



JUNIOR TAXING DISTRICT CLAIMS PAYMENT REQUEST FORM

Junior taxing districts (JTD) must complete this form to request claims payments for all accounts payable and payroll disbursements.

NOTE: It is the district's responsibility to maintain adequate records to substantiate claims.

Submit completed form to San Juan County Payroll Deputy by 10:00 A.M. on Tuesday morning.

Date of request: 5/20/2025

District name: Orcas Island Health Care District

Requestor name: Chris Chord

Requestor phone & email address: 360-317-3545, chrisc@orcashealth.org

Total amount: \$20,630.65

BARS code: 6541 .00.589.40.00.0000

Request type: Accounts Payable Warrants

Description of claim(s):


Last four digits of bank account (EFT's ONLY): NA

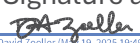
Warrant delivery: SJC mail warrants to vendor(s) (JTD must provide remittances)

Auditing Officer Certification:

I, the undersigned, do hereby certify under penalty of perjury that the materials have been furnished, the services rendered, or the labor performed as described.

Auditing Officer or Commissioner Signature(s) for Approval of Claims:

Name and title Chris Chord	Superintendent
Signature and date 	May 19, 2025

Name and title David Zoeller	accounting officer
Signature and date  <small>David Zoeller (May 19, 2025 19:49 PDT)</small>	May 19, 2025

Name and title	
Signature and date	

Name and title	
Signature and date	

Name and title	
Signature and date	

Name and title	
Signature and date	

Invoice Accounting Report
San Juan County

Invoice #: 1280 Invoice Date: 05/19/2025 Doc Date: 05/21/2025 Due Date: 05/21/2025
Vendor #: j00109 Name: SEIB POLICY & PUBLIC AFFAIRS Type: in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Policy consulting	E 6541.00.589.40.00.0000	6,500.00	

Invoice #: 20250515 Invoice Date: 05/19/2025 Doc Date: 05/21/2025 Due Date: 05/21/2025
Vendor #: j00209 Name: WALTERS, SCOTT M Type: in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Facilities plan	E 6541.00.589.40.00.0000	6,666.67	

Invoice #: 20250601 Invoice Date: 05/19/2025 Doc Date: 05/21/2025 Due Date: 05/21/2025
Vendor #: whi654 Name: IC LLC Type: in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	District office rent Q2	E 6541.00.589.40.00.0000	2,615.76	

Invoice #: 2965836-SJ Invoice Date: 05/19/2025 Doc Date: 05/21/2025 Due Date: 05/21/2025
Vendor #: san275 Name: SAN JUAN SANITATION, INC Type: in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Dental trash pick-up	E 6541.00.589.40.00.0000	19.39	

Invoice #: 3145 Invoice Date: 05/19/2025 Doc Date: 05/21/2025 Due Date: 05/21/2025
Vendor #: nex654 Name: NEXCO INC. Type: in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Aiport Center rent, June 2025	E 6541.00.589.40.00.0000	897.00	

Invoice #: 48631 Invoice Date: 05/19/2025 Doc Date: 05/21/2025 Due Date: 05/21/2025
Vendor #: bus001 Name: BUSINESS SUPPORT SERVICES NW Type: in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	Accounting support	E 6541.00.589.40.00.0000	895.00	

Invoice Accounting Report
San Juan County

Invoice #: 900D71 Invoice Date: 05/19/2025 Doc Date: 05/21/2025 Due Date: 05/21/2025
Vendor #: sta900 Name: STATE OF WASHINGTON Type: in

<u>Line No</u>	<u>Line Description</u>	<u>Account Number</u>	<u>Amount</u>	<u>PO Number</u>
1	PEBB, June 2025	E 6541.00.589.40.00.0000	3,036.83	
Grand Total:			<u>20,630.65</u>	

Business Support Services Northwest, LLC

1304 Meador Ave. Ste. B-103
Bellingham, WA 98229-5841
360-733-5530

Invoice

Date	Invoice #
5/1/2025	48631

Bill To
Orcas Island Health Care District PO Box 226 Eastsound, WA 98245

Terms
Due Upon Receipt

Serviced	Description Value	Amount
	May 2025 - Monthly Support for reviewing the accounting transaction in one QuickBooks Online Plus Account.	895.00
		Sales Tax (8.7%) \$0.00
		Total \$895.00

Seib Policy & Public Affairs LLC

INVOICE

P.O. Box 7871
Olympia, Washington 98507-7871
Phone (360) 280-2525 Email patty@seibppa.com

DATE: May 5, 2025
INVOICE # 1280
FOR: Consulting services
5/1/25-5/31/25

Bill To:
Chirs Chord
Orcas Island Health Care District
410 Prune Alley, Unit B
Eastsound, WA 98245
360-317-3545

DESCRIPTION	AMOUNT
Policy and Public Affairs Consulting - May 2025	\$ 6,500.00
Expenses:	
TOTAL	\$ 6,500.00

Make all checks payable to: Seib Policy & Public Affairs LLC (address above).
If you have any questions, please contact Patricia Seib at (360) 280-2525 or patty@seibppa.com.

THANK YOU.



San Juan Sanitation Co.
 279 Gravel Pit Road
 Eastsound, WA 98245
 Phone: 360-376-4709 or 1-877-249-1467

Remit Payments To
 P.O. Box 267
 Lynden, WA 98264

Garbage Collection
 Commercial Recycling
 Landscaping Supplies

Billing Date: 04/30/25		Due by: 05/26/25		Delinquent: 05/31/25					
ACCOUNT NUMBER		SERVICE NAME & ADDRESS			PREVIOUS BALANCE				
2965836-SJ		SJ COUNTY PUBLIC HOSP DIST 3 - 1286 MT BAKER RD B-103 - EASTSOUND			\$ 29.09				
QUANTITY	DATE	DESCRIPTION			AMOUNT				
1	04/28/25	PAYMENT			-29.09				
2	04/30/25	32 COMM CAN			16.42				
1	04/30/25	14.5% SAN JUAN COUNTY EXCISE TAX			2.38				
1	04/30/25	3.6% STATE REFUSE TAX			0.59				
PAYMENTS POSTED AFTER THIS DATE WILL APPEAR ON THE NEXT BILLING		04/30/25	Aging 0-30 \$ 19.39	31-60 0.00	61-90 0.00	Over 90 0.00	Total 19.39	BALANCE DUE ➔	\$ 19.39



San Juan Sanitation Co.
 PO Box 267
 Lynden, WA 98264-0267
 Phone: 360-376-4709 ■ 1-877-249-1467

Due by: 05/26/25

ACCOUNT NUMBER
 2965836-SJ

PREV. BALANCE: \$ 29.09
 PAYMENTS: -29.09
 BALANCE FORWARD: 0.00
 CURRENT CHARGES: 19.39
BALANCE DUE: \$ 19.39
Payment in US Funds Only

Make Checks Payable To:
 SAN JUAN SANITATION CO.

ENTER AMOUNT BEING PAID ➔



156 1 AV 0.545 156 / 156 1-1-156
 SJ COUNTY PUBLIC HOSP DIST 3
 PO BOX 226
 EASTSOUND WA 98245-0226

Page 1 of 1



SAN JUAN SANITATION CO.
 PO BOX 267
 LYNDEN, WA 98264-0267



Nexco, Inc.

PO Box 1743
Eastsound, WA 98245

Invoice

Invoice #: 3145
Invoice Date: 5/12/2025
Due Date: 6/1/2025

Bill To:
Chris Chord

Description	Amount
Airport Center rent for June 2025.	897.00

Total	\$897.00
Payments/Credits	-\$897.00
Balance Due	\$0.00

From: [Chris Chord](#)
To: [Ellen Fraser](#)
Subject: FW: Rent Request and CPI
Date: Friday, February 21, 2025 10:34:53 AM

2025 Q2 - June, July, August
\$2615.76

Chris Chord
Superintendent
Orcas Island Health Care District
San Juan County Public Hospital District #3
C: (360) 317-3545
superintendent@orcashealth.org
www.orcashealth.org



 [Book time to meet with me](#)

NOTICE OF PUBLIC DISCLOSURE: This email account is public domain. Any correspondence from or to this email account is a public record. Accordingly, this email, in whole or in part, may be subject to disclosure pursuant to RCW 42.56 regardless of any claim of confidentiality or privilege asserted by an external party.

From: Chris White <drwhite@cweyes.com>
Sent: Friday, February 21, 2025 9:05 AM
To: Chris Chord <ChrisC@orcashealth.org>; Chris Chord <ChrisC@orcashealth.org>
Subject: Rent Request and CPI

Chris,

Hope all is well,

The annual CPI rent adjustment, this year is an increase of 2.7%, so the rent will now become \$871.92/month, or \$2615.76 quarterly. Attached is the CPI report for reference.

Please adjust for the upcoming quarterly payment due March 1.

I have included a voided copy of the IC LLC bank information for direct deposit.

Please confirm by return email.

Thanks,

https://www.bls.gov/regions/west/news-release/consumerpriceindex_seattle.htm

Chris White, O.D.
President IC LLC

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REPORT NO: HRISDB5325-R01

STATE OF WASHINGTON
HEALTH CARE AUTHORITY
INSURANCE STATEMENT BY AGENCY

RUN DATE: 04/28/2025

SAN JUAN COUNTY PUBLIC H
KIMBERLY KIMPLE
PO BOX 226
EASTSOUND WA 98245

ACCOUNT# : 900 D71
INVOICE MONTH : 05/2025
AMOUNT DUE : \$ 3,036.83
FILE ID : P202505
DUE DATE : 05/20/2025

THIS REMITTANCE SLIP MUST BE RETURNED WITH YOUR PAYMENT BY THE DUE DATE ABOVE TO ENSURE ACCURATE PROCESSING OF YOUR PAYMENT.

SEND PAYMENTS TO:

HEALTH CARE AUTHORITY
P.O. BOX 84265
SEATTLE, WA 98124-5565

SEND INQUIRES TO:

HEALTH CARE AUTHORITY
P.O. BOX 42684
OLYMPIA, WA 98504-2684

900D71 0525 000303683

STATE OF WASHINGTON
 HEALTH CARE AUTHORITY
 INSURANCE STATEMENT BY AGENCY/SUB
 FOR MAY 2025

AGENCY: 900 HCA POLITICAL SUB-DIV
 SUB AGENCY: D71 SAN JUAN COUNTY PUBLIC H

NAME	SSN	TRAN DATE MM/DD/YY	TRAN TYPE	COV PP YMM	BATCH/DOC NUMBER	CARRIER CODES OR DESCRIPTION	INSURANCE AMOUNT	EMPLOYEE AMOUNTS	
								LIFE	LTD
CHORD, CHRISTOPHER R	XXX-XX-6714	04/28/25	I	2505		LTD	.00	.00	56.00
		04/28/25	I	2505	INV0525	UHSW 1 T3P LIFE	981.91	.00	.00
			I			LTD			
			I			TOBACCO	.00		
			I			SPOUSAL	.00		
			I		EMP GRP SUR & OFFSET	12.00			
*** TOTAL							993.91	.00	56.00
FRASER, ELLEN E	XXX-XX-7772	04/28/25	I	2505		LTD	.00	.00	6.50
		04/28/25	I	2505	INV0525	U 1 T3P LIFE	1,956.42	.00	.00
			I			LTD			
			I			TOBACCO	.00		
			I			SPOUSAL	.00		
			I		EMP GRP SUR & OFFSET	24.00			
*** TOTAL							1,980.42	.00	6.50
*** AGENCY TOTAL							2,974.33	.00	62.50

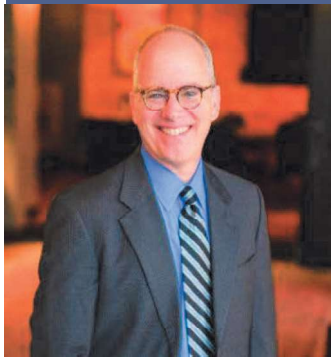
STATE OF WASHINGTON
 HEALTH CARE AUTHORITY
 INSURANCE STATEMENT BY AGENCY/SUB
 FOR MAY 2025

AGENCY: 900 HCA POLITICAL SUB-DIV
 SUB AGENCY: D71 SAN JUAN COUNTY PUBLIC H

NAME	SSN	TRAN DATE MM/DD/YY	TRAN TYPE	COV PP YYMM	BATCH/DOC NUMBER	CARRIER CODES OR DESCRIPTION	INSURANCE AMOUNT	EMPLOYEE AMOUNTS	
								LIFE	LTD

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***** GROUP TOTALS *****
*
*                INSURANCE          EMPLOYEE OPTIONAL
*                AMOUNT              LIFE AND LTD
*
*          CURRENT          2,974.33          62.50
*          BALFWD           .00              .00
*
*
*-----
* TOTALS FOR AGENCY 900D71    2,974.33          62.50 = 3,036.83
*
*****
  
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Scott M. Walters

Scott Walters brings extensive experience providing strategic planning, operational improvement, and facility planning for hospitals, health systems, and medical groups. Scott brings almost 30 years of operations and planning experience from a wide range of health care providers: the largest to the smallest; inner-city to rural, academic and community. Scott has a long track record of working closely with clinicians at leading hospital and medical centers to provide clients and architects with visionary yet practical strategic facility master plans, operational plans, and functional and space programs.

Select Clients

Alegent Health/CHI Health, Omaha, NE*

Alice Hyde Medical Center, Malone, NY*

Beatrice Community Hospital, Beatrice, NE*

Columbus Community Hospital, Columbus, NE*

Eastern Maine Health System, Bangor, ME*

Geisinger Bloomsburg Hospital, Bloomsburg, PA*

Holy Cross Hospital, Nogales, AZ*

Lake Chelan Health, Chelan, WA*

Lourdes Health Network, Pasco, WA*

Nantucket Cottage Hospital, Nantucket, MA

Pella Regional Health Center, Pella, IA*

St. Anthony Hospital, Pendleton, OR*

St. Charles Prineville Hospital and St. Charles Madras Hospital, Prineville and Madras, OR**

The Johns Hopkins Hospital, Baltimore, MD

Whidbey General Hospital, Coupeville, WA*

Winneshiek Medical Center/Mayo Clinic Health System, Decorah, IA*

*CAH or Rural Community Hospital client

Areas of Expertise

- **Strategic Facility Master Planning** – expertise in helping executive leadership identify and quantify their strategic opportunities, assess their existing facilities, identify the gaps between their facility needs and current facility assets, and prioritize the gaps. Experienced in developing practical options within justified capacity and square footage to solve facility issues within capital budgets, while improving operations and key adjacencies.
- **Need Based Functional Programming** – experience in facilitation of user groups to take advantage of facility development to capture operations improvement opportunities while managing users' expectations within demand justified capacity and square footage.
- **Operations Improvement** – whether building or not, operations can always be improved. Scott works with clients to improve their clinical and support department operations using lean and change management tools.

Select Critical Access Hospital Planning Experience

- Strategic Plan, Strategic Facility Master Plan, and Functional and Space Programming for Columbus Community Hospital, Columbus, NE
- Strategic Plan for UnityPoint Health – Grundy County Memorial Hospital, Grundy Center, Iowa
- Strategic Facility Master Plan for Pella Regional Health Center, Pella, Iowa
- Three consecutive Strategic Plans and Strategic Facility Master Plan for Syracuse Area Health, Syracuse, Nebraska
- Strategic Facility Master Plan for Memorial Community Hospital and the Blair Clinic, Blair, Nebraska
- Strategic Plan, Strategic Facility Master Plan, and Functional and Space Programming for The Butler County Health Care Center, David City, Nebraska
- Strategic Facility Master Plan and Functional and Space Programming for the Lake Chelan Health, Chelan, Washington
- Strategic Facility Master Plan and Functional and Space Programming for Nantucket Cottage Hospital, Nantucket, MA

Education

MHA, University of Minnesota

JD, University of Iowa

BA, St. John's College

We would expect to provide all this information as a pre-read for the Board prior to your June meeting. We would recommend using part of that meeting to allow the Board to prioritize the identified gaps.

Develop Solutions

We aim to develop facility solutions that target your highest priority gaps first, within the context of the existing facility's strengths. We want to leverage what's good, replace what's lacking, and focus the first dollars on the highest needs. After reviewing the solutions, we will work with district leadership to select the best option or create a new option combining strengths of the original solutions.

We expect to provide a room-by-room space program (existing and proposed) to support facility development, along with simple block diagrams showing zones that could be renovated, areas of expansion, and how proposed new key rooms would integrate with existing spaces. Given the relatively new existing facility, we expect most of it should be suitable for another generation of caregiving.

This is your step 2

Finalize the Plan

After selecting a preferred approach, we would recommend engaging with a local contractor to provide a rough order of magnitude price. Local builders can give far better estimates than remote planners or architects. They will often provide this service at low (or even no) cost as a way to "get a foot in the door."

Timing, Meetings, and Professional Fees and Expenses

Your timeline is aggressive but achievable given the relatively small scale of the institution.

We recommend three working meetings of a leadership steering group. A first meeting will cover an initial draft of all of Step 1. A second meeting will finalize Step 1 and confirm our gaps. The initial Board Meeting would follow this second meeting. A third meeting would review options and select a preferred approach. Prior to the second Board meeting we would review updated materials in a shorter pre-meeting. The process would conclude with the second Board meeting.

We recommend meeting in-person for the first and last meetings. Others can be virtual or in-person at your discretion. Our fees for this effort will be \$20,000*. Travel related expenses will be reimbursed at cost and as incurred. No other expenses are anticipated.

* email of May 12, 2025 - to Chris Chord, from Scott Walters
"We discussed paying about 1/3 now, 1/3 after the Board Retreat, and 1/3 at completion of the project.
-I'll also send invoices for incurred travel expenses after each trip."