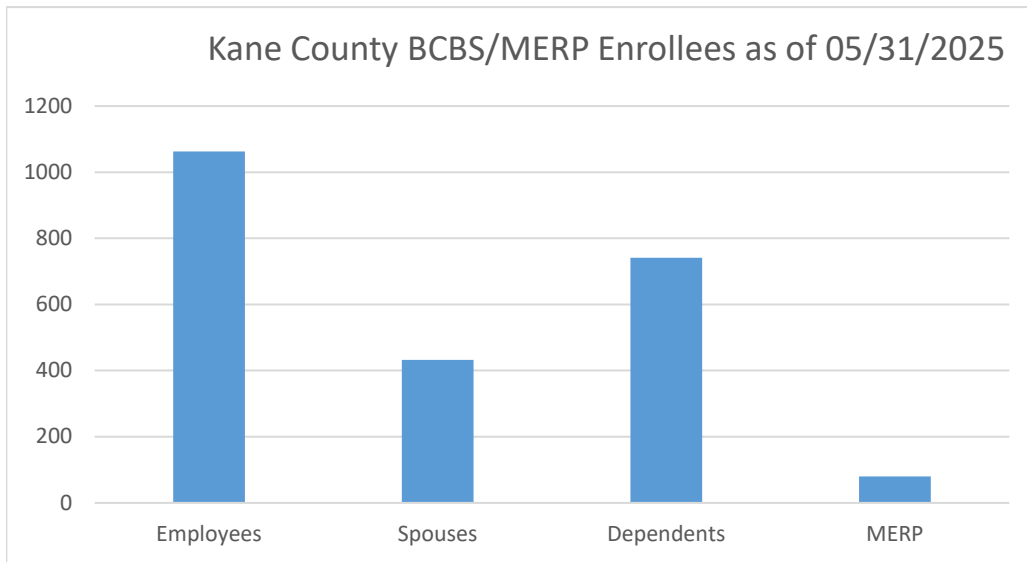
Make checks payable to Blue Cross and Blue Shield of Illinois Include Account ID Number 8253175154 Amount Due \$2,067,789.36 Date Due 07/02/2025	If sending via Overnight Courier Blue Cross and Blue Shield of Illinois Attn: 14169 5503 N. Cumberland Ave. Chicago, IL 60656-1471	If sending via 1st Class Mail Blue Cross and Blue Shield of Illinois Dept. CH 14169 Palatine, IL 60055-4169
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STATE OF ILLINOIS)
COUNTY OF KANE) SS.

REPORT NO. TMP-25-802
MONTHLY BCBS AND MERP TOTALS

**Kane County BCBS/MERP Enrollees as of
05/31/2025**

Employees	Spouses	Dependents	MERP
1063	432	741	80



STATE OF ILLINOIS)
COUNTY OF KANE) SS.

REPORT NO. TMP-25-803
MONTHLY ASSURED PARTNERS REPORT

Kane County

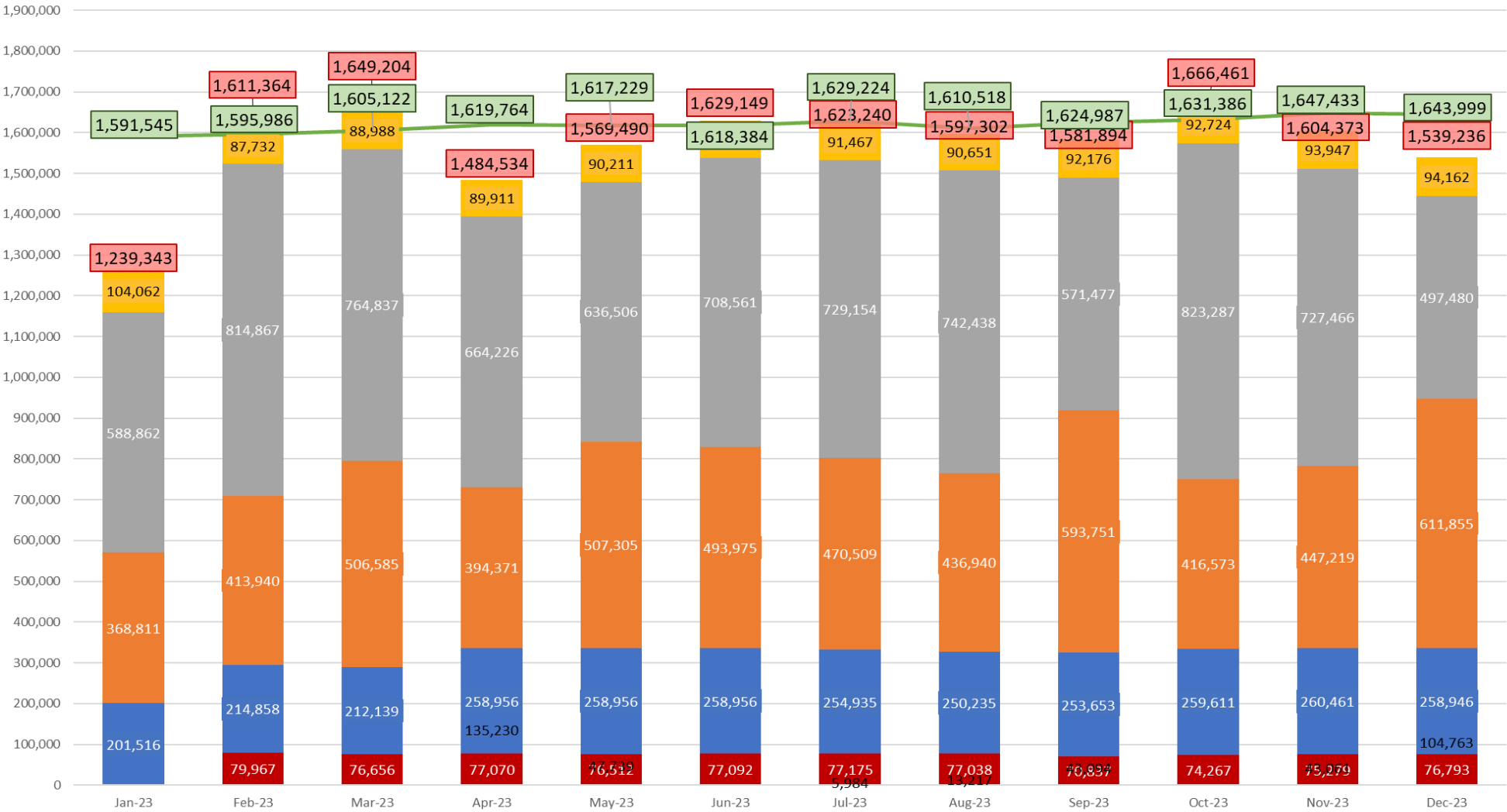
HSC Meeting 7/9/2025



AssuredPartners

2023 Global Financial Tracker

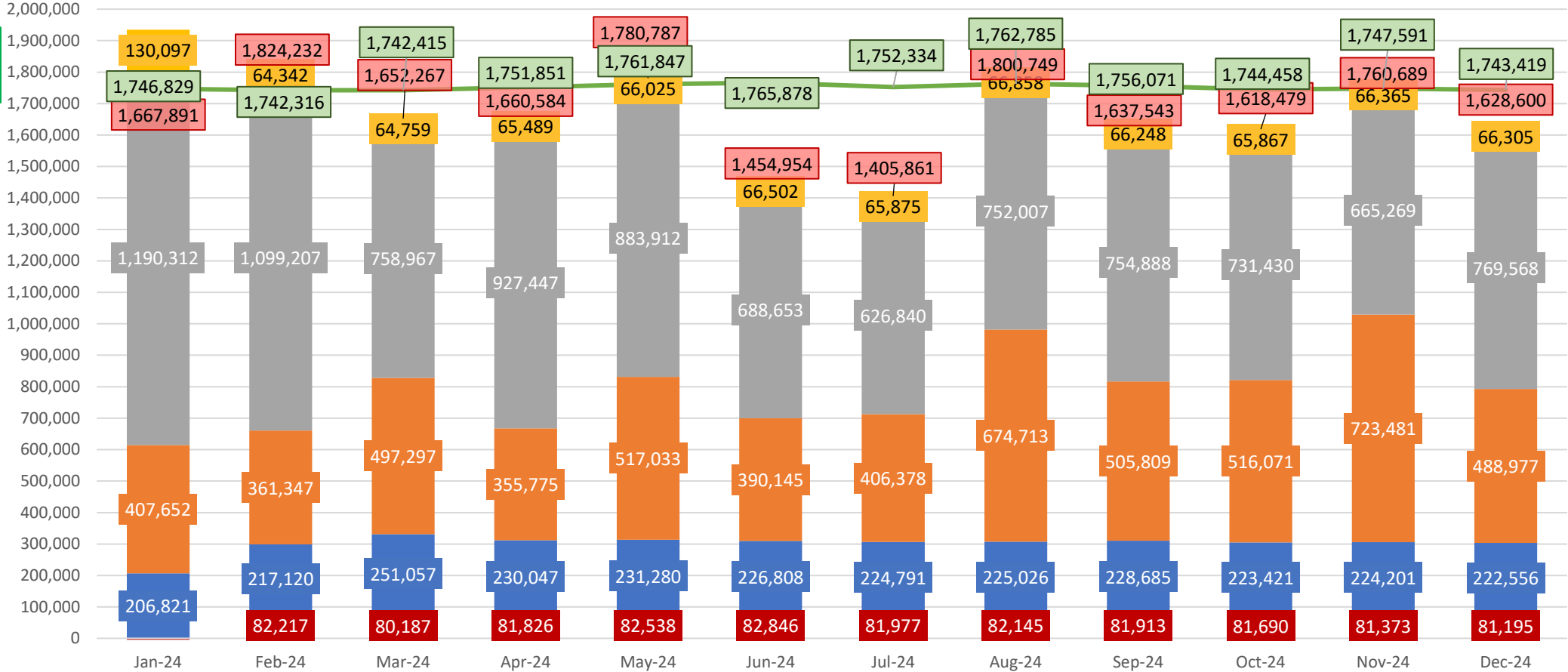
Amount Toward Reserve:
\$639,988



	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
Medical/Rx Fixed Cost	104,062	87,732	88,988	89,911	90,211	90,565	91,467	90,651	92,176	92,724	93,947	94,162
Medical Claims after SL Reimbursements	588,862	814,867	764,837	664,226	636,506	708,561	729,154	742,438	571,477	823,287	727,466	497,480
Rx Claims	368,811	413,940	506,585	394,371	507,305	493,975	470,509	436,940	593,751	416,573	447,219	611,855
Capitation	201,516	214,858	212,139	258,956	258,956	258,956	254,935	250,235	253,653	259,611	260,461	258,946
All Other *	-23,908	79,967	76,656	77,070	76,512	77,092	77,175	77,038	70,837	74,267	75,279	76,793
Total Cost	1,239,343	1,611,364	1,649,204	1,484,534	1,569,490	1,629,149	1,623,240	1,597,302	1,581,894	1,666,461	1,604,373	1,539,236
Total Funding	1,591,545	1,595,986	1,605,122	1,619,764	1,617,229	1,618,384	1,629,224	1,610,518	1,624,987	1,631,386	1,647,433	1,643,999
Surplus/Deficit	352,202	-15,378	-44,083	135,230	47,739	-10,765	5,984	13,217	43,094	-35,075	43,061	104,763

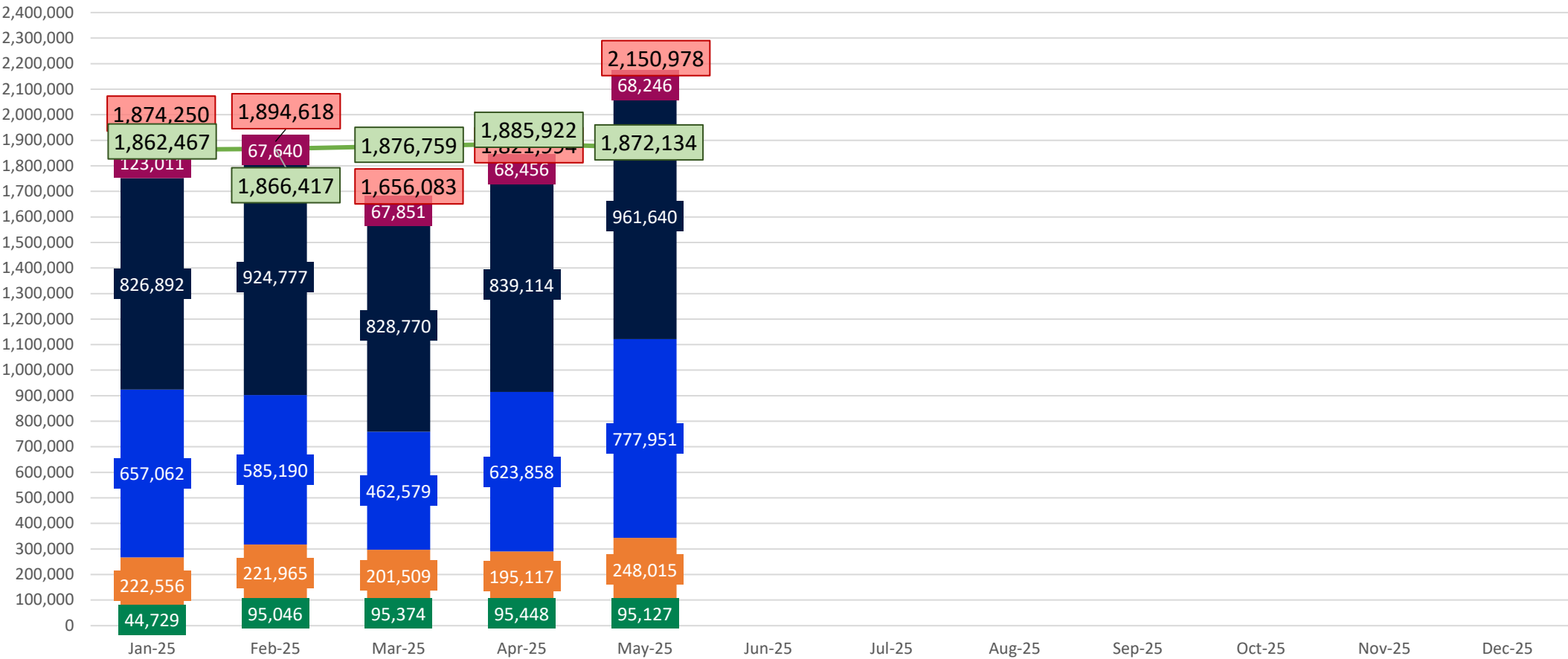
2024 Global Financial Tracker

Amount Toward Reserve:
\$1,125,157



	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24
Medical/Rx Fixed Cost	130,097	64,342	64,759	65,489	66,025	66,502	65,875	66,858	66,248	65,867	66,365	66,305
Medical Claims after SL Reimbursements	1,190,312	1,099,207	758,967	927,447	883,912	688,653	626,840	752,007	754,888	731,430	665,269	769,568
Rx Claims	407,652	361,347	497,297	355,775	517,033	390,145	406,378	674,713	505,809	516,071	723,481	488,977
Capitation	206,821	217,120	251,057	230,047	231,280	226,808	224,791	225,026	228,685	223,421	224,201	222,556
All Other *	-266,991	82,217	80,187	81,826	82,538	82,846	81,977	82,145	81,913	81,690	81,373	81,195
Total Cost	1,667,891	1,824,232	1,652,267	1,660,584	1,780,787	1,454,954	1,405,861	1,800,749	1,637,543	1,618,479	1,760,689	1,628,600
Total Funding	1,746,829	1,742,316	1,742,415	1,751,851	1,761,847	1,765,878	1,752,334	1,762,785	1,756,071	1,744,458	1,747,591	1,743,419
Surplus/Deficit	78,937	-81,917	90,148	91,267	-18,940	310,924	346,474	-37,964	118,527	125,980	-13,099	114,819

2025 Global Financial Tracker



	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25
Medical/Rx Fixed Cost	123,011	67,640	67,851	68,456	68,246							
Medical Claims after SL Reimbursements	826,892	924,777	828,770	839,114	961,640							
Rx Claims	657,062	585,190	462,579	623,858	777,951							
Capitation	222,556	221,965	201,509	195,117	248,015							
All Other *	44,729	95,046	95,374	95,448	95,127							
Total Cost	1,874,250	1,894,618	1,656,083	1,821,994	2,150,978							
Total Funding	1,862,467	1,866,417	1,876,759	1,885,922	1,872,134							
Surplus/Deficit	-11,783	-28,202	220,676	63,928	-278,845							

*All Other includes Employer HSA contributions, BCBS wellness credit, consulting fee, dental, vision, and EAP services.

STATE OF ILLINOIS)
COUNTY OF KANE) SS.

REPORT NO. TMP-25-804

MONTHLY APPLICANTS AND STAFF CHANGES

Job Applicants for June 2025 by Position

Title	Post Date - Deadline	Internal/External	Applicants
Animal Control			
Part Time County Veterinarian/Deputy Administrator	4/3/2025 - N/A	External	1
Total Animal Control Applicants			1
Auditor			
Intern/Volunteer	Open - N/A	External	1
Total Auditor Applicants			1
Building Management			
Janitor	5/27/2025 - N/A	External	3
Stockroom/Buyer	5/9/2025 - N/A	External	9
Total Building Management Applicants			12
Circuit Court Clerk			
Deputy Clerk	3/11/2025 - N/A	External	16
Total Circuit Court Clerk Applicants			16
County Board			
American Rescue Plan Program Coordinator	5/5/2025 - N/A	External	3
Total County Board Applicants			3
Court Services			
Juvenile Detention Specialist	5/19/2025 - 8/31/2025	External	1
Juvenile Detention Specialist	5/20/2025 - 8/31/2025	External	12
Total Court Services Applicants			13
Environmental and Water Resources			
Intern/Volunteer	Open - N/A	External	2
Total Environmental and Water Resources Applicants			2
Health Department			
Environmental Health Practitioner	3/18/2025 - N/A	External	6
Health Promotions Public Health Intern	4/17/2025 - N/A	External	1
Lead (Pb) Inspector – Lead Poisoning Prevention	4/22/2025 - N/A	External	1
Lead (Pb) Inspector – Lead Poisoning Prevention	4/23/2025 - N/A	External	1
Public Health Intern	4/16/2025 - N/A	External	4

Public Health Intern (Trap Collection for West Nile Program)	5/21/2025 - N/A	External	3
Violence Prevention Specialist	3/18/2025 - N/A	External	1
Total Health Department Applicants			17

Judiciary

Courtroom Bailiffs Part-Time and Seasonal	6/11/2025 - 6/27/2025	External	5
Interpreter Coordinator	5/27/2025 - 6/16/2025	External	6
Staff Interpreter - Spanish Language	5/27/2025 - 6/16/2025	External	3
Total Judiciary Applicants			14

KANECOMM

9-1-1 Telecommunicator	5/8/2025 - N/A	External	28
Intern/Volunteer	Open - N/A	External	1
Total KANECOMM Applicants			29

Office of Community Reinvestment

Accounting Intern	5/30/2025 - N/A	External	8
Career Navigator	5/6/2025 - N/A	External	4
Fiscal Manager	5/21/2025 - N/A	External	4
Program Assistant - DeKalb Office	5/21/2025 - N/A	External	5
Program Assistant - Yorkville Office	5/21/2025 - N/A	External	3
Program Coordinator	5/21/2025 - N/A	External	9
Workforce Board Manager	4/23/2025 - N/A	External	1
Workforce Board Manager	4/24/2025 - N/A	External	2
Total Office of Community Reinvestment Applicants			36

Office of Emergency Management (OEM)

[9] Office of Emergency Management (OEM)	11/25/2024 - N/A	External	1
Total Office of Emergency Management (OEM) Applicants			1

Sheriff

Corrections Officer	6/1/2025 - 7/21/2025	External	3
Corrections Officer	6/2/2025 - 7/21/2025	External	11
Court Security Officer	6/18/2025 - N/A	External	19
Total Sheriff Applicants			33

State's Attorney

Child Advocacy Center Bi-lingual Advocate	6/24/2025 - N/A	External	2
Child Advocacy Center Operations Manager	6/24/2025 - N/A	External	2

Total State's Attorney Applicants	4
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Treasurer

Customer Service Analyst	6/12/2025 - N/A	External	9
Total Treasurer Applicants			9

Workforce Development Department

Accounting Intern	5/30/2025 - N/A	External	1
Career Navigator	5/6/2025 - N/A	External	1
Fiscal Manager	5/21/2025 - N/A	External	2
Program Assistant - DeKalb Office	5/21/2025 - N/A	External	2
Program Assistant - Yorkville Office	5/21/2025 - N/A	External	3
Program Coordinator	5/21/2025 - N/A	External	6
Workforce Board Manager	4/24/2025 - N/A	External	2
Total Workforce Development Department Applicants			17

Total Applicants for June **208**

New Hire Report

from 06/01/2025 - 06/30/2025

Department	Employee Name	Job Title	Employee Status	Hire Date
Circuit Clerk				
	SKUBIC, ERICA J	Deputy Clerk	ACTIVE	06/02/2025
County Board				
	ALWAN, YOSOR S F	ARPA Program Coordinator	ACTIVE	06/09/2025
		Intern	ACTIVE	06/09/2025
County Clerk Elections-PR Only/County Clerk Elections - PR Only				
	ESQUIVEL, ANDREW R	Election Worker or Judge	ACTIVE	06/10/2025
Finance				
	HOFFMAN, DANIELLE M	Accounts Payable Specialist	ACTIVE	06/09/2025
		Accounts Payable Specialist II	ACTIVE	06/09/2025
		Buyer	ACTIVE	06/09/2025
		Buyer I	ACTIVE	06/09/2025
		Staff Auditor	ACTIVE	06/09/2025
Health				
	DULSON, TAYLOR J	Public Health Intern	ACTIVE	06/09/2025
	TREJO HUERIGO, NATALYA I	Public Health Intern	ACTIVE	06/09/2025
Kane Comm				
	KUBICA, FRANCESCA K	Training Manager	ACTIVE	06/16/2025
Regional Office of Education				
	STREITMATTER, GWENDOLYN E	Administrative Assistant	ACTIVE	06/02/2025
Sheriff/Adult Corrections				
	MADUZIA, ANTHONY J	Correctional Officer	ACTIVE	06/13/2025

New Hire Report

from 06/01/2025 - 06/30/2025

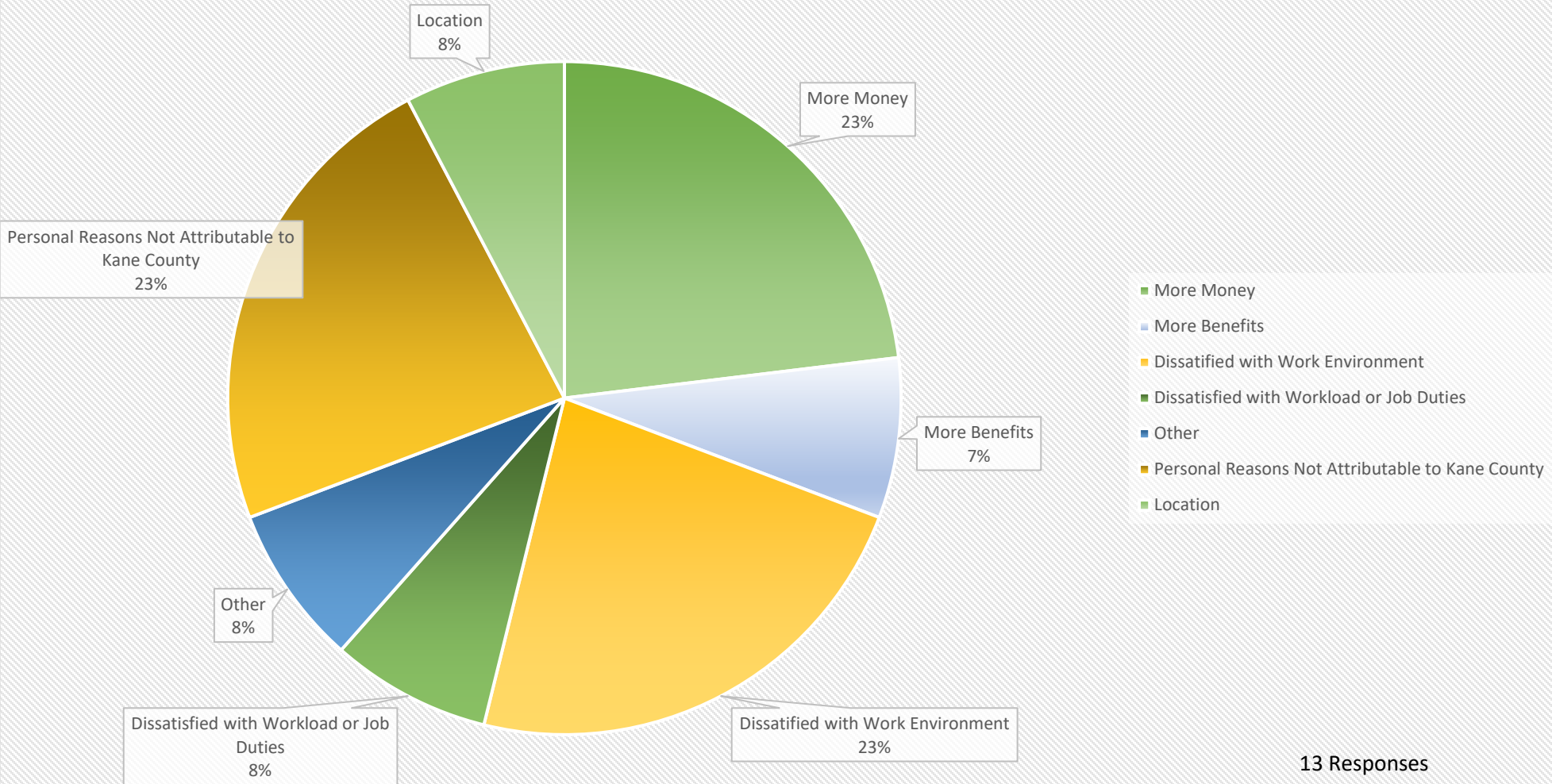
	RODRIGUEZ, JUSTIN M	Correctional Officer	ACTIVE	06/13/2025
	RUCHAJ, AMBER A	Information Specialist	ACTIVE	06/09/2025
Sheriff/Court Security				
	ELAFIFI, SARA A	Court Security Officer	ACTIVE	06/13/2025
	HESS, CHRISTOPHER M	Court Security Officer	ACTIVE	06/13/2025
State's Attorney				
	ANDERS, TYLYN	Law Clerk	ACTIVE	06/02/2025
	POPE, DYLAN A	Intern	ACTIVE	06/16/2025
Transportation				
	COSTELLO, JESSICA MARIE C	ZZZNew ConstructionMgr-CE II/III	ACTIVE	06/23/2025
	WALCZAK, BRANDON M	Highway Maintainer I	ACTIVE	06/09/2025
		Highway Maintainer III	ACTIVE	06/09/2025

Total New Hires 17

Termination Report
from 06/01/2025 - 06/30/2025

Department		
Employee Name		Termination Date
Circuit Clerk		
BRUENS, MICHELE L		06/20/25
Community Reinvestment		
BECK, JOSHUA		06/04/25
WEILER, CHERYL A		06/02/25
Regional Office of Education		
MANDOZA, DANIELLE R		06/13/25
Treasurer/Collector		
LLOYD, COOPER J		06/13/25
Total Terminations 5		

Reasons Employees Left Kane County
6/1/2024-5/31/2025



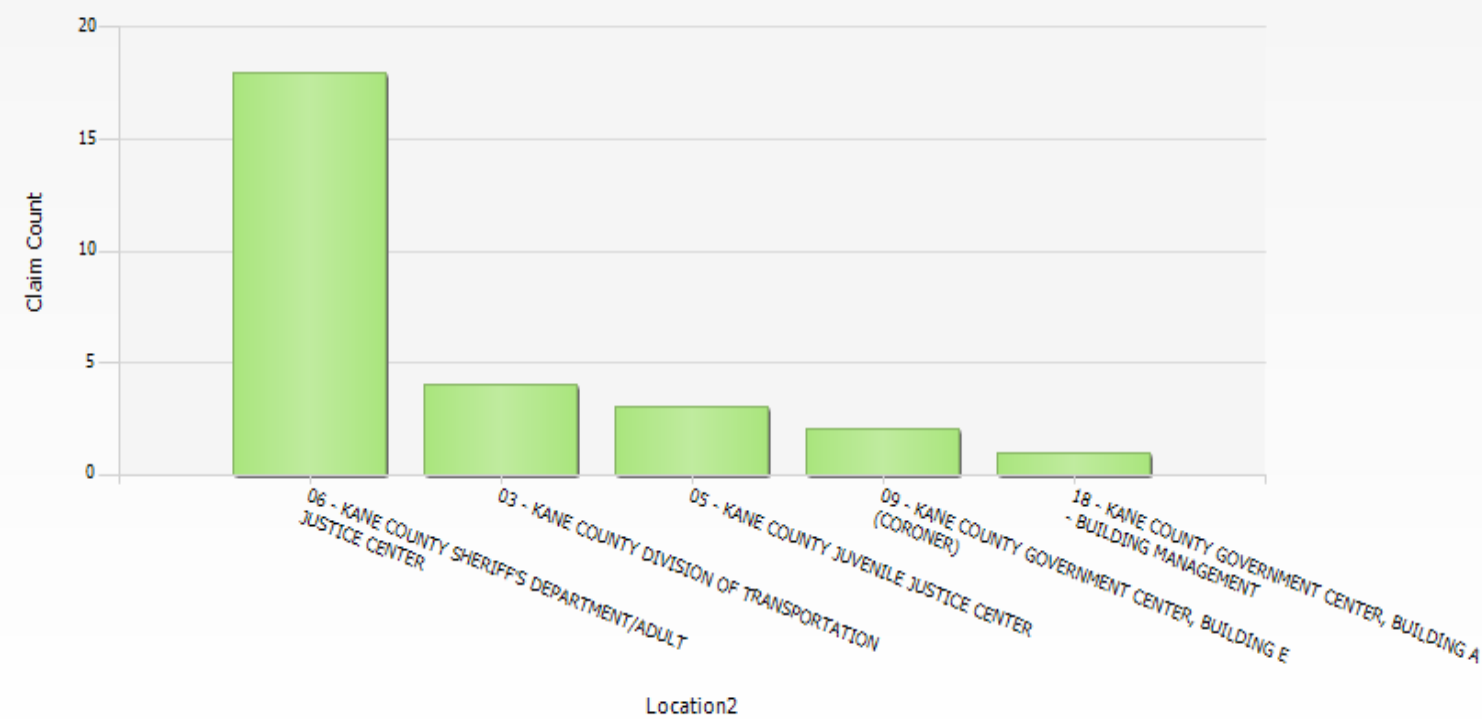
STATE OF ILLINOIS)
COUNTY OF KANE) SS.

REPORT NO. TMP-25-805
MONTHLY WORKERS COMP AND LIABILITY

Kane County Top 5 Locations where the most incidents have occurred 12/01/24-11/30/25 as of 05/31/25

Location2	Claim Count	Total Paid	Outstanding Reserves	Recovery	Total Incurred	Total Reimburs	Net Incurred	Cost Per Claim	% of Freq	% Of Incur
06 - KANE COUNTY SHERIFF'S DEPARTMENT/ADULT JUSTICE CENTER	18	\$50,734.33	\$181,966.40	\$0.00	\$232,700.73	\$0.00	\$232,700.73	\$12,927.82	56%	66%
03 - KANE COUNTY DIVISION OF TRANSPORTATION	4	\$9,479.08	\$12,251.31	\$0.00	\$21,730.39	\$0.00	\$21,730.39	\$5,432.60	13%	6%
05 - KANE COUNTY JUVENILE JUSTICE CENTER	3	\$2,024.20	\$2,400.00	\$0.00	\$4,424.20	\$0.00	\$4,424.20	\$1,474.73	9%	1%
09 - KANE COUNTY GOVERNMENT CENTER, BUILDING E (CORONER)	2	\$6,625.42	\$44,181.93	\$0.00	\$50,807.35	\$0.00	\$50,807.35	\$25,403.68	6%	14%
18 - KANE COUNTY GOVERNMENT CENTER, BUILDING A - BUILDING MANAGEMENT	1	\$1,141.76	\$0.00	\$0.00	\$1,141.76	\$0.00	\$1,141.76	\$1,141.76	3%	0%

Summary by Location2 Ordered by Claim Count in Descending Order



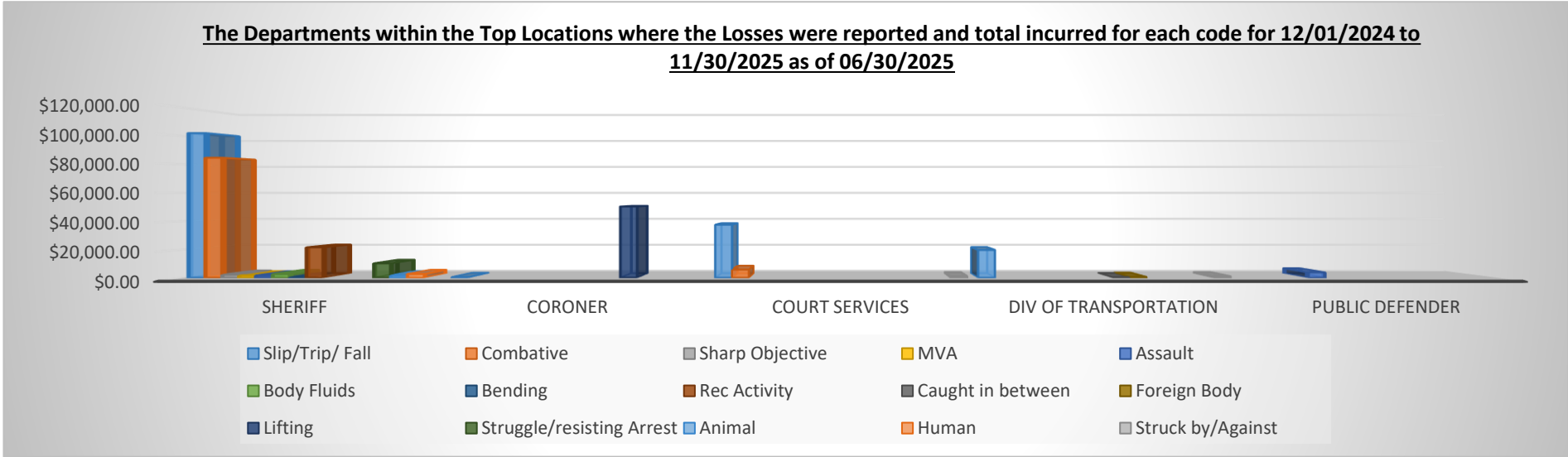
Kane County Worker's Compensation trend from the 3 policy periods (12/01/22-11/30/25), in descending order by total incurred as of 06/30/2025

Policy Period	Claim Count	Total Paid	Outstanding Reserves	Recovery	Total Incurred	Total Reimbursement	Net Incurred	Cost Per Claim	% of Freq	% Of Incur
Dec 1 2022 12:00AM - Nov 30 2023 11:59PM	70	\$1,267,108.86	\$580,248.99	\$0.00	\$1,847,357.85	\$10,771.94	\$1,836,585.91	\$26,390.83	40%	65%
Dec 1 2023 12:00AM - Nov 30 2024 11:59PM	73	\$417,736.91	\$238,875.47	\$0.00	\$656,612.38	\$0.00	\$656,612.38	\$8,994.69	42%	23%
Dec 1 2024 12:00AM - Nov 30 2025 11:59PM	32	\$98,183.80	\$256,924.01	\$0.00	\$355,107.81	\$0.00	\$355,107.81	\$11,097.12	18%	12%



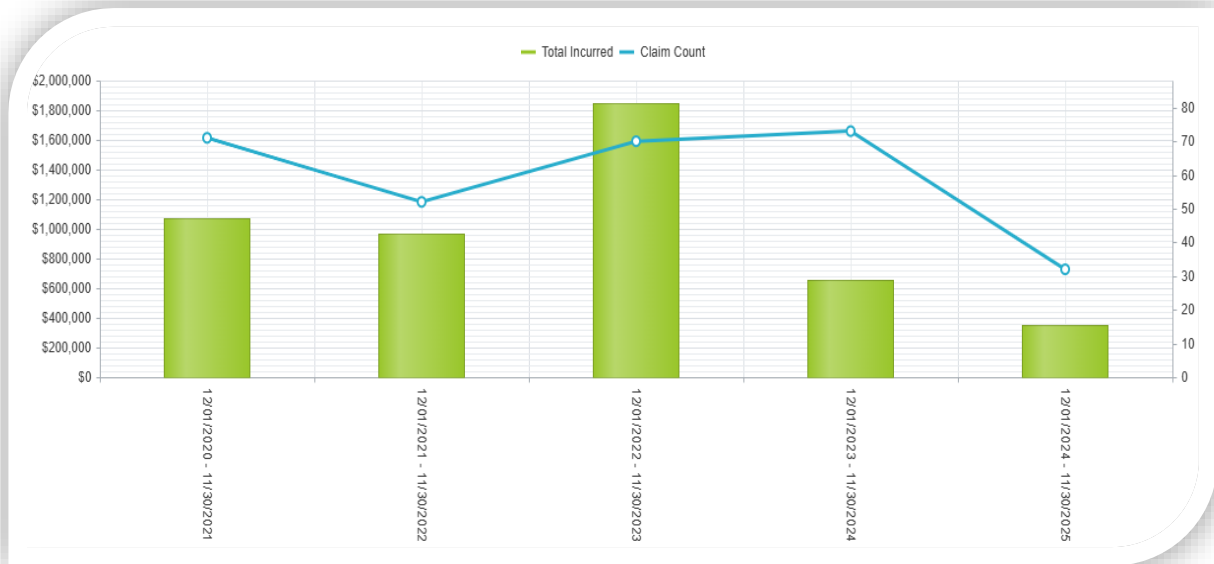
The Departments within the 5 Top Locations where the losses were reported and the Total incurred for each cause code from 12/01/2024 -11/30/2025 as of 06/30/2025

Departments	Slip/Trip/ Fall	Combative	Sharp Objective	MVA	Assault	Body Fluids	Bending	Rec Activity	Caught in between	Foreign Body	Lifting	Struggle/re sisting Arrest	Animal	Human	Struck by/Against
Sheriff	\$102,151.06	\$84,729.38	\$2,153.37	\$1,650.00	\$1,650.00	\$2,650.00	\$319.92	\$21,526.00				\$10,200.00	\$1,650.00	\$2,671.00	
Coroner	\$485.19										\$50,322.16				
Court Services	\$37,438.32	\$5,774.20													\$1,100.00
Div of Transportation	\$19,663.43								\$360.73	\$606.23					\$1,100.00
Public Defender					\$3,850.00										



Departments	Count	Total Incurred
Sheriff	17	\$231,350.73
Coroner	2	\$50,807.35
Court Services	5	\$43,212.52
Div of Transp	4	\$21,730.39
Public Defender	1	\$3,850.00
Total	29	\$350,950.99

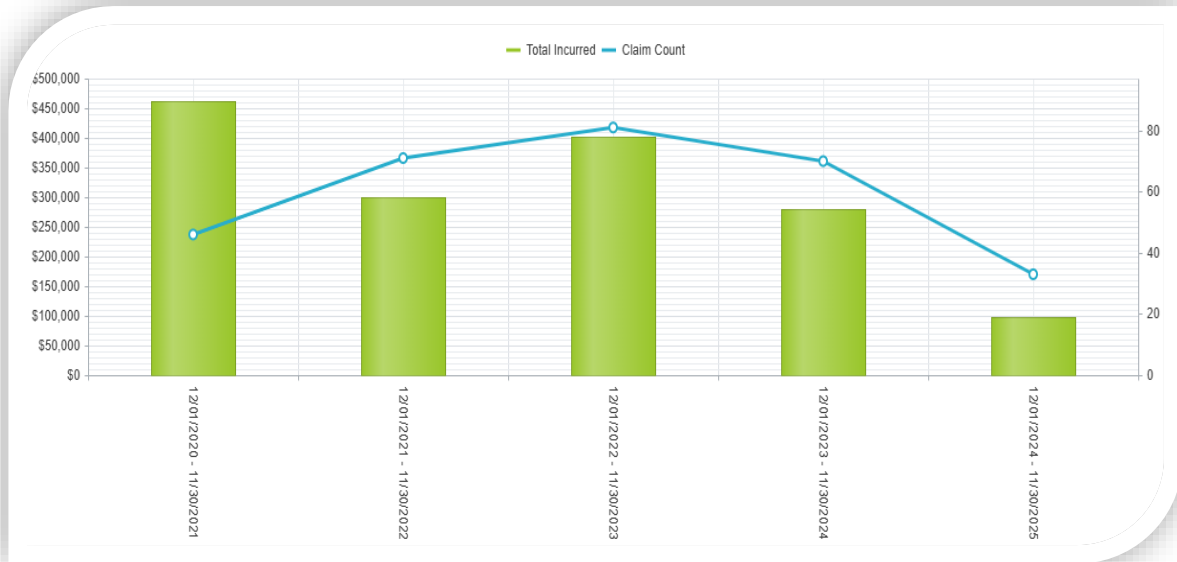
Executive Reports for Kane County Worker's Compensation Program for the last 4 years and the current year – By policy period and chronological order as of 06/30/2025



Policy Period	Paid	Out Reserve	Recovered	Total Incurred	Claim Count	Cost per Claim
12/01/2020 - 11/30/2021	\$1,077,023.96	\$21,256.41	\$23,736.71	\$1,074,543.66	71	\$15,134.42
12/01/2021 - 11/30/2022	\$725,763.14	\$248,577.53	\$8,647.62	\$965,693.05	52	\$18,571.02
12/01/2022 - 11/30/2023	\$1,267,108.86	\$580,248.99	\$0.00	\$1,847,357.85	70	\$26,390.83
12/01/2023 - 11/30/2024	\$417,736.91	\$238,875.47	\$0.00	\$656,612.38	73	\$8,994.69
12/01/2024 - 11/30/2025	\$98,183.80	\$256,924.01	\$0.00	\$355,107.81	32	\$11,097.12
Totals:	\$3,585,816.67	\$1,345,882.41	\$32,384.33	\$4,899,314.75	298	\$16,440.65

-Total incurred for the current policy period is \$355,107.81 with 32 claims reported. The average cost per claim is now \$11,097.12. These claims will continue to develop along with new claims reported.

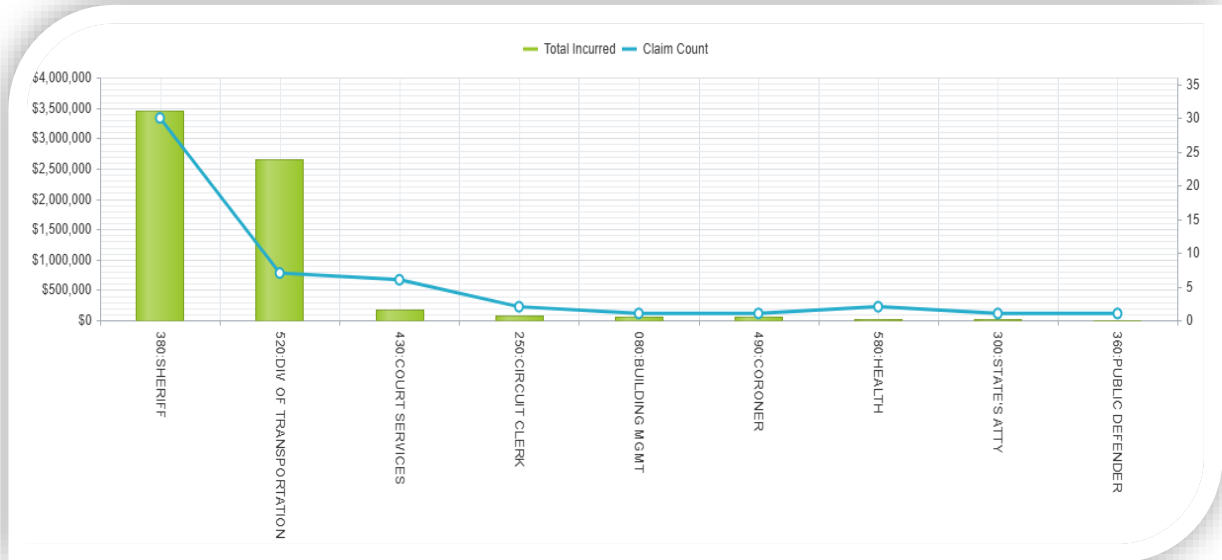
Executive Report for Kane County Liability Program for the last 4 years and the current year-By policy period and chronological order as of 06/30/2025



Policy Period	Paid	Out Reserve	Recovered	Total Incurred	Claim Count	Cost per Claim
12/01/2020 - 11/30/2021	\$568,839.04	\$58,000.00	\$163,936.41	\$462,902.63	46	\$10,063.10
12/01/2021 - 11/30/2022	\$471,241.67	\$5,000.00	\$175,380.39	\$300,861.28	71	\$4,237.48
12/01/2022 - 11/30/2023	\$605,598.43	\$68,357.59	\$272,745.04	\$401,210.98	81	\$4,953.22
12/01/2023 - 11/30/2024	\$383,398.31	\$41,538.51	\$145,570.71	\$279,366.11	70	\$3,990.94
12/01/2024 - 11/30/2025	\$99,984.76	\$44,658.02	\$46,847.46	\$97,795.32	33	\$2,963.49
Totals:	\$2,129,062.21	\$217,554.12	\$804,480.01	\$1,542,136.32	301	\$5,123.38

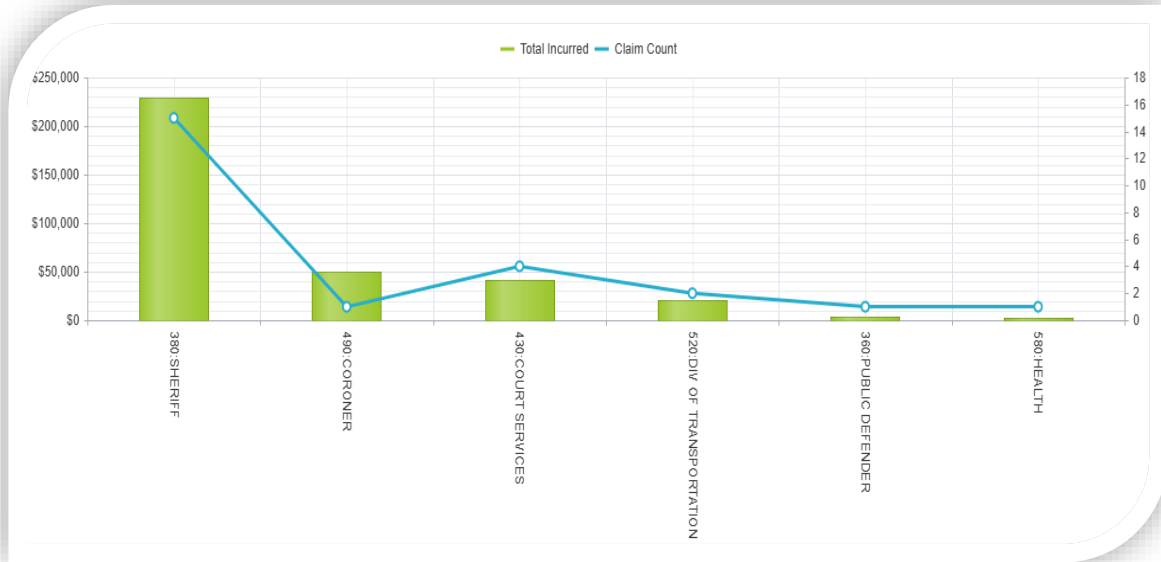
- The total incurred for the current policy period is \$97,795.32 with 33 claims reported for the current period and that will change upon receipt of additional information. Average cost per claim is \$2,963.49 for the current policy period.

All open Worker's Compensation Claims for Kane County as of 06/30/2025 with the oldest date of injury to be 06/15/2000 by Department



Departments	Paid	Out Reserve	Recovered	Total Incurred	Claim Count	Cost per Claim
380:SHERIFF	\$2,061,475.76	\$1,387,352.35	\$0.00	\$3,448,828.11	30	\$114,960.94
520:DIV OF TRANSPORTATION	\$1,581,209.26	\$1,080,736.40	\$0.00	\$2,661,945.66	7	\$380,277.95
430:COURT SERVICES	\$135,077.55	\$34,784.31	\$0.00	\$169,861.86	6	\$28,310.31
250:CIRCUIT CLERK	\$26,311.79	\$42,390.92	\$0.00	\$68,702.71	2	\$34,351.36
080:BUILDING MGMT	\$13,617.06	\$42,111.94	\$0.00	\$55,729.00	1	\$55,729.00
490:CORONER	\$6,140.23	\$44,181.93	\$0.00	\$50,322.16	1	\$50,322.16
580:HEALTH	\$341.87	\$24,554.00	\$0.00	\$24,895.87	2	\$12,447.94
300:STATE'S ATTY	\$15,140.30	\$246.07	\$0.00	\$15,386.37	1	\$15,386.37
360:PUBLIC DEFENDER	\$189.16	\$3,660.84	\$0.00	\$3,850.00	1	\$3,850.00
Totals:	\$3,839,502.98	\$2,660,018.76	\$0.00	\$6,499,521.74	51	\$127,441.60

Open Worker's Compensation Claims that occurred from 12/01/2024 to 11/30/2025 as of 06/30/25



Departments	Paid	Out Reserve	Recovered	Total Incurred	Claim Count	Cost per Claim
380:SHERIFF	\$48,261.04	\$180,616.40	\$0.00	\$228,877.44	15	\$15,258.50
490:CORONER	\$6,140.23	\$44,181.93	\$0.00	\$50,322.16	1	\$50,322.16
430:COURT SERVICES	\$27,730.79	\$13,507.53	\$0.00	\$41,238.32	4	\$10,309.58
520:DIV OF TRANSPORTATION	\$8,512.12	\$12,251.31	\$0.00	\$20,763.43	2	\$10,381.72
360:PUBLIC DEFENDER	\$189.16	\$3,660.84	\$0.00	\$3,850.00	1	\$3,850.00
580:HEALTH	\$45.00	\$2,706.00	\$0.00	\$2,751.00	1	\$2,751.00
Totals:	\$90,878.34	\$256,924.01	\$0.00	\$347,802.35	24	\$14,491.76

STATE OF ILLINOIS)

SS.

COUNTY OF KANE)

REPORT NO. TMP-25-806

MONTHLY TRAINING REPORT

Sexual Harassment Training Compliance 7/2/2025					
Type of Training Delivered	Training Title	Source of Training	Departments invited	Total number of attendees	Deadline
Webinar	Prevention of Sexual Harassment at work - Employee	Illinois Chamber of Commerce	All	1178	08.31.2025
Webinar	Prevention of Sexual Harassment at work - Manager/Elected Official	Illinois Chamber of Commerce	All	209	08.31.2025
Active Employees: 1329					



RESOLUTION / ORDINANCE EXECUTIVE SUMMARY ADDENDUM

Title

Authorizing Contract Extension for Workers Compensation and Liability Claims Third Party Administrator

Committee Flow:

Human Services Committee, Executive Committee, County Board

Contact:

Jamie Lobrillo, 630.208.3836

Budget Information:

Was this item budgeted? N/A	Appropriation Amount: \$75,500
If not budgeted, explain funding source: N/A	
Was this item passed through the appropriate committee? Yes	

Summary:

This resolution authorizes a contract extension with Cannon Cochran Management Services, Inc. CCMSI to provide third party claims administration services for all lines of commercial insurance claims including property, casualty, general liability, automobile and workers compensation at a cost of Seventy Five Thousand Five Hundred (\$75,500) for one year.

SERVICE AGREEMENT BETWEEN
County of Kane AND
CANNON COCHRAN MANAGEMENT SERVICES, INC.

THIS SERVICE AGREEMENT is made and entered into this 1st day of December, 2025, by and between County of Kane (the “Client”), an authorized self-insured entity, and Cannon Cochran Management Services, Inc. (“CCMSI”), a Delaware corporation. It is agreed between the parties hereto as follows:

A. APPOINTMENT OF CCMSI. The Client hereby appoints CCMSI, and CCMSI hereby agrees to serve, as Third Party Administrator (“Administrator”) of the Client’s self-insurance program created and existing under the State of Illinois (“State”) Self-Insurance Regulations.

B. FUNCTIONS OF CCMSI. During the term of this Agreement, the regular functions of CCMSI as the Client’s Administrator shall include the following:

1. Claim Administration.

(a) Claim Management and Administration. In compliance with its Best Practices, CCMSI will manage and administer all claims of the Client that occur during the period of this Agreement. All claim payments shall be made with Client funds. CCMSI will act on behalf of Client in handling, monitoring, investigating, overseeing and adjusting all such actual and alleged claims.

(b) Claim Settlement. CCMSI will settle claims of the Client with Client funds in accordance with reasonable limits and guidelines established with the Client.

(c) Claim Reserves. CCMSI will establish reserves for unpaid reported claims and unpaid claim expenses.

(d) Allocated Claim Expenses. CCMSI will pay, at market rates, all Allocated Claim Expenses with Client Funds. Allocated Claim Expenses are charges for services provided in connection with specific claims by persons or firms which are eligible claim expenses under the Client’s program. Notwithstanding the foregoing, Allocated Claim Expenses will include all expenses incurred in connection with the investigation, adjustment, settlement or defense of Client claims, even if such expenses are incurred by CCMSI. Allocated Claim Expenses will include, but not be limited to, charges for:

- 1) Independent medical examinations of claimants;
- 2) Managed care expenses, which include the services provided by comp mc™, CCMSI’s proprietary managed care program. Examples of managed care expenses includes but is not limited to state fee schedule, PPO net works, utilization review, nurse case management, medical bill audits and medical bill review;

- 3) Fraud detection expenses, such as surveillance, which include the services provided by *FIRE*, CCMSI's proprietary Special Investigation Unit (SIU), and other related expenses associated with the detection, reporting and prosecution of fraudulent claims, including legal fees;
- 4) Attorneys, experts and special process servers;
- 5) Court costs, fees, interest and expenses;
- 6) Depositions, court reporters and recorded statements;
- 7) Independent adjusters and appraisers;
- 8) Index bureau and OFAC (Office of Foreign Assets Control) charges;
- 9) MMSEA/SCHIP compliance charges; CCMSI, in conjunction with its reporting agent/MSP vendor, will comply with applicable MMSEA and Section 111 reporting requirements on behalf of the client. CCMSI will provide monthly Medicare eligibility query checks and quarterly mandatory insured reporting compliant with applicable CMS guidelines
- 10) Electronic Data Interchanges, EDI, charges if required by State law;
- 11) CCMSI personnel, at their customary rate or charge, but only with respect to claims outside the State and only if such customary rate is communicated to the Client prior to incurring such cost;
- 12) Actual reasonable expenses incurred by CCMSI employees outside the State for meals, travel, and lodging in conjunction with claim management;
- 13) Police, weather and fire report charges that are related to claims being administered under Client's program;
- 14) Charges associated with accident reconstruction, cause and origin investigations, etc.;
- 15) Charges for medical records, personnel documents, and other documents necessary for adjudication of claims under Client's program;
- 16) Charges associated with Medicare Set-Aside Allocations and other related MSP Services;
- 17) Legal bill review expenses, which include, the services provided by CLEAR, CCMSI's proprietary legal bill review program. This shall include charges related to legal bill review / audit, which shall include reviewing and auditing invoices submitted by Client-approved law firms for compliance with the Client's Defense Counsel Billing Guidelines.

18) Other expenses normally recognized as ALAE by industry standards.

(e) Subrogation. CCMSI will monitor claims for subrogation.

(f) Provision of Reports. CCMSI agrees to provide reports to the Client as specified in the Schedule of Reports attached hereto as Exhibit A.

2. Risk Management Services. CCMSI will provide the Client with additional Risk Management Services not contemplated in the Agreement upon mutual agreement of the parties. The Schedule of additional Risk Management Services to be provided is attached hereto as Exhibit B.

3. Loss Control Services. CCMSI will provide the Client loss control services upon mutual agreement of the parties. The client shall remain fully responsible for the implementation and operation of its own safety programs and for the detection and elimination of any unsafe conditions or practices.

CCMSI assumes no responsibility for the detection, identification, communication, mitigation, or elimination of any unsafe condition or practice associated with the safety program of any client. Further, CCMSI assumes no responsibility for any injury sustained by an employee of the client. The Schedule of Loss Control Services to be provided is attached hereto as Exhibit C.

4. Legal Bill Review / Audit Services. In conjunction with its claims administration services, CCMSI will provide Client with Legal Bill Review / Audit Services (CLEAR). The Schedule of Legal Bill Review / Audit Services, including applicable fees, is attached hereto as Exhibit E.

5. Managed Care Services. CCMSI will provide the Client with managed care services (comp mc™) upon mutual agreement of the parties. The Schedule of Managed Care Services to be provided is attached hereto as Exhibit D.

C. CLIENT RESPONSIBILITIES. Client agrees to:

1. Report all claims, incidents, reports or correspondence relating to potential claims in a timely manner.
2. Reasonably cooperate in the disposition of all claims.
3. Claim Funding.
 - a. Provide Funds in a timely manner to pay all claims and expenses. **If utilizing an escrow account**, provide Funds on a periodic basis as mutually agreed upon per the Quality Service Plan, claim handling instructions, or similar document if applicable. Funds shall include those required to pay all claims and expenses covered by insurance carriers or other parties. CCMSI will work with Client to obtain timely reimbursement of such covered payments from insurance carriers or other parties, but will not advance any such amounts.

- b. **If utilizing an escrow account**, provide Funds in an amount that maintains a Claim Deposit equal to one and a half (1.5) times the average total of claim and expense payments for the previous six (6) months, adjusted for funding frequency. The required Claim Deposit will be monitored and adjusted as necessary per this calculation. The Claim Deposit is the ultimate property of Client. CCMSI will return excess Funds to Client in a timely manner upon recalculation of Claim Deposit or termination of the Agreement.
 - c. **If utilizing an escrow account**, provide advance funding ("Prefunding") to pay all claim and expense transactions in excess of a mutually agreed upon amount per the Quality Service Plan, claim handling instructions, or similar document if applicable.
 - d. **If utilizing an escrow account**, provide all manner of Funds and Prefunding via Automated Clearing House (ACH) Electronic Funds Transfer (ETF).
- 4. Respond to reasonable information requests in a timely manner.
- 5. Identify in writing all insurance carriers applicable to CCMSI's claim handling responsibilities contemplated in this Service Agreement that CCMSI will have claim or data reporting requirements. In this regard, Client agrees to provide CCMSI with a complete copy of the current excess or other insurance policies, including applicable endorsements and audits, applicable to Client's insurance program and this Service Agreement. CCMSI assumes no responsibility of any kind for not reporting an otherwise reportable claim to any carrier that Client has failed to disclose to CCMSI and/or provide CCMSI with a copy of the applicable insurance policy and reporting instructions relative to that carrier.
- 6. When applicable, obtain and provide to CCMSI an active Registered Reporting Entity (RRE) number through the Centers of Medicare & Medicaid Services that CCMSI is explicitly authorized to use for mandatory MMSEA Section 111 reporting. When applicable, client agrees to maintain this RRE # by fulfilling CMS's annual recertification process.
- 7. Pay any fees or costs charged by any carrier or prior TPA of Client for the conversion of data associated with CCMSI handling run off claims for Client, or for the general transfer of data to CCMSI's operating systems.
- 8. Promptly pay CCMSI's fees.
- D. OPERATING EXPENSES.** The Client agrees to be responsible for and pay all of its own operating expenses other than service obligations of CCMSI. Such operating expenses shall include but not be limited to charges for the following:
 - 1. All costs associated with Client meeting its State security and licensing requirements;
 - 2. Certified Public Accountants
 - 3. Attorneys, other than provided for in Section B.1. (d) 3) and B.1. (d) 4) of this Agreement;

4. Outside consultants, actuarial services or studies and State audits;
5. Independent payroll audits;
6. Allocated Claims Expenses incurred pursuant to Section B. 1. (d) of this Agreement;
7. All applicable regulatory fees and taxes;
8. Educational and/or promotional material, industry-specific loss control material, customized forms and/or stationery, supplies and extraordinary postage, such as bulk mailing, express mail or messenger service.
9. National Council on Compensation Insurance, NCCI, charges;
10. Excess and other insurance premiums;
11. Costs associated with the development, record keeping and filing of fraud statistics and plans, but only if required by any State or regulatory authority having jurisdiction over Client;
12. Other operating costs as normally incurred by the Client.

E. BOOKS AND RECORDS.

1. (a) CCMSI shall maintain all claim information relating specifically to the Client which is necessary to the performance of CCMSI's obligations under this Agreement (the "Records"). The Records shall remain at all times the sole property of the Client.

(b) The Records shall not include any manuals, forms, files and reports, documents, customer lists, rights to solicit renewals, computer records and tapes, financial and strategic data, or information which documents CCMSI's processes, procedures and methods, or which CCMSI employs to administer programs other than the Client. The items specified in this Paragraph E. 1. (b) shall at all times be and remain the sole and exclusive property of CCMSI, and the Client shall not have any ownership, interest, right to duplicate or right to utilize these items except for the above documentation or information that relates solely to Client's Program.
2. During the term of this Agreement, CCMSI shall provide the Client with copies of the Records, if so requested by the Client. Any reasonable costs of reproduction of the Records shall be borne by the Client.
3. CCMSI shall make the Records available for inspection by any duly authorized representative of the Client, or any governmental or regulatory authority having jurisdiction over CCMSI or the Client.

F. NON-SOLICITATION OF EMPLOYEES. During the term of the Agreement and for two (2) years thereafter, the Client and CCMSI mutually agree not to recruit, solicit or hire any employee of the other without written permission.

G. OTHER INSURANCE. If CCMSI places any specific or aggregate excess insurance, reinsurance, or other insurance product associated with this Agreement, then customary commissions and fees will be retained by CCMSI.

H. TERM AND TERMINATION.

1. Term of Agreement. The first term of this Agreement shall be for three (3) years beginning on December 1, 2025_ and terminating on November 30, 2028. Unless the Agreement is terminated as set forth in paragraph H. 2., it will automatically renew for successive 3(1) year terms. At least ninety (90) days prior to the expiration of each three (3) year term of this Agreement, the parties shall enter into good-faith negotiations regarding any proposed change in Agreement terms or fees. If there are no changes requested by either party, then the Agreement will automatically renew under the same terms and fee arrangement as the prior term.
2. Termination of Agreement. This Agreement may be terminated:
 - (a) By mutual agreement of the parties hereto;
 - (b) Upon expiration of the current term of this Agreement if either party has given the other at least ninety (90) days written notice of its intention to terminate as set forth in paragraph H. 1.;
 - (c) Upon dissolution of the Client's self-insurance program whether voluntary or due to cessation of Client's authority to self-insure;
 - (d) Upon dissolution of the Client's self-insurance program due to Client insolvency or bankruptcy;
 - (e) Upon ninety (90) days written notice by either party if the other party is in material breach of any term, covenant or condition contained herein; provided, however, that as a condition precedent to termination under this Section H. 2. (e), the terminating party shall give written notice to the other party, who shall have sixty (60) days from the date of such notice to cure or correct the grounds for termination. If the grounds of termination are not corrected or cured during the sixty (60) day period, this Agreement may be terminated on the termination date specified in the notice, but not prior to the expiration of the ninety (90) day period described herein.
3. Services Following Termination of Agreement. Should this Agreement be terminated or non-renewed for any reason, CCMSI will cease providing services, turn over to the Client all Client files in CCMSI's possession, which shall include all open and closed files.

Upon the Client's request and subject to agreement by CCMSI, CCMSI will be paid a reasonable negotiated fee to:

- (a) Provide for continued administration of the open claim files;
- (b) Cooperate with any successor administrator in the orderly transfer of all functions, including providing a runoff listing of open claim files if desired by the Client and any other records reasonable and necessary for a successor administrator; and
- (c) Provide an electronic transfer of data if such is feasible, with the cost of providing such borne by the Client. The electronic transfer of data will be subject to a flat fee of \$2,500.

I. **SERVICE FEE PAYMENTS.** The Client shall pay to CCMSI a service fee as outlined in the Fee and Payment Schedule attached hereto as Exhibit F.

J. **ARBITRATION.** If an irreconcilable difference of opinion or claim should arise between the Client and CCMSI as the interpreters of any matter relating to this Agreement, such matter will be submitted to mediation or arbitration as the sole remedy available to both parties. Any such mediation or arbitration will take place in the City of Geneva, Illinois and will be conducted in accordance with the then-current rules of the American Arbitration Association.

K. **RELATIONSHIP OF PARTIES.** With respect to the services provided by CCMSI in this Agreement, CCMSI is considered an independent contractor. Nothing in this Agreement shall be construed to create a relationship of employer/employee, partners or joint ventures between the Client and CCMSI. This Agreement is non-exclusive, and CCMSI shall have the right to perform services on behalf of other individuals, firms, corporations and entities.

L. **INDEMNIFICATION.**

1. **Indemnification by Client.** The Client agrees that it will indemnify and hold harmless CCMSI and CCMSI's directors, officers, employees, agents, shareholders, subsidiaries and other affiliates from and against any and all claims, losses, liability, costs, damages and reasonable attorney's fees incurred by CCMSI as a result of breach of this Agreement by the Client, explicit instruction by the Client, or alleged misconduct, error or omissions by the Client, or by any of the Client's trustees, directors, officers, employees, agents, shareholders, subsidiaries, or other affiliates in connection with the performance of this Agreement. Agents as used herein include third party vendors selected by Client.
2. **Indemnification by CCMSI.** CCMSI agrees that it will indemnify and hold harmless the Client and the Client's trustees, directors, officers, employees, agents, shareholders, subsidiaries, members, or other affiliates from and against any and all claims, losses, liability, costs, damages and reasonable attorney's fees incurred by the Client as the result of breach of this Agreement by CCMSI or alleged misconduct, error or omissions by CCMSI, or by any of CCMSI's directors, officers, employees, agents, shareholders, subsidiaries or other affiliates in connection with the performance of this Agreement.

M. CHANGE IN CIRCUMSTANCES. In the event the adoption of any statute, rule or regulation materially changes the nature of the relationship between the parties hereto or the legal or economic premises upon which this Agreement is based, the parties hereto shall undertake good faith negotiations to amend the terms of this Agreement to account for such changes in a reasonable manner. This includes the happening or development of a local, regional, national or global health situation, crisis, pandemic, or catastrophic event that would impact the volume and type of claims to be administered by CCMSI under this Agreement. In the event of any such occurrence, either party may contact the other in good faith and seek to amend the terms and / or service fees applicable to this Agreement.

N. SOFTWARE ACCESS. The Client may be provided with the right to use one or more CCMSI Applications in connection with the services provided by CCMSI in this Agreement. CCMSI Applications include iCE, MyReports, Loss Control ASAP, Loss Control Resources and iCEBAR. The right to use CCMSI Applications is non-exclusive, limited to the term of this Agreement per paragraph H.1., non-transferable and is solely for the internal business use of Client.

CCMSI owns and reserves all rights, title, and interest in and to the CCMSI Applications. Client has no right to receive a copy of the object code or source code to the CCMSI Applications. Client may not attempt to:

1. License, sell, lease or otherwise make the CCMSI Applications available to any other party. Client will not provide any access, passwords or other information regarding the CCMSI Applications to any third parties and/or competitors of CCMSI without the prior written consent of CCMSI;
2. Use the CCMSI Applications in any way that violates any law, regulation or mandate, or the term of this Agreement; or
3. Take any action that jeopardizes confidential or proprietary information held by CCMSI.

Client is responsible for any confidential or proprietary information accessed or downloaded by Client from the CCMSI Applications, including the implementation of appropriate information security controls surrounding such information.

Except as expressly provided in this Agreement, CCMSI Applications are provided "as-is". CCMSI disclaims all other warranties, express, implied, or statutory, including the implied warranties or merchantability, satisfactory quality, title, fitness for a particular purpose, non-infringement, compatibility, security, quiet enjoyment, or accuracy. Without limiting the foregoing, CCMSI does not warrant that access to or use of the CCMSI Applications will be uninterrupted or error-free. CCMSI will provide support for the CCMSI Applications in the two most recent two versions of the Internet Explorer, Chrome, Firefox and Safari browsers.

O. MISCELLANEOUS.

1. Governing Law. This Agreement shall be governed by and construed in accordance with the internal laws of the State of Illinois without regard to principles of conflicts of law.
2. Timing of Services. CCMSI may exercise its own reasonable judgment, within the parameters set forth herein and in compliance with State regulations, as to the time and manner in which it

performs the services required hereunder. Additionally, CCMSI will be held to a standard of like administrators performing like services for customers such as Client.

3. Successors in Interest. This Agreement shall be binding upon, and inure to the benefit of, the successors in interest and permitted assigns of the parties hereto.
4. Severability. The invalidity or unenforceability of any particular provision of this Agreement shall not affect the other provisions hereof, and this Agreement shall be construed in all respects as if the invalid or unenforceable provision had been revised to the minimum extent necessary to make it valid and fully enforceable under applicable law.
5. Paragraph Headings. All paragraph headings in this Agreement are for reference purposes only and shall not affect in any way the meaning or interpretation of this Agreement.
6. Waiver. The failure of any party to enforce any provisions of this Agreement shall not constitute a waiver by such party of any provision. A past waiver of a provision by either party shall not constitute a course of conduct or a waiver in the future with respect to that same provision.
7. Notice Provision. All notices, requests and other communications required under this Agreement shall be in writing and delivered by hand or mailed, registered or certified, return receipt requested, postage paid, or sent via a nationally recognized overnight courier to the other party at the following address:

Client:
Jamie Loblillo
County of Kane
719 S. Batavia Building A 3rd Floor
Geneva, IL 60134

CCMSI:
Cannon Cochran Management Services, Inc.
2 E. Main St.
Danville, IL 61832
Attn: Chief Financial Officer

8. File Destruction Policy. CCMSI will maintain electronic claim file records or hard copy files (where applicable) on all closed files on behalf of Client for a period of fifteen (15) years after the month of closure, or for as long as necessary to protect the applicable statute of limitations, whichever is longer. It is the sole responsibility of Client to advise CCMSI if files are not to be destroyed per this policy.
9. Insurance. CCMSI will purchase and maintain insurance coverages for its performance of the services contemplated in this Agreement. Minimum policy limits are as follows:

Workers Compensation – Statutory
Professional - \$5,000,000
General Liability - \$1,000,000 / \$2,000,000
Umbrella - \$5,000,000
Cyber Coverage - \$5,000,000

10. Escheatment. CCMSI is responsible for complying with all applicable abandoned property or escheat laws, making any required payments, and filing any required reports on CCMSI escrow accounts.
11. Confidential Information. Confidential Information includes nonpublic information that is exchanged between the Client and CCMSI, including, without limitation, information relating to the business, financials, personnel, customer data and operating procedures. Confidential Information includes information whether in written, electronic, or oral form created and relating to services provided under the Agreement. All Confidential Information is proprietary. Client and CCMSI may use the other party's Confidential Information only for the purpose of this Agreement and will limit its disclosure to only those persons reasonably necessary to perform under the Agreement. CCMSI will share non-personal bulk claim data with the IDS National Database unless the Client directs otherwise.
12. Information Security. CCMSI is responsible for the protection of the confidentiality, availability, privacy and integrity of Client information in our custody. CCMSI has implemented an Information Security Policy that has been developed to comply with applicable federal and state laws or regulations and industry best practices. The Information Security Policy applies to all CCMSI personnel, including temporary employees, independent contractors and vendors with access to CCMSI systems.
13. Entire Agreement/Amendment. This Agreement sets forth the full and final understanding of the parties hereto with respect to the matters described herein, and supersedes any and all prior agreements and understandings between them, whether written or oral. This Agreement may be amended only by written document executed by the Client and CCMSI.

Executed this ____ day of _____, 20__.

CANNON COCHRAN MANAGEMENT SERVICES, INC.

By: _____
John E. Kluth II

Its: Chief Financial Officer

County of Kane

By: _____

Its: _____

EXHIBIT A

SCHEDULE OF REPORTS

1. A detailed listing of all claims broken down by location, policy year and line of coverage. (MONTHLY)
2. A summary of all claims broken down by location, policy year and line of coverage. (MONTHLY)
3. A check register listing all checks issued during a reporting period. (MONTHLY)

EXHIBIT B

SCHEDULE OF RISK MANAGEMENT SERVICES

None to Be Provided.

EXHIBIT C

SCHEDULE OF LOSS CONTROL SERVICES

None to be provided.

CCMSI will provide the Client loss control services upon mutual agreement of the parties. The client shall remain fully responsible for the implementation and operation of its own safety programs and for the detection and elimination of any unsafe conditions or practices.

CCMSI assumes no responsibility for the detection, identification, communication, mitigation, or elimination of any unsafe condition or practice associated with the safety program of any client. Further, CCMSI assumes no responsibility for any injury sustained by an employee of the client.

EXHIBIT D

SCHEDULE OF comp mc TM & comp mc TM SERVICES AND FEES

Provider Bill Re-pricing

<i>Service</i>	<i>Fee</i>
Usual and Customary re-pricing	\$10.00 per bill
Fee Schedule state re-pricing	\$10.00 per bill
Medical Bill State Reporting for applicable medical bills to reportable state	\$1.50 per reportable bill

PPO Re-pricing / Out of Network Negotiations

PPO re-pricing / Specialty and Hospital bill negotiation is billed at 33% of savings
--

Pharmacy Network Services

Pharmacy Network services are priced at 33% of savings.

EXHIBIT E

SCHEDULE OF CLEAR SERVICES AND FEES

Service	Description	Service Fee
Legal Bill Review / Audit Services	Review and audit all legal invoices submitted by Client-approved law firms for adjudication in compliance with Client's Defense Counsel Billing Guidelines and Generally Accepted Legal Billing Principles.	PAID TO BOTTOMLINE TECHNOLOGIES, INC. 1.95% of the gross monetary total of each invoice submitted and audited (inclusive of law firm fees, costs and disbursements).
Management Fee for administration of Legal Bill Review Program, administration and integration of data reporting and data transfer, development and delivery of Performance Reports, and maintenance of technology interface	Integration and interface of legal bill review / audit software with CCMSI's claim system necessary to review and adjudicate legal invoices electronically. Periodic standard reports will be developed and produced summarizing Program's overall savings results. Metrics will be applied to analyze the overall performance of law firms. A Bill Analysis Report (BAR) will be generated for each legal invoice reviewed. The BAR will be included with each check to the appropriate law firm and include details and supporting documentation for any deductions applied to the original billing.	PAID TO CCMSI 0.25% of the gross monetary total of each invoice submitted and audited (inclusive of law firm fees, costs and disbursements).

Note: Fees relative to legal bill review services will appear on the transaction register payable to "CLEAR", CCMSI's proprietary legal bill review program.

Guarantee: If Legal Bill Review savings achieved for Client is less than the 2.20% total service fee incurred on an annual basis, the Client will be refunded the difference between the service fee incurred and the amount actually saved on invoices. Therefore, service fees will never exceed the savings achieved for Client on an annual basis. Bottomline Technologies, Inc. and CCMSI service fees are paid as ALAE to the applicable claim file as described in section B. 1.(d)17) of this Agreement.

EXHIBIT F

FEE AND PAYMENT SCHEDULE

Service Agreement Term: 12/01/2025-11/30/2028																																																																						
Services:			Fees:																																																																			
Claims Administration (minimum)	1st Year		\$60,000																																																																			
	2nd Year		\$63,000																																																																			
	3rd Year		\$66,000																																																																			
<p>CCMSI will manage all workers' compensation, and Liability claims for the Life of Agreement for the minimum annual fee as follows:</p> <p>Claims will be analyzed by the number and type of claim on an on-going basis and priced on a per claim basis as outlined below.</p> <table border="1" data-bbox="186 703 1250 1423"> <thead> <tr> <th rowspan="2">Claim Type</th><th colspan="3">Price per claim by Coverage</th></tr> <tr> <th>1st year</th><th>2nd year</th><th>3rd Year</th></tr> </thead> <tbody> <tr><td>Indemnity</td><td>\$1,113.00</td><td>\$1,146.00</td><td>\$1,180.00</td></tr> <tr><td>Medical Only</td><td>\$195.00</td><td>\$200.00</td><td>\$206.00</td></tr> <tr><td>General Liability Bodily Injury</td><td>\$980.00</td><td>\$1,009.00</td><td>\$1,039.00</td></tr> <tr><td>General Liability Property Damage</td><td>\$515.00</td><td>\$530.00</td><td>\$546.00</td></tr> <tr><td>Auto Liability Bodily Injury</td><td>\$980.00</td><td>\$1,009.00</td><td>\$1,039.00</td></tr> <tr><td>Auto Liability Property Damage</td><td>\$515.00</td><td>\$530.00</td><td>\$546.00</td></tr> <tr><td>Auto Property Damage</td><td>\$515.00</td><td>\$530.00</td><td>\$546.00</td></tr> <tr><td>Errors and Omissions</td><td>\$1,135.00</td><td>\$1,169.00</td><td>\$1,204.00</td></tr> <tr><td>Employment Practices</td><td>\$1,135.00</td><td>\$1,169.00</td><td>\$1,204.00</td></tr> <tr><td>FPPC - First Party Property</td><td>\$515.00</td><td>\$530.00</td><td>\$545.00</td></tr> <tr><td>Boiler and Machinery</td><td>\$515.00</td><td>\$530.00</td><td>\$545.00</td></tr> <tr><td>Law Enforcement</td><td>\$1,135.00</td><td>\$1,169.00</td><td>\$1,204.00</td></tr> <tr><td>Public Office Liability</td><td>\$1,135.00</td><td>\$1,169.00</td><td>\$1,204.00</td></tr> <tr><td>Auto Underinsured/AUIM</td><td>\$980.00</td><td>\$1,009.00</td><td>\$1,039.00</td></tr> <tr><td>Incident Only</td><td>\$40.00</td><td>\$41.00</td><td>\$42.00</td></tr> </tbody> </table> <p>There will be a 3% fee increase to claim fees only per year (this does not include the Complex/Enhanced medical only surcharge fee).</p> <p>Complex/Enhanced medical only claim surcharge - \$350/per claim</p> <p><u>Workers' Compensation Claim Definitions</u></p> <ul style="list-style-type: none"> ▪ Indemnity Claims – Claims involving lost-time, questionable compensability, legal involvement/client attorney representation, subrogation, second injury fund, probable permanent impairment, jurisdictional issues, coverage issues and complex medical issues that are assigned or transferred to indemnity adjusters for claims handling. 				Claim Type	Price per claim by Coverage			1st year	2nd year	3rd Year	Indemnity	\$1,113.00	\$1,146.00	\$1,180.00	Medical Only	\$195.00	\$200.00	\$206.00	General Liability Bodily Injury	\$980.00	\$1,009.00	\$1,039.00	General Liability Property Damage	\$515.00	\$530.00	\$546.00	Auto Liability Bodily Injury	\$980.00	\$1,009.00	\$1,039.00	Auto Liability Property Damage	\$515.00	\$530.00	\$546.00	Auto Property Damage	\$515.00	\$530.00	\$546.00	Errors and Omissions	\$1,135.00	\$1,169.00	\$1,204.00	Employment Practices	\$1,135.00	\$1,169.00	\$1,204.00	FPPC - First Party Property	\$515.00	\$530.00	\$545.00	Boiler and Machinery	\$515.00	\$530.00	\$545.00	Law Enforcement	\$1,135.00	\$1,169.00	\$1,204.00	Public Office Liability	\$1,135.00	\$1,169.00	\$1,204.00	Auto Underinsured/AUIM	\$980.00	\$1,009.00	\$1,039.00	Incident Only	\$40.00	\$41.00	\$42.00
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<ul style="list-style-type: none"> ▪ Medical Only Claims – Claims which have no issues of lost time, no evidence of other indemnity benefit exposure, no obvious question of compensability, no evidence of potential subrogation or second injury recovery, no evidence of problematic medical issues and no requirement or need for any formal statements (3-point or 2-point verbal contact is not required). ▪ Complex/Enhanced Medical Only – Medical only claims that have 6 or more paid medical transactions and total paid dollars greater than \$2,500. ▪ Report Only/Incident Only Claims – Reported claims which require only input into RMIS system and requires no claims management activity. 	
Take-Over Claims	As Outlined
<p>CCMSI will continue to manage all open workers compensation take over claims with a date of loss prior to 12/1/11 for the life of this agreement for a per claim fee as follows:</p> <p>\$45.00/per claim per month, for the handling for 12 months or any portion thereof. There are currently 2 open claims and the annual fees = \$1,080.00</p>	
Annual Administration Fee	\$10,000
<ul style="list-style-type: none"> • Designated client service team • Development of specific client service requirements • Monthly loss reporting • Quarterly claim reviews at client's request • Issuance of 1099's • Assistance in filing of all required state forms including state mandated assessments <ul style="list-style-type: none"> ○ If Client has directed CCMSI to utilize a third party vendor selected by Client for the provision of services then such assistance will be the responsibility of the third party vendor • Preparation for, compliance with and response to regulatory audits • Account Management and Administration 	
OSHA Reporting Module	\$3,000
<ul style="list-style-type: none"> • On-Line access to OSHA recordkeeping program • Data will be maintained by (Kane County) • Unlimited OSHA logs and summaries • Ability to electronically upload OSHA forms 	
Annual Internet Claim Access Fees	\$2,500
<p><u>Internet claims system access which includes:</u></p> <ul style="list-style-type: none"> • Viewing access to all claims data • Risk Management statistical analysis • Comprehensive and complete access to claims management process • On-line reports 	

<ul style="list-style-type: none">On-line reporting capability via the internetAbility to generate First Notice of Loss													
Managed Care Service Fees	See Detail												
<div>Provider Bill Re-pricing<table><tr><th>Service</th><th>Fee</th></tr><tr><td></td><td></td></tr><tr><td>Usual and Customary re-pricing</td><td>\$10.00 per bill</td></tr><tr><td>Fee Schedule state re-pricing</td><td>\$10.00 per bill</td></tr><tr><td>Medical Bill State Reporting for applicable medical bills to reportable state</td><td>\$1.50 per reportable bill</td></tr></table></div> <div>PPO Re-pricing / Out of Network Negotiations<table><tr><td>PPO re-pricing / Specialty and Hospital bill negotiation is billed at 33% of savings</td></tr></table></div> <div>Pharmacy Network Services<table><tr><td>Pharmacy Network services are priced at 33% of savings.</td></tr></table></div>	Service	Fee			Usual and Customary re-pricing	\$10.00 per bill	Fee Schedule state re-pricing	\$10.00 per bill	Medical Bill State Reporting for applicable medical bills to reportable state	\$1.50 per reportable bill	PPO re-pricing / Specialty and Hospital bill negotiation is billed at 33% of savings	Pharmacy Network services are priced at 33% of savings.	
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Medical Bill State Reporting for applicable medical bills to reportable state	\$1.50 per reportable bill												
PPO re-pricing / Specialty and Hospital bill negotiation is billed at 33% of savings													
Pharmacy Network services are priced at 33% of savings.													
State Reporting EDI Fees	Current Market Rate												
Index Bureau <p>Note: The index fee is a direct pass through charge for ISO. If ISO increases their current market rate per index, CCMSI will adjust the fee accordingly.</p>	Current ISO Market Rate												
Subrogation Fee	20% of Recovery												
20% of recovery with a cap of \$50,000 per claim.													
Mandatory MMSEA Compliance Section 111 Reporting Fee	Current Market Rate												
CCMSI, in conjunction with its reporting agent / MSP Vendor, will comply with applicable MMSEA and Section 111 reporting requirements on behalf of County of Kane. <ul style="list-style-type: none">All qualifying injury claims will be queried to CMS to determine Medicare eligibility.CCMSI will collect additional mandatory data on claims where Medicare eligibility has been verified. CCMSI, along with its reporting agent, will report all claims meeting the reporting guidelines as set forth by CMS.CCMSI will provide ongoing monthly Medicare eligibility query checks and continued quarterly mandatory insured-reporting compliant with applicable CMS guidelines. <p><u>Note:</u> In order for CCMSI and its reporting agent to comply with mandatory Section 111 reporting, the client must provide CCMSI an active RRE # wherein CCMSI is explicitly authorized to report data on the client’s behalf.</p>													

Carrier Fees		TBD									
If applicable, Client will be responsible for payment of any carrier fees associated with the transition of claim handling responsibilities to CCMSI.											
Special System Reports		\$125 an hour									
CCMSI will provide special reports, (reports not currently programmed or written) for a fee of \$125 per hour for system programming time. CCMSI will provide an estimate of charges before any work will be done.											
Taxes		See Detail									
CCMSI fees will be increased by any applicable Sales, Gross Receipts, or similar (excluding income) taxes imposed by Federal, State or Local bodies.											
GRAND TOTAL	1st year 2nd year 3rd year	\$75,500 \$78,500 \$81,500									
Fee & Payment Schedule											
<p>The quarterly installments will be due on the first day of December 2025, 2026 & 2027, March 2026, 2027, & 2028, June 2026, 2027, & 2028, and September 2026, 2027, & 2028 of each policy period.</p> <p>Quarterly amounts as follows:</p> <table border="1"> <thead> <tr> <th colspan="3">Quarterly Installment</th></tr> <tr> <th>1st year</th><th>2nd year</th><th>3rd Year</th></tr> </thead> <tbody> <tr> <td>\$18,875.00</td><td>\$19,625.00</td><td>\$20,375.00</td></tr> </tbody> </table> <p>Takeover claims (2 are open at \$270.00 per quarter) will be billed quarterly on the first day of December 2025, 2026 & 2027, March 2026, 2027, & 2028, June 2026, 2027, & 2028, and September 2026, 2027, & 2028 of each policy period.</p> <p>Subsequent year service fees shall be subject to an annual 3% increase as previously indicated in Exhibit F.</p>			Quarterly Installment			1st year	2nd year	3rd Year	\$18,875.00	\$19,625.00	\$20,375.00
Quarterly Installment											
1st year	2nd year	3rd Year									
\$18,875.00	\$19,625.00	\$20,375.00									

Executed this ____ day of _____, 20__.

CANNON COCHRAN MANAGEMENT SERVICES, INC.

By: _____
John E. Kluth II

Its: Chief Financial Officer

County of Kane

By: _____

Its: _____

STATE OF ILLINOIS)

SS.

COUNTY OF KANE)

RESOLUTION NO. TMP-25-823

APPROVING THE 2026 HOLIDAY SCHEDULE FOR KANE COUNTY OFFICES

WHEREAS, the proposed 2026 Holiday Schedule for County Offices is attached; and

WHEREAS, the proposed calendar mirrors the calendar adopted by the Chief Judge for the Sixteenth Judicial Circuit.

NOW, THEREFORE, BE IT RESOLVED by the Kane County Board that the attached holiday calendar for 2026 is hereby adopted for all County offices. County offices will be closed and all business will be handled on the next business date.

Passed by the Kane County Board on August 12, 2025.

John A. Cunningham, MBA, JD, JD
Clerk, County Board
Kane County, Illinois

Corinne M. Pierog MA, MBA
Chairman, County Board
Kane County, Illinois

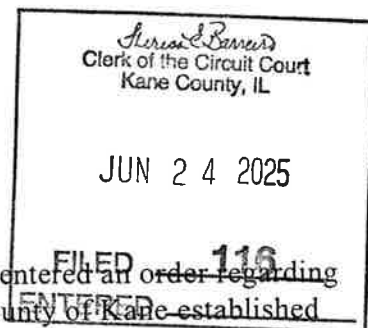
Vote:

2026 HOLIDAY SCHEDULE
KANE COUNTY GOVERNMENT
COURT RELATED & NON-COURT RELATED

<u>HOLIDAY:</u>	<u>OBSERVED ON:</u>
New Year's Day	Thursday, January 1
Martin Luther King, Jr. Day	Monday, January 19
Lincoln's Birthday	Thursday, February 12
Washington's Birthday (Observed)	Monday, February 16
Spring Holiday	Friday, April 3
Memorial Day	Monday, May 25
Juneteenth	Friday, June 19
Independence Day	Friday, July 3
Labor Day	Monday, September 7
Columbus Day (Observed)	Monday, October 12
Veterans' Day	Wednesday, November 11
Thanksgiving Day	Thursday, November 26
Day Following Thanksgiving	Friday, November 27
Christmas Eve Day	Thursday, December 24
Christmas Day	Friday, December 25

**IN THE SIXTEENTH JUDICIAL CIRCUIT
GENERAL ORDER 25-08**

IN THE MATTER OF)
2026 COURT LEGAL HOLIDAY)
SCHEDULE)
)



WHEREAS, the Supreme Court of the State of Illinois having entered an order regarding the court holiday calendar for 2026, and this Court having followed County of Kane established protocol in confirming the anticipated 2026 County holiday schedule;

WHEREFORE IT IS HEREBY ORDERED:

- A. The Circuit Court for the Sixteenth Judicial Circuit of the State of Illinois shall adjourn, and the Office of the Clerk of the Circuit Court of the County of Kane shall be closed on the following legal holidays for the year of 2026:

HOLIDAY:

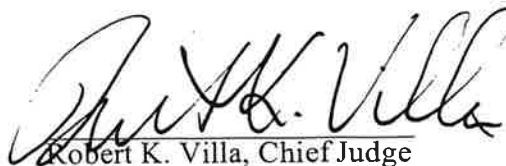
New Year's Day
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Lincoln's Birthday
Washington's Birthday (Observed)
Spring Holiday
Memorial Day
Juneteenth
Independence Day
Labor Day
Columbus Day (Observed)
Veterans' Day
Thanksgiving Day
Day following Thanksgiving
Christmas Eve Day
Christmas Day

OBSERVED ON:

Thursday, January 1
Monday, January 19
Thursday, February 12
Monday, February 16
Friday, April 3
Monday, May 25
Friday, June 19
Friday, July 3
Monday, September 7
Monday, October 12
Wednesday, November 11
Thursday, November 26
Friday, November 27
Thursday, December 24
Friday, December 25

- B. All matters returnable on said legal holidays shall be continued to the next business day of said Court.
- C. The time for filing all motions and pleadings shall be extended to the next business day of this Court.

Entered this 24th day of June 2025.


Robert K. Villa, Chief Judge



RESOLUTION / ORDINANCE EXECUTIVE SUMMARY ADDENDUM

Title

Approving the 2026 Holiday Schedule for Kane County Offices

Committee Flow:

Human Services Committee, Executive Committee, County Board

Contact:

Jamie Loblillo, 630.208.3836

Budget Information:

Was this item budgeted? N/A	Appropriation Amount: \$N/A
If not budgeted, explain funding source: N/A	
Was this item passed through the appropriate committee? Yes	

Summary:

This resolution approves the 2026 holiday calendar for Kane County Offices.

STATE OF ILLINOIS)

SS.

COUNTY OF KANE)

PRESENTATION/DISCUSSION NO. TMP-25-841

HUMAN RESOURCES BUDGET UPDATE