



City of Flint, Michigan

Third Floor, City Hall
1101 S. Saginaw Street
Flint, Michigan 48502
www.cityofflint.com

Meeting Agenda – FINAL Wednesday, May 6, 2026 5:00 PM

City Council Chambers

FINANCE COMMITTEE

Judy Priestley, Chairperson, Ward 4

Leon El-Alamin, Ward 1

LaShawn Johnson, Ward 3

Tonya Burns, Ward 6

Dennis Pfeiffer, Ward 8

Ladel Lewis, Ward 2

Jerri Winfrey-Carter, Ward 5

Candice Mushatt, Ward 7

Jonathan Jarrett, Ward 9

Davina Donahue, City Clerk

ROLL CALL

READING OF DISORDERLY PERSONS CITY CODE SUBSECTION

Any person that persists in disrupting this meeting will be in violation of Flint City Code Section 31-10, Disorderly Conduct, Assault and Battery, and Disorderly Persons, and will be subject to arrest for a misdemeanor. Any person who prevents the peaceful and orderly conduct of any meeting will be given one warning. If they persist in disrupting the meeting, that individual will be subject to arrest. Violators will be removed from the meetings.

REQUEST FOR AGENDA CHANGES/ADDITIONS

PUBLIC COMMENT

Members of the public who wish to address the City Council or its committees must register before the meeting begins. A box will be placed at the entrance to the Council Chambers for collection of registrations. No additional speakers or slips will be accepted after the meeting begins.

Members of the public shall have no more than three (3) minutes per speaker during public comment, with only one speaking opportunity per speaker.

COUNCIL RESPONSE

Councilmembers may respond once to all public speakers only after all public speakers have spoken. An individual Councilmember's response shall be limited to two (2) minutes.

CONSENT AGENDA

Per the amended Rules Governing Meetings of the Flint City Council (as adopted by the City Council on Monday, April 22, 2024), the Chair may request the adoption of a "Consent Agenda". After a motion to adopt a Consent Agenda is made and seconded, the Chair shall ask for separations. Any agenda item on a Consent Agenda shall be separated at the request of any Councilmember. After any separations, there is no debate on approving the Consent Agenda – it shall be voted on or adopted without objection.

RESOLUTIONS

260089.1 Amended Acceptance/Genesee County Senior Millage Funding/Eric Mays Senior and Community Service Center/Amend/FY2026 Budget

Resolution resolving that the Flint City Council hereby authorizes the acceptance of \$54,744.00 in Senior Millage funding from the Genesee County Department of Senior Services for the operation and programming of the Eric B. Mays Senior and Community Service Center; AND, further resolving that the FY2026 City of Flint Budget is hereby amended, [and the FY2027 City of Flint Budget be adopted] to recognize and appropriate these funds for senior center programming, operations, and related allowable expenditures in accordance with the terms of the Senior Millage agreement.

260143 Deere Credit, INC/ Purchase Wheel Loader

Resolution resolving that the Division of Purchases and Supplies, upon City Council's approval, is hereby authorized to issue a purchase order to Deere Credit, Inc. for the purchase of a John Deere wheel loader in an amount not to exceed \$80,805.88. [NOTE: The City of Flint, Department of Finance, Fleet Division, has been making lease payments on a John Deere wheel loader that is used by the Street Maintenance Division. The amount of the lease consisted of five yearly payments of \$26,442.59 for a total lease of \$177,849.00. The lease agreement was for a final payout of \$80,805.88 if the City decided to purchase said equipment.]

260144 CO #1/D.H.T. Transport LLC/FY2026, FY2027 and FY2028/Sludge Hauling Service

Resolution resolving that the Proper City Officials are hereby authorized to do all things necessary to process Change Order-1 to the Purchase Order to D.H.T. Transport LLC, 2695 West Vassar Road, MI 48757 for Water Pollution Control Sludge Hauling/Transportation Services, in the not-to-exceed FY-2026 amount of \$305,000.00, with the option to extend for a fourth year. AND further resolving pending budget adoption of the FY-2027 & FY-2028 budgets, revised amounts for this service will be \$313,000.00 and \$321,000.00 respectively. AND further resolving this will be revised three-(3) year contract total of \$939,000.00 an increase of \$138,200.00 for the contract period.[NOTE: WPC Management miscalculated the annual cost of said services, and requires additional allocations to ensure that funding for this service is sufficient for each of the approved fiscal years, which includes the current fiscal year.]

260145 Third Quarter Budget Amendment/ Fiscal Year 2026

Resolution resolving that the appropriate officials are authorized to do all things necessary to incorporate the approved appropriation changes into the FY2026 operating budget of the City of Flint in the total amount of \$30,025,000.00. [NOTE: Third Quarter FY26 Budget Amendments to include the following Funds/Divisions; General Fund, Major Street Fund, Local Street Fund, Public Safety Fund, Police Fund, Parks and

Recreation Fund, Street Lighting Fund, Rubbish Fund, Building Fund, Sewer Fund, Water Fund, Fringes Benefit , IT Services , and Motor Pool.]

SPECIAL ORDERS/DISCUSSION ITEMS

260130 Discussion Item/Safe Streets and Roads

A Discussion Item for an update on Safe Streets and Roads for All (SS4A) as requested by 2nd Ward Councilmember Ladel Lewis.

ADJOURNMENT

260089.1

RESOLUTION: _____

PRESENTED: 3-23-2026

ADOPTED: _____

Amended Resolution Authorizing Acceptance of \$54,744 in Genesee County Senior Millage Funding for the Eric Mays Senior and Community Service Center and Amending the FY2026 Budget Accordingly

WHEREAS. the Genesee County Board of Commissioners approved Senior Millage funding through the Genesee County Department of Senior Services to support senior center programming and services for residents age sixty (60) and older; and

WHEREAS, the City of Flint operates the Eric Mays Senior and Community Service Center, which has been awarded \$54,744 in Senior Millage funding for the period January 1, 2026 through September 30, 2026 to support senior programming, operations and services; and

WHEREAS, the acceptance of this funding will support programs and services that improve the health, safety and quality of life for senior residents of the City of Flint and throughout Genesee County; and

WHEREAS, it is necessary to amend the FY2026 City of Flint Budget to recognize and appropriate the Senior Millage funds for the operation of the Eric Mays Senior and Community Service Center.

Funding shall be allocated to the following expenditure account(s):

Dept.	Name of Account	Account Number	Grant CODE	Amount
Mayor-Community Centers	SUPPLIES	208-752.160-752.000		\$20,344.00
Mayor-Community Centers	PROFESSIONAL SERVICES	208-752.160-801.000		\$25,000.00
Mayor-Community Centers	COMMUNITY PROMOTION	208-752.160-880.000		\$2,000.00
Mayor-Community Centers	POSTAGE	208-752.160-902.000		\$400.00

Mayor-Community Centers	COPYING SERVICES	208-752.160-903.000		\$1,500.00
Mayor-Community Centers	EDUCATION TRAINING, & CONFER	208-752.160-958.000		\$2,500.00
Mayor-Community Centers	UTILITIES	208-752.160-920.000		\$3,000.00
FY26 GRAND TOTAL				\$54,744.00

IT IS RESOLVED that the Flint City Council hereby authorizes the acceptance of \$54,744 in Senior Millage funding from the Genesee County Department of Senior Services for the operation and programming of the Eric B. Mays Senior and Community Service Center; and

IT IS FURTHER RESOLVED, that the FY2026 City of Flint Budget is hereby amended, [and the FY2027 City of Flint Budget be adopted] to recognize and appropriate these funds for senior center programming operations, and related allowable expenditures in accordance with the terms of the Senior Millage agreement.

APPROVED AS TO FORM:

APPROVED AS TO FINANCE:

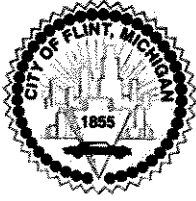
JoAnne Gurley, Chief Legal Officer

Phillip Moore, Chief Financial Officer

FOR THE CITY OF FLINT:

APPROVED BY CITY COUNCIL:

Clyde Edwards, City Administrator



260143

RESOLUTION NO.: _____

PRESENTED: 5-6-2024

ADOPTED: _____

BY THE CITY ADMINISTRATOR:

**RESOLUTION TO DEERE CREDIT, INC. FOR
THE PURCHASE OF A WHEEL LOADER**


The City of Flint, Department of Finance, Fleet Division, has been making lease payments on a John Deere wheel loader that is used by the Street Maintenance Division. The amount of the lease consisted of five yearly payments of \$26,442.59 for a total lease of \$177,849.00. The lease agreement was for a final payout of \$80,805.88 if the City decided to purchase said equipment.

Deere Credit, Inc., 6400 NW 86th St., Johnston, IA is the leasing company and the Street Maintenance Division wishes to purchase the John Deere wheel loader. There is adequate funding for said purchases from the listed account:

Account Number	Account Name	Amount
202-449.201-977.000	Equipment	\$ 80,805.88
	FY26 GRAND TOTAL	\$ 80,805.88


IT IS RESOLVED, that The Division of Purchases and Supplies, upon City Council’s approval, is hereby authorized to issue a purchase order to Deere Credit, Inc. for the purchase of a John Deere wheel loader in an amount not to exceed \$80,805.88.

FOR THE CITY OF FLINT:



Clyde Edwards/ A0638 (Apr 30, 2026 12:52:18 EDT)
Clyde Edwards, City Administrator

APPROVED BY CITY COUNCIL:


APPROVED AS TO FORM:


JoAnne Gurley (Apr 30, 2026 11:31:55 EDT)
JoAnne Gurley, City Attorney

APPROVED AS TO FINANCE:


Phillip Moore (Apr 30, 2026 10:25:03 EDT)
Phillip Moore, Chief Financial Officer

APPROVED AS TO PURCHASING:


Lauren Rowley, Purchasing Manager



STAFF REVIEW FORM

Effective: April 1, 2026

(Do not alter or modify this form without written permission from the City Administrator)

TODAY'S DATE: April 17, 2026

BID PROPOSAL #: _____

AGENDA ITEM TITLE: Purchase of a wheel loader

PREPARED BY: Kathryn Neumann

VENDOR NAME: Deere Credit, Inc.

Section 1. BACKGROUND/SUMMARY OF PROPOSED ACTION..

Vendor Compliance (This vendor has been properly vetted and the responses are below) :

Federal gov't	(All documentation current, no violations)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
State gov't	(All documentation current, no violations)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
City of Flint	(All documentation current, no violations)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

The requesting authority is validating that this vendor has been in full compliance with all past contract provisions and has not violated the terms of any contract with the City of Flint.

NOTE: Preparer MUST include a response to the conditions below:

- Did we do an assessment of first consideration to internal City of Flint staff and resources (explain)?
- Why was this vendor chosen?
- What history does this vendor have with the City of Flint?
- What steps will be taken to do a post-performance of the vendor?

In 2020, the City leased a John Deere wheel loader to be used for various tasks at Street Maintenance. The least terms were annual payments of \$26,442.59 and a final purchase price of \$80,805.88, which was due at the end of the lease. Deere Credit is the financial company owned by John Deere to handle lease/purchases. The City has decided to purchase the wheel loader. A final payment to Deere Credit is due. This loader is used in the day-to-day operations of Street Maintenance, including but not limited to pushing leaves in the fall, loading salt into dump trucks in winter and it loading sweeper dumps in dump trucks so they can be taken to the landfill. The value of this front end loader is over \$200,000.

PROCUREMENT (MUST BE SPECIFIED)

Please specify how this vendor was identified: (Check one)

- Sole Source (Please attach sole source statement to requisition)
- Competitive Bid Process (Please attach bid tabulation/documents to requisition)
- Cooperative Contract (MIDeal, Sourcewell, GSA, or other municipality)

*Contract must be attached to your requisition and contract must appear on the vendor's quote for goods/services

- (3) Quotes (please attach all quotes to your requisition)



STAFF REVIEW FORM

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Section 2. PREVIOUS ALLOCATIONS (INCLUDE ALL ACCOUNTS USED FOR THIS PURPOSE)/ PROVIDE RESOLUTION OR CONTRACT INFORMATION THAT APPLIES..

Fiscal Year	Account	PO Number	FY PO Amount	FY Expensed	Resolution
FY25	203-449.201-977.000	25-007973	\$13,513.24	\$13,513.24	
FY23	202 & 203-449.201-977.000	23-005713	\$38,345.95	\$30,926.28	
FY23	202 & 203-449.201-977.000	23-005724	\$98,121.61	\$98,120.59	190191
FY22	202 & 203-449.201-977.000	22-004707	\$31,650.65	\$31,650.65	
FY22	202 & 203-449.201-977.000	22-004719	\$101,846	\$101,846	190191

Section 3. POSSIBLE BENEFIT TO THE CITY OF FLINT (RESIDENTS AND/OR CITY OPERATIONS) INCLUDE PARTNERSHIPS AND COLLABORATIONS..

The benefit to the Citizen's of the City of Flint is that front-end loaders are indispensable machines providing high productivity, versatility, and efficiency. They excel at scooping, transporting, and dumping materials like salt, leaves and dirt spoils, utilizing hydraulic power to lift heavy loads.

Section 4. FINANCIAL IMPLICATIONS..

IF ARPA related Expenditure:

Has this request been reviewed by E&Y Firm: YES NO IF NO, PLEASE EXPLAIN:

NOTE: Accountant MUST include the following information:

- What is the total amount budgeted for this purpose?
- What percentage is being spent with this vendor?
- What is the justification for spending this amount of money with this vendor?
- What percentage is being spent out of each line item used in this request?
- List all the known budgeted funds from that line item.



STAFF REVIEW FORM

Effective: April 1, 2026

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Total Purchase Amount: \$80,805.88
 Line-Item: 202-449.201-977.000
 Streets Equipment
 Total Line Budget: \$1,109,900
 Purchase: \$80,805.88, 7% of Total Line Item of Streets Equipment
 BA (Budget Adjustment) Posted 4/15/2026, \$120,000 was taken from Repairs & Maintenance as this was an unutilized account. The John Deere Wheel Loader was not in the Equipment Budget, but now after BA, it is properly accounted for. R+M: 202-449.201-930.00. Current budget after BA is \$75,750.00. Current utilization of this R+M account is 0%, nothing is spent or encumbered out of this account.

BUDGETED EXPENDITURE? YES NO IF NO, PLEASE EXPLAIN:

Dept.	Name of Account	Account Number	Grant CODE	Amount
Streets	Equipment	202-449.201-977.000		\$80,805.88
FY26 GRAND TOTAL				\$80,805.88

WHEN APPLICABLE, IF MORE THAN ONE (1) YEAR, PLEASE ESTIMATE TOTAL AMOUNT FOR EACH BUDGET YEAR: (This will depend on the term of the bid proposal)

BUDGET YEAR 1: _____
 BUDGET YEAR 2: _____
 BUDGET YEAR 3: _____

OTHER IMPLICATIONS (i.e., collective bargaining).. _____

PRE-ENCUMBERED? YES NO REQUISITION NO: 260011395

ACCOUNTING APPROVAL: Joe Joe Janfeldt (Apr 21, 2026 16:40:03 EDT) Date: _____

WILL YOUR DEPARTMENT NEED A CONTRACT? YES NO

Section 5. RESOLUTION DEFENSE TEAM..

(Place the names of those who can defend this resolution at City Council)

	NAME	PHONE NUMBER
1	Dan Schiller	810 691-4788



STAFF REVIEW FORM

Effective: April 1, 2026

(Do not alter or modify this form without written permission from the City Administrator)

2		
3		
4		

STAFF RECOMMENDATION: (PLEASE SELECT): APPROVED NOT APPROVED

DEPARTMENT HEAD SIGNATURE: Dan Schiller
Dan Schiller (Apr 22, 2026 00:12:54 EDT)
(Danny Schiller, Provisional Director of Transportation)

ADMINISTRATION APPROVAL: CDE
Clyde Edwards (Apr 22, 2026 13:10:08 EDT)
(\$20,000 or above spending authorizations)

Section 6. VENDOR EVALUATION..

Business Title: Deere Credit, Inc. Vendor ID: 0000004770

Review Period: _____ Department: Street Maintenance

Project Name: Purchase of a wheel loader Project Type: Equipment

Vendor Goals:

The City has owned this piece of equipment for the past five years. It has performed well, that is why the City has decided to buy it. John Deere Credit is the financial company that handles the lease purchases.

	1 = Poor	2 = Fair	3 = Sufficient	4 = Good	5 = Excellent
Job Knowledge:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Work Quality:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Timeliness:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Compliance with Contract:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Warranty (If Product):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>



STAFF REVIEW FORM

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Responsiveness:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Cost Effectiveness:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Dependability:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Total Performance:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Overall Rating:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

DEFECTS (IF ANY): IF CHECKED, PLEASE EXPLAIN:

Performance / Other Comments:

REVIEWER'S SIGNATURE: _____

Date: _____

6017



Deere Credit, Inc.
PO Box 6600
Johnston, IA 50131-6600

CITY OF FLINT
PO BOX 246
FLINT, MI 48501-0246

Co-Obligor or Guarantor:

See Contract for Details

Dear CITY OF FLINT,

Thank you for choosing John Deere Financial. We appreciate your business and the opportunity to be your trusted financial resource. We are committed to understanding your business, and providing the flexible financing solutions and customer service to accommodate your needs in good and challenging times. Please review and retain the enclosed insert filled with helpful information and tips to get the most from your John Deere Financial experience.

This letter is confirmation that your lease contract described below has been accepted by John Deere Financial and your account is setup. This is not an invoice.

The account number is 030-0063090-016

The details for this transaction include:

LEASE TERM START DATE	07 July 2020
LEASE TERM END DATE	07 July 2025
FIRST PAYMENT DUE DATE	07 July 2020
NUMBER OF PAYMENTS	5

LEASED EQUIPMENT				
QTY.	NEW/ USED	MFR.	MODEL	EQUIPMENT DESCRIPTION
1	NEW	JD	644L	644L WHEEL LOADER
PRODUCT ID NO. 1DW844LMCLF760957				

Equipment Location.
1101 S SAGINAW ST
FLINT, MI 48502-1420

You can easily manage your account or make a payment online by using MY.JDFACCOUNT.COM

If you prefer to mail a payment, please include your account number on the check and mail to John Deere Financial, PO Box 4450, Carol Stream, IL 60197-4450

For additional questions, please contact our Customer Service Representatives at 1-800-771-0681

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ORIGINAL INVOICE

Invoice Date

10/23/2025

Invoice Number

Page 1 of 2

0063090

CITY OF FLINT
PO BOX 246
FLINT MI 48501

TOTAL AMOUNT DUE

\$80,805.88

Due Date

7/7/2025

DID YOU KNOW!

Log on to MyJDFAccount.com for secure and confidential access to your John Deere Financial account.

QUESTIONS?



Visit us online:

MyJDFAccount.com



Call us:

1-800-488-8732

LEASE ACCOUNT INFORMATION

Lease Maturity Date

7/7/2025

Lessee's Reference Number

0063090

IMPORTANT INFORMATION ABOUT YOUR ACCOUNT

Your lease information is now available 24/7 at MyJDFAccount.com. Make payments view your account information and more!

Every dishonored check received will result in a fee of \$20 or in an amount not to exceed the highest amount permitted by state law.

▼ Detach and return the bottom remittance portion with your payment in an enclosed envelope ▼



P.O. Box 6600
Johnston, IA 50131-6600
USA

CITY OF FLINT

Account Number : 030-0963090-016

TOTAL AMOUNT DUE

\$80,805.88

Due Date:

7/7/2025

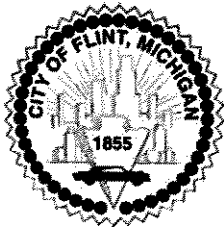
Amount Enclosed

\$

Please include account number and make check payable to:

CITY OF FLINT
PO BOX 246
FLINT MI 48501

DEERE CREDIT, INC.
PO BOX 4450
CAROL STREAM, IL 60197-4450



RESOLUTION NO.: 260144
 PRESENTED: 5-6-2024
 ADOPTED: _____

PROPOSAL 26000500
 Tracking: A0634

BY THE CITY ADMINISTRATOR:

**RESOLUTION CHANGE ORDER-1 TO D.H.T. TRANSPORT LLC FOR
 THREE-(3) YEAR (FY 2026, FY 2027 & FY 2028) WPC SLUDGE HAULING SERVICE**

WHEREAS, The Division of Purchases and Supplies solicited bids for three-year WPC Sludge Disposal Services (FY-2026, FY-2027, and FY-2028) as requested by Water Pollution Control, a Division of Public Works. This service provides sludge hauling to an approved landfill for biosolids cake and grit disposal.

WHEREAS, WPC Management miscalculated the annual cost of said services, and requires additional allocations to ensure that funding for this service is sufficient for each of the approved fiscal years which includes the current fiscal year.

WHEREAS, D.H.T. Transport LLC was the sole, responsive bidder of said solicitation. WPC recommends that D.H.T. Transport LLC be awarded Change Order-1 to increase the funding allocations for the three-year contract in the amounts of \$44,800.00 – FY 2026, \$46,400.00 – FY 2027, and \$47,000.00 – FY 2028 to provide said services. The revised annual not to exceed amounts will be \$305,000.00 for FY-2026, \$313,000.00 for FY-2027, and \$321,000.00 for FY-2028, a three-year aggregate total of \$939,000.00, with the option to extend for an additional year pending adoption of each fiscal year. Funding is to come from the following account:


Account Number	Account Name/ Grant Code	Amount
590-550.100-815.550	WPC-Sludge Disposal	\$44,800.00
	Original Council Approved Amount (Resolution 250254-T, 08/11/2025)	\$260,200.00
	FY 2026 Revised TOTAL	\$305,000.00

IT IS RESOLVED, that the Proper City Officials are hereby authorized to do all things necessary to process Change Order-1 to the Purchase Order to D.H.T. Transport LLC, 2695 West Vassar Road, Reese, MI 48757 for Water Pollution Control Sludge Hauling/Transportation Services, in the not-to-exceed FY-2026 amount of \$305,000.00, with the option to extend for a fourth year.

BE IT ALSO RESOLVED, pending budget adoption of the FY-2027 & FY-2028 budgets, revised amounts for this service will be \$313,000.00 and \$321,000.00 respectively.

BE IT FURTHER RESOLVED, this will be a revised three-(3) year contract total of \$939,000.00 an increase of \$138,200.00 for the contract period.


APPROVED AS TO FORM:


 JoAnne Gurley (Apr 30, 2026 16:57:48 EDT)
 Joanne Gurley, City Attorney

APPROVED AS TO FINANCE:



 Phillip Moore (May 1, 2026 11:43:12 EDT)
 Phillip Moore, Chief Financial Officer

FOR THE CITY OF FLINT:


 Clyde Edwards / A0634 (May 1, 2026 11:50:08 EDT)
 Clyde Edwards, City Administrator

APPROVED BY CITY COUNCIL:

APPROVED AS TO PURCHASING:


 Lauren Rowley, Purchasing Manager



STAFF REVIEW FORM

Effective: April 1, 2026

(Do not alter or modify this form without written permission from the City Administrator)

TODAY'S DATE: 4/9/2026

BID PROPOSAL#: P26000500

AGENDA ITEM TITLE: Sludge Cake Transport - Change Order 1

PREPARED BY: Jeanette Best

VENDOR NAME: DHT Transport, LLC

Section 1 BACKGROUND/SUMMARY OF PROPOSED ACTION .

Vendor Compliance (This vendor has been properly vetted and the responses are below) :

Federal gov't	(All documentation current, no violations)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
State gov't	(All documentation current, no violations)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
City of Flint	(All documentation current, no violations)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

The requesting authority is validating that this vendor has been in full compliance with all past contract provisions and has not violated the terms of any contract with the City of Flint.

NOTE: Preparer MUST include a response to the conditions below:

- Did we do an assessment of first consideration to internal City of Flint staff and resources (explain)?
- Why was this vendor chosen?
- What history does this vendor have with the City of Flint?
- What steps will be taken to do a post-performance of the vendor?

Water Pollution Control (WPC) generates approximately 16,000 wet tons of biosolids cake and grit ("residuals") from its wastewater treatment process annually. Residuals must be transported off plant site to a landfill or other disposal site every weekday. The services are to be provided with fixed rates, for a period of three fiscal years. The Contract, if approved, will be in effect for FY2026, FY2027, and FY2028. The City has used this vendor since 2017 with satisfactory results. They have experience with the WPC needs for consistent service and have provided it.

WPC recommended that the only bidder, DHT Transport, LLC be awarded the three-year bid for Transport Services (hauling) in the amount of \$260,200.00 (FY 2026), \$266,600.00 (FY2027), and \$274,000.00 (FY 2028), a three-(3) year total of \$800,800.00.

A change order is requested to correct a miscalculation in the amount necessary for the Transport Services. It seems that the original calculation was based on 12 months (48 weeks) instead of 52 weeks (1 year) of service, and potential for additional runs were not considered. The correction for FY 2026 is \$44,800, for a total of \$305,000 which is the amount that was included in FY 2026 budget. Corrections for FY 2027 and FY 2028, pending adoption of the budgets, are FY 2027 - \$46,400, annual total, \$313,000 and FY 2028 - \$47,000, annual total \$321,000. The three (3) year total is \$939,000.



STAFF REVIEW FORM

Effective: April 1, 2026

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PROCUREMENT (MUST BE SPECIFIED)

Please specify how this vendor was identified: (Check one)

- Sole Source (Please attach sole source statement to requisition)
- Competitive Bid Process (Please attach bid tabulation/documents to requisition)
- Cooperative Contract (MIDeal, Sourcewell, GSA, or other municipality)
 - *Contract must be attached to your requisition and contract must appear on the vendor's quote for goods/services
- (3) Quotes (please attach all quotes to your requisition)

Section 2. PREVIOUS ALLOCATIONS (INCLUDE ALL ACCOUNTS USED FOR THIS PURPOSE)/ PROVIDE RESOLUTION OR CONTRACT INFORMATION THAT APPLIES..

Fiscal Year	Account	PO Number	FY PO Amount	FY Expensed	Resolution
2025	590-550.100-815.500	1,085,000.00	280,000.00	257,245.75	240412-T
2024	590-550.100-815.500	523,000.00	290,000.00	269,999.32	220288
2023	590-550.100-815.500	509,100.00	250,000.00	249,374.74	220288
2022	590-550.100-812.000	693,000.00	250,000.00	226,155.00	210264
2021	590-550.100-812.000	668,500.00	218,500.00	188,931.50	180384

Section 3. POSSIBLE BENEFIT TO THE CITY OF FLINT (RESIDENTS AND/OR CITY OPERATIONS) INCLUDE PARTNERSHIPS AND COLLABORATIONS..

This purchase will ensure that the NPDES Permit requirements are met for the proper operation of the WPC.

Section 4. FINANCIAL IMPLICATIONS..

IF ARPA related Expenditure:

Has this request been reviewed by E&Y Firm: YES NO IF NO, PLEASE EXPLAIN:

NOTE: Accountant MUST include the following information:

- What is the total amount budgeted for this purpose?
- What percentage is being spent with this vendor?
- What is the justification for spending this amount of money with this vendor?
- What percentage is being spent out of each line item used in this request?
- List all the known budgeted funds from that line item.



STAFF REVIEW FORM

Effective: April 1, 2026

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This is not an ARPA expense. Adequate funding is available in the current approved budget for this required service.

BUDGETED EXPENDITURE? YES NO IF NO, PLEASE EXPLAIN:

Dept.	Name of Account	Account Number	Grant CODE	Amount
DPW-WPC	Sludge Disposal Services	590-550.100-815.500		FY2026 CO 1 \$44,800.00
DPW-WPC	Sludge Disposal Services	590-550.100-815.500		FY2027 CO 1 \$46,400.00
DPW-WPC	Sludge Disposal Services	590-550.100-815.500		FY2028 CO 1 \$47,000.00
FY26 GRAND TOTAL				\$44,800.00

WHEN APPLICABLE, IF MORE THAN ONE (1) YEAR, PLEASE ESTIMATE TOTAL AMOUNT FOR EACH BUDGET YEAR: (This will depend on the term of the bid proposal)

BUDGET YEAR 1: \$305,000 .00 (original FY26 + \$44,800.00)

BUDGET YEAR 2: \$313,000.00 (original FY27 + \$46,400.00)

BUDGET YEAR 3: \$321,000.00 (original FY28 + \$47,000)

OTHER IMPLICATIONS (i.e., collective bargaining).. None

PRE-ENCUMBERED? YES NO REQUISITION NO: 260011391

ACCOUNTING APPROVAL: [Signature] Date: 04/20/2026

WILL YOUR DEPARTMENT NEED A CONTRACT? YES NO

Section 5. RESOLUTION DEFENSE TEAM..

(Place the names of those who can defend this resolution at City Council)

	NAME	PHONE NUMBER



STAFF REVIEW FORM

Effective: April 1, 2026

(Do not alter or modify this form without written permission from the City Administrator)

1	Jeanette Best	810 691-9811
2		
3		
4		

STAFF RECOMMENDATION: (PLEASE SELECT): APPROVED NOT APPROVED

DEPARTMENT HEAD SIGNATURE: Jeanette H. Best WPC/DPW Manager
 (Name, Title)

ADMINISTRATION APPROVAL: Signature on the following page
 (\$20,000 or above spending authorizations)

Section 6. VENDOR EVALUATION..

Business Title: DHT Transport, LLC Vendor ID:

Review Period: Annually Department: DPW-WPC

Project Name: Sludge Disposal Transportation Project Type: Transportation of sludge cake to the landfill

Vendor Goals:
 Timely supply of trucking trailers and hauling to the landfill.

1 = Poor 2 = Fair 3 = Sufficient 4 = Good 5 = Excellent

Job Knowledge:

Work Quality:



STAFF REVIEW FORM

Effective: April 1, 2026

(Do not alter or modify this form without written permission from the City Administrator)

Timeliness:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Compliance with Contract:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Warranty (if Product):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsiveness:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Cost Effectiveness:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Dependability:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Total Performance:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Overall Rating:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

DEFECTS (IF ANY): IF CHECKED, PLEASE EXPLAIN:

Performance / Other Comments:

DHT has been hauling dewatered biosolids for the WPCF since 2017. They are responsive to our requests when we need additional loads hauled and they coordinate with the landfill. DHT knows our schedule and has trailers staged at the plant for easy exchange of full trailers.

REVIEWER'S SIGNATURE: _____

Date: _____

Signature:

Clyde Edwards (Apr 15, 2026 14:51:37 EDT)

Email: cedwards@cityofflint.com

Client#: 60051

HAUBR

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/24/2026

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

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

PRODUCER: Saginaw Bay Underwriters, 1258 S. Washington, Saginaw, MI 48605. CONTACT NAME: Amy Jo List, CIC, CISR. PHONE: 989 752-8600. FAX: (A/C, No):. E-MAIL ADDRESS: alist@sbuins.com. INSURER(S) AFFORDING COVERAGE: INSURER A: Auto Owners Insurance Co. (18988), INSURER B: National Interstate Insurance Co. (32620), INSURER C: Federal Insurance Co. (002084), INSURER D: Hartford Fire Insurance Co. (19682), INSURER E: Endurance American Specialty (41718), INSURER F: Twin City Fire Insurance Co. (29459).

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL SUBR INSR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liability, Workers Compensation and Employers' Liability, and Motor Truck Cargo/Reefer Coverage.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Insurer B: Excess Liability (National Interstate) #UHT001136804 \$3,000,000 goes over the Auto Liability. Insurer B: Excess Liability (National Interstate) #UHT001136804 \$4,000,000 goes over General Liability and Employers Liability. Insurer E: Excess Liability (Endurance American Specialty) Policy Term 03/01/2026 - 03/01/2027 #ELD30032828503 - \$5,000,000 goes over (National Interstate) \$4,000,000 excess over General Liability and (See Attached Descriptions)

CERTIFICATE HOLDER: City of Flint, 1101 S Saginaw St, Flint, MI 48501. CANCELLATION: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE: Meg Kli.

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DESCRIPTIONS (Continued from Page 1)

Employers Liability only.

-Pollution Liability broad coverage for covered autos is included in the Automobile Policy form #CA9948.

-Form MCS-90 is included. Waiver of Subrogation does apply.

**** Supplemental Name ****

Hausbeck Brothers, Inc. DBA D.H.T. DBA D.H.T. Logistics

David Hausbeck

D.H.T. Specialized, LLC

D.H.T. Transport, LLC

D.H.T. Express, LLC

D.H.T. Agricultural Transport, LLC

City of Flint and including all elected and appointed officials, all employees and volunteers, all boards, commissions and/or authorities and their board members, employees and volunteers are included as additional insureds with respects to the general liability on a primary and non contributory basis and the auto liability. 30 Day notice of cancellation (10 Day Notice for nonpayment of premium) applies. (6/17)



27860091



STATE OF MICHIGAN
CSCL/CD- 2700 - DOMESTIC LIMITED LIABILITY
COMPANY ANNUAL STATEMENT

Corporations Division Administrator
FILED
Doc #: 27860091
Filed Date: 1/15/2026

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LIMITED LIABILITY COMPANY ANNUAL STATEMENT <i>Required by Section 207, Act 23, Public Act of 1993</i>		
Limited Liability Company Information		
The present name of the limited liability company is:	DHT TRANSPORT LLC	
The identification number assigned by the Bureau is:	801831294	
Filing Year	2026	
The name of the resident agent at the registered office is: DAVID L HAUSBECK		
Address 2695 W VASSAR RD, REESE, MI 48757		
Mailing Address 2695 W VASSAR RD, REESE, MI 48757		
Attestations		
<input checked="" type="checkbox"/> I understand that the information I enter into the online system is public information and will appear online and on copy requests exactly as I enter it into the system.		
<input checked="" type="checkbox"/> I have been authorized by the business entity to file this document online.		
<input checked="" type="checkbox"/> I, HEREBY SWEAR AND/OR AFFIRM, under penalty of law, including criminal prosecution, that the facts contained in this document are true. I certify that I am signing this document as the person(s) whose signature is required, or as an agent of the person(s) whose signature is required, who has authorized me to place his/her signature on this document.		
Signature		
<i>Authorized Agent</i>	<i>DHT TRANSPORT / DAVE HAUSBECK</i>	<i>DEDRA GILMOUR</i>
Signer's Capacity	On behalf of	Sign Here
<i>01/15/2026</i>		
Date		

CU042-1233 01/15/2026 RECEIVED BY MICHELLE WOODRUFF



Department of Finance - Treasury

Sheldon Neeley
Mayor

Clyde Edwards
City Administrator

Good Standing Certification

Applicant and/or Business Clearance

All applicants for City of Flint funded programs, including federal programs, must remain current and not in default on any obligations related to taxes, fines, penalties, water service, licenses or other forms of penalties.

APPLICANT NAME: David L Hausbeck

HOME ADDRESS: _____

DBA: Hausbeck Brother, Inc./ DHT Transport LLC

BUSINESS ADDRESS: 2695 W. Vassar Road, Reese MI 48757

Please include addresses of all properties in the name of other current and/or former businesses, parent company, subsidiaries and/or divisions. Also, please include all former names used while conducting business with the City.

This section to be completed by the Department of Finance - Customer Service Division

Please check the following divisions for the status of current and delinquent obligations owed to the City of Flint. Please circle the appropriate response for each division.

WATER DIV.
PROPERTY TAXES DIV.
INCOME TAX DIV.
ENFORCEMENT
MR

CURRENT
CURRENT
CURRENT
CURRENT
CURRENT

DELINQUENT
DELINQUENT
DELINQUENT
DELINQUENT
DELINQUENT

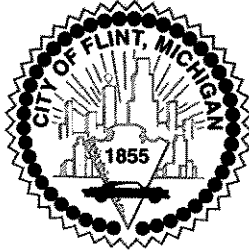
No water acct located
NO Prop tax located
No city of Flint income tax demand
No sm R located

If delinquencies exist, please indicate the date, type and amount of obligation:

City Staff Person and Date

Heiler Robert, 4-20-2026

City of Flint Customer Serv. Representative and Date



SEALED PROPOSALS RECEIVED IN THE DIVISION OF PURCHASES & SUPPLIES

Sludge Cake Transport Services

PROPOSAL# 26000500

Approximate Annual Quantities – Not Guaranteed
 Furnish as requested for the period 07/1/25 – 6/30/28

Bidder #1: DHT Transport LLC
Reese, MI

Landfill	Location	Distance (Miles)	FY 2026 (07/01/25–06/30/26)	FY 2027 (07/01/26–06/30/27)	FY 2028 (07/01/27–06/30/28)
Republic Citizens	Grand Blanc, MI	10.2	\$489.99	\$502.24	\$514.80
Brent Run	Montrose, MI	15.0	\$489.99	\$502.24	\$514.80
Venice Park	Lennon, MI	13.8	\$489.99	\$502.24	\$514.80
Waste Management	Birch Run, MI	21.3	\$538.44	\$551.90	\$565.70

	Extra Hard Copies	Electronic Copy Received
DHT Transport LLC	Yes	No

A SPECIAL NOTE FROM THE PURCHASING DIVISION

Bid results posted are before evaluation team review and award recommendation.



RESOLUTION NO.: 250254-T

PRESENTED: 8-6-2025

ADOPTED: 8-11-2025

PROPOSAL 26000500

Tracking: A0506

BY THE CITY ADMINISTRATOR:

**RESOLUTION TO D.H.T. TRANSPORT LLC FOR
THREE-(3) YEAR (FY 2026, FY 2027 & FY 2028) WPC SLUDGE HAULING SERVICE**

WHEREAS, The Division of Purchases and Supplies solicited bids for three-year WPC Sludge Disposal Services (FY-2026, FY-2027, and FY-2028) as requested by Water Pollution Control, a Division of Public Works. This service provides sludge hauling to an approved landfill for biosolids cake and grit disposal.

WHEREAS, Proper sludge disposal is defined by and a requirement of the NPDES permit.

WHEREAS, D.H.T. Transport LLC was the sole, responsive bidder of said solicitation. WPC recommends that D.H.T. Transport LLC be awarded a three-year contract to provide said services in the amounts of \$260,200.00 for FY-2026, \$266,600.00 for FY-2027, and \$274,000.00 for FY-2028, a three-year total of \$800,800.00, with the option to extend for an additional year pending adoption of each fiscal year.

Funding is to come from the following account(s):

Account Number	Account Name/ Grant Code	Amount
590-550.100-815.550	WPC-Sludge Disposal	\$260,200.00
	FY 2026 TOTAL	\$260,200.00

IT IS RESOLVED, that the Proper City Officials are hereby authorized to do all things necessary to issue a Purchase Order to D.H.T. Transport LLC, 2695 West Vassar Road, Reese, MI 48757 for Water Pollution Control Sludge Hauling/Transportation Services, in the not-to-exceed FY-2026 amount of \$260,200.00, pending budget adoption of the FY-2027 & FY-2028 budgets, \$266,600.00 and \$274,000.00 respectively, with the option to extend for an additional year.

APPROVED AS TO FORM:

JoAnne Gurley
JoAnne Gurley (Jul 29, 2025 10:18:13 EDT)
Joanne Gurley, City Attorney

APPROVED AS TO FINANCE:

Phillip Moore
Phillip Moore (Jul 23, 2025 10:30:05 EDT)
Phillip Moore, Chief Financial Officer

FOR THE CITY OF FLINT:

Clyde D. Edwards / A0506
Clyde D. Edwards (A0506) (Jul 25, 2025 14:46:58 EDT)
Clyde Edwards, City Administrator

APPROVED BY CITY COUNCIL:

[Signature]

APPROVED AS TO PURCHASING:

Lauren Rowley
Lauren Rowley, Purchasing Manager



CITY OF FLINT

**** STAFF REVIEW FORM ****

Effective: July 10, 2025

TODAY'S DATE: 07/09/2025
BID/PROPOSAL: P26000500
AGENDA ITEM TITLE: SLUDGE CAKE TRANSPORT
PREPARED BY: Jeanette Best, WPC/DPW Manager
VENDOR NAME: DHT Transport, LLC

Section I: BACKGROUND/SUMMARY OF PROPOSED ACTION:

Vendor Compliance (This vendor has been properly vetted and the responses are below):

Federal government	(All documentation current, no violations)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
State government	(All documentation current, no violations)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
City of Flint	(All documentation current, no violations)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

The requesting authority is validating that this vendor has been in full compliance with all past contract provisions and has not violated the terms of any contract with the City of Flint.

Water Pollution Control (WPC) generates approximately 16,000 wet tons of biosolids cake and grit ("residuals") from its wastewater treatment process annually. Residuals must be transported off plant site to a landfill or other disposal site every weekday. The services are to be provided with fixed rates, for a period of three fiscal years. The Contract, if approved, will be in effect for FY2026, FY2027, and FY2028. The City has used this vendor since 2017 with satisfactory results. They have experience with the WPC needs for consistent service and have provided it.

WPC recommended that the only bidder, DHT Transport, LLC be awarded the three-year bid for Transport Services (hauling) in the amount of \$260,200.00 (FY 2026), \$266,600.00 (FY2027), and \$274,000.00 (FY 2028), a three-(3) year total of \$800,800.00.

PROCUREMENT (MUST BE SPECIFIED)

Please specify how this vendor was identified: (Check one)

- Sole Source (Please attach sole source statement to requisition)
- Competitive Bid Process (Please attach bid tabulation/documents to requisition)
- Cooperative Contract (MIDeal, Sourcewell, GSA, or other municipality)

*Contract must be attached to your requisition and contract must appear on the vendor's quote for goods/services

- (3) Quotes (please attach all quotes to your requisition)



CITY OF FLINT

**** STAFF REVIEW FORM ****

Effective: July 10, 2025

Section II. PREVIOUS ALLOCATIONS (INCLUDE ALL ACCOUNTS USED FOR THIS PURPOSE)/ PROVIDE RESOLUTION OR CONTRACT INFORMATION THAT APPLIES

Fiscal Year	Account	FY GL Allocation	FY PO Amount	FY Expensed	Resolution
2025	590-550.100-815.500	1,085,000.00	280,000.00	257,245.75	240412-T
2024	590-550.100-815.500	523,000.00	290,000.00	269,999.32	220288
2023	590-550.100-815.500	509,100.00	250,000.00	249,374.74	220288
2022	590-550.100-812.000	693,000.00	250,000.00	226,155.00	210264
2021	590-550.100-812.000	668,500.00	218,500.00	188,931.50	180384

Section III.

POSSIBLE BENEFIT TO THE CITY OF FLINT (RESIDENTS AND/OR CITY OPERATIONS) INCLUDE PARTNERSHIPS AND COLLABORATIONS:

This purchase order will ensure that the NPDES Permit requirements are met for proper operation of the WPC.

Section IV: FINANCIAL IMPLICATIONS:

IF ARPA related Expenditure:

Has this request been reviewed by E&Y Firm: YES NO IF NO, PLEASE EXPLAIN:

This is not an ARPA expense.

This is not an ARPA expense. Adequate funding (24%) is available in the current approved budget for this required service.

BUDGETED EXPENDITURE? YES NO IF NO, PLEASE EXPLAIN:

Dept.	Name of Account	Account Number	Grant Code	Amount
DPW - WPC	Sludge Disposal Services	590-550.100-815.500		260,200.00
FY26 GRAND TOTAL				260,200.00

WHEN APPLICABLE, IF MORE THAN ONE (1) YEAR, PLEASE ESTIMATE TOTAL AMOUNT FOR EACH BUDGET YEAR: (This will depend on the term of the bid proposal)

BUDGET YEAR 1 \$260,200.00 (FY 2026)

BUDGET YEAR 2 \$266,600.00 (FY 2027)

BUDGET YEAR 3 \$274,000.00 (FY 2028)



CITY OF FLINT
**** STAFF REVIEW FORM ****
Effective: July 10, 2025

OTHER IMPLICATIONS (i.e., collective bargaining): None.

PRE-ENCUMBERED? YES NO **REQUISITION NO:** 260010348

ACCOUNTING APPROVAL: *K. Hall* **Date:** 07/14/2025

WILL YOUR DEPARTMENT NEED A CONTRACT? YES NO

Section V: RESOLUTION DEFENSE TEAM:

(Place the names of those who can defend this resolution at City Council)

	NAME	PHONE NUMBER
1	Jeanette Best	810-691-9811
2		
3		

STAFF RECOMMENDATION: (PLEASE SELECT): **APPROVED** **NOT APPROVED**

DEPARTMENT HEAD SIGNATURE: *Jeanette M. Best*
 (Jeanette M. Best, WPC/DPW Manager)

ADMINISTRATION APPROVAL: *Clyde D. Edwards*
 (for \$20,000 or above spending authorizations) Clyde D. Edwards (Jul 21, 2025 17:03 EDT)



RESOLUTION NO.: 260145
 PRESENTED: 5-6-2026
 ADOPTED: _____

BY THE CITY ADMINISTRATOR:

RESOLUTION AUTHORIZING THIRD QUARTER FY26 BUDGET AMENDMENT

WHEREAS, the City of Flint's operating budget is monitored on an ongoing basis by the Finance Department and City department heads and changes to an approved operating budget are required from time to time. And;

WHEREAS, the Department of Finance is recommending certain fiscal appropriation amendments to the FY2026 City of Flint operating budget as follows in accordance with State Public Act 2 of 1968 as amended. And;

FY2026 Proposed Third Quarter Budget Amendments	Amended FY2026 Budget as of 3/31/2025	Proposed Amendment for FY2026 Q3 End	Proposed Amended FY2026 Budget	Estimated Ending Fund Balance
General Fund – Clerk's Office 101 Expenditures – W&F & Prof. Svcs	\$406,589	\$0	\$406,589	\$22,771,087
General Fund – Election Workers 101 Expenditures – W&F & Prof. Svcs	\$335,995	\$0	\$335,995	\$22,771,087
General Fund – City Council 101 Expenditures – W&F & Prof. Svcs	\$1,173,741	\$25,000	\$1,198,741	\$22,746,087
General Fund – All Departments 101 Revenue – State Grant	\$65,466,373	\$17,460,875	\$82,927,248	\$40,206,962
General Fund – All Departments 101 Expenditures – MERS Defined Benefit Pension	\$102,750,155	\$17,460,875	\$120,211,030	\$22,746,087
Major Street – All Departments 202 Revenue – State Grant	\$13,080,362	\$719,719	\$13,800,081	\$29,841,969
Major Street – All Departments 202 Expenditures – MERS Defined Benefit Pension	\$16,460,956	\$719,719	\$17,180,675	\$29,122,250
Local Street – All Departments 203 Revenue – State Grant	\$4,940,903	\$657,966	\$5,598,869	\$1,653,495
Local Street – All Departments 203 Expenditures – MERS Defined Benefit Pension	\$9,958,686	\$657,966	\$10,616,652	\$995,529
Public Safety – All Departments 205 Revenue – State Grant	\$6,196,380	\$2,337,840	\$8,534,220	\$4,703,263
Public Safety – All Departments 205 Expenditures – MERS Defined Benefit Pension	\$5,894,218	\$2,337,840	\$8,232,058	\$2,365,423
Police Fund – All Departments 207 Revenue – State Grant	\$2,051,090	\$853,214	\$2,904,304	\$3,188,948



RESOLUTION NO.: _____

PRESENTED: _____

ADOPTED: _____

Police Fund – All Departments 207 Expenditures – MERS Defined Benefit Pension	\$2,152,768	\$853,214	\$3,005,982	\$2,335,734
Parks & Rec. – All Departments 208 Revenue – State Grant	\$834,722	\$22,456	\$857,178	\$469,158
Parks & Rec. – All Departments 208 Expenditures – MERS Defined Benefit Pension	\$871,525	\$22,456	\$893,981	\$446,702
Street Lighting – All Departments 219 Revenue – State Grant	\$2,972,000	\$4,209	\$2,976,209	\$5,740,165
Street Lighting – All Departments 219 Expenditures – MERS Defined Benefit Pension	\$3,793,023	\$4,209	\$3,797,232	\$5,735,956
Rubbish Fund – All Departments 226 Revenue – State Grant	\$6,463,615	\$35,649	\$6,499,264	\$658,589
Rubbish Fund – All Departments 226 Expenditures – MERS Defined Benefit Pension	\$7,105,954	\$35,649	\$7,141,603	\$622,940
Building Fund – All Departments 249 Revenue – State Grant	\$2,335,000	\$536,141	\$2,871,141	\$3,542,879
Building Fund – All Departments 249 Expenditures – MERS Defined Benefit Pension	\$3,786,763	\$536,141	\$4,322,904	\$3,006,738
Sewer Fund – All Departments 590 Revenue – State Grant	\$114,475,618	\$1,996,492	\$116,472,110	\$104,685,238
Sewer Fund – All Departments 590 Expenditures – MERS Defined Benefit Pension	\$121,488,450	\$1,996,492	\$123,484,942	\$102,688,746
Water Fund – All Departments 591 Revenue – State Grant	\$34,978,486	\$1,743,859	\$36,722,345	\$91,496,442
Water Fund – All Departments 591 Expenditures – MERS Defined Benefit Pension	\$45,589,536	\$1,743,859	\$47,333,395	\$89,752,583
Fringe Benefit – All Departments 627 Revenue – State Grant	\$37,014,250	\$56,140	\$37,071,390	\$4,468,918
Fringe Benefit – All Departments 627 Expenditures – MERS Defined Benefit Pension	\$41,179,410	\$56,140	\$41,235,550	\$4,412,778
IT Services – All Departments 636 Revenue – State Grant	\$4,158,000	\$294,737	\$4,452,737	\$3,191,304
IT Services – All Departments 636 Expenditures – MERS Defined Benefit Pension	\$4,624,029	\$294,737	\$4,918,766	\$2,896,567
Motor Pool – All Departments 661 Revenue – State Grant	\$5,194,000	\$280,703	\$5,474,703	\$8,903,986
Motor Pool – All Departments 661 Expenditures – MERS Defined Benefit Pension	\$8,496,163	\$280,703	\$8,776,866	\$8,623,283
General Fund – Legal 101 Expenditures – Prof Svcs & Xfers Out	\$1,632,697	\$3,000,000	\$4,632,697	\$19,746,087
Total Amendment		\$30,025,000		




RESOLUTION NO.: _____

PRESENTED: _____

ADOPTED: _____


IT IS RESOLVED, that the appropriate officials are hereby authorized to do all things necessary to incorporate the approved appropriation changes into the FY2026 operating budget of the City of Flint.

APPROVED AS TO FORM:


JoAnne Gurley (May 1, 2026 15:52:17 EDT)


Joanne Gurley, City Attorney

FOR THE CITY OF FLINT:


Clyde Edwards/ A0641 (May 1, 2026 16:20:37 EDT)

Clyde Edwards, City Administrator

APPROVED AS TO FINANCE:


Phillip Moore (May 1, 2026 15:12:41 EDT)

Phillip Moore, Chief Financial Officer

APPROVED BY CITY COUNCIL:



STAFF REVIEW FORM

Effective: April 1, 2026

(Do not alter or modify this form without written permission from the City Administrator)

TODAY'S DATE: 4/22/2026
 BID PROPOSAL #: N.A.
 AGENDA ITEM TITLE: Clerk's Office Third Quarter Budget Amendment
 PREPARED BY: Davina Donahue
 VENDOR NAME: N.A.

Section 1. BACKGROUND/SUMMARY OF PROPOSED ACTION..

Vendor Compliance (This vendor has been properly vetted and the responses are below) :

Federal gov't	(All documentation current, no violations)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
State gov't	(All documentation current, no violations)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
City of Flint	(All documentation current, no violations)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

The requesting authority is validating that this vendor has been in full compliance with all past contract provisions and has not violated the terms of any contract with the City of Flint.

NOTE: Preparer **MUST** include a response to the conditions below:

- Did we do an assessment of first consideration to internal City of Flint staff and resources (explain)?
- Why was this vendor chosen?
- What history does this vendor have with the City of Flint?
- What steps will be taken to do a post-performance of the vendor?

This is a 3rd quarter budget adjustment for the Clerk's Office and City Council. Granicus is a vendor that part of the budget adjustment is for. We did an internal assessment and the software is needed. We are already under contract with them, just adding additional services. They bought out the original company and we have been utilizing their product for over 20 years. The performance is assessed with each meeting and there is no foreseeable end to the use of their product.

We are choosing the sole source below because this is just adding to th4e product.

PROCUREMENT (MUST BE SPECIFIED)

Please specify how this vendor was identified: (Check one)

- Sole Source (Please attach sole source statement to requisition)
- Competitive Bid Process (Please attach bid tabulation/documents to requisition)
- Cooperative Contract (MIDeal, Sourcewell, GSA, or other municipality)
 - *Contract must be attached to your requisition and contract must appear on the vendor's quote for goods/services
- (3) Quotes (please attach all quotes to your requisition)



STAFF REVIEW FORM

Effective: April 1, 2026

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Section 2. PREVIOUS ALLOCATIONS (INCLUDE ALL ACCOUNTS USED FOR THIS PURPOSE)/ PROVIDE RESOLUTION OR CONTRACT INFORMATION THAT APPLIES..

Fiscal Year	Account	PO Number	FY PO Amount	FY Expensed	Resolution

Section 3. POSSIBLE BENEFIT TO THE CITY OF FLINT (RESIDENTS AND/OR CITY OPERATIONS) INCLUDE PARTNERSHIPS AND COLLABORATIONS..

Section 4. FINANCIAL IMPLICATIONS..

IF ARPA related Expenditure:

Has this request been reviewed by E&Y Firm: YES NO IF NO, PLEASE EXPLAIN:

NOTE: Accountant MUST include the following information:

- What is the total amount budgeted for this purpose?



STAFF REVIEW FORM

Effective: April 1, 2026

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- What percentage is being spent with this vendor?
- What is the justification for spending this amount of money with this vendor?
- What percentage is being spent out of each line item used in this request?
- List all the known budgeted funds from that line item.

This is a move from wage and fringe from the City Clerk Election Workers division that was allocated in FY26 when the FY25 general fund budget was adopted instead and to add that change to the professional services for the Clerk's Office. This will pay for the Granicus records and meeting management software upgrades.

We also need to fill an Administrative Secretary position for City Council with an annual wage of \$49,899, for the remainder of the year that would equal \$7,677, moving funds from wages for City Council to Clerk's Office.

Additionally, the City Council has passed resolution 260091.1 to spend \$25,000 on sign language interpreters for City Council hearings. A budget will need to be added.

BUDGETED EXPENDITURE? YES NO **IF NO, PLEASE EXPLAIN:** We will need a budget amendment as indicated in the table below.

Dept.	Name of Account	Account Number	Grant CODE	Amount
Clerk's Office	Wages	101-262.110-702.010		-\$200,000
Clerk's Office	Professional Services	101-215.000-801.000		\$200,000
City Council	Wages	101-101.000-702.010		-\$7,677
Clerk's Office	Wages	101-215.000-702.010		\$7,677
Clerk's Office	Wages	101-101.000-801.000		\$25,000
FY26 GRAND TOTAL				\$25,000.00

WHEN APPLICABLE, IF MORE THAN ONE (1) YEAR, PLEASE ESTIMATE TOTAL AMOUNT FOR EACH BUDGET YEAR: (This will depend on the term of the bid proposal)

BUDGET YEAR 1: +/- \$25,000.00
 BUDGET YEAR 2: _____
 BUDGET YEAR 3: _____

OTHER IMPLICATIONS (i.e., collective bargaining).. _____

PRE-ENCUMBERED? YES NO **REQUISITION NO:** _____

ACCOUNTING APPROVAL: [Signature] **Date:** 04/23/2026



STAFF REVIEW FORM

Effective: April 1, 2026

(Do not alter or modify this form without written permission from the City Administrator)

WILL YOUR DEPARTMENT NEED A CONTRACT? YES NO

Section 5. RESOLUTION DEFENSE TEAM..

(Place the names of those who can defend this resolution at City Council)

	NAME
1	Davina Donahue
2	
3	
4	

STAFF RECOMMENDATION: (PLEASE SELECT): APPROVED NOT APPROVED

DEPARTMENT HEAD SIGNATURE:

(Name, Title)

ADMINISTRATION APPROVAL:
(\$20,000 or above spending authorizations)

Clyde Edwards (Apr 24, 2026 08:07:53 EDT)

Section 6. VENDOR EVALUATION..

Business Title:	Granicus, LLC	Vendor ID:	000006112
Review Period:	FY26	Department:	Clerk's Office
Project Name:	Maintenance Legi-Star	Project Type:	Software

Vendor Goals:

Storage and maintenance of city files and contracts and to modernize and stabilize our meeting and legislative operations.



STAFF REVIEW FORM

Effective: April 1, 2026

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1 = Poor 2 = Fair 3 = Sufficient 4 = Good 5 = Excellent

Job Knowledge:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Work Quality:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Timeliness:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Compliance with Contract:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Warranty (If Product):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Responsiveness:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Cost Effectiveness:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Dependability:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Total Performance:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Overall Rating:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

DEFECTS (IF ANY): IF CHECKED, PLEASE EXPLAIN:

N.A.

Performance / Other Comments:

They help to drive transparency and public information availability while streamlining operations and recovering resources

REVIEWER'S SIGNATURE: Devin Dandrea

Date: 04/23/2026

RESOLUTION: 260091.1

PRESENTED: 3-18-2026

ADOPTED: 4-13-2026

RESOLUTION TO INITIATE THE PROCESS FOR HIRING SIGN LANGUAGE INTERPRETERS FOR CITY COUNCIL MEETINGS

BY THE CLERK:

The Flint City Council desires to do all things necessary "to ensure that individuals with disabilities have equal access to participate" in its meetings; and

The Flint City Council currently broadcasts its meetings on the Official Flint City Council YouTube channel, which provides closed captioning for the hearing impaired. Other ADA accommodations that could be considered by the City Council include, but are not limited to, sign language interpreters, virtual meeting participation, etc. City Council will also need to make budget amendments to allow for any accommodation(s) it chooses to adopt; and

The Flint City Council wishes to do all things necessary to provide sign language interpreters for City Council meetings at this time.

IT IS RESOLVED, that the Flint City Council will do all things necessary to initiate the processes for providing sign language interpreters for its regularly-scheduled City Council meetings, for a time period of April 2026 to June 2026, with funding in an amount **NOT-TO-EXCEED \$25,000.00**, to come from the City's [General] Funds.

APPROVED AS TO FORM:

APPROVED BY CITY COUNCIL:

JoAnne Gurley, Chief Legal Officer

CS

101-101.000.801.000
for sign language
interpreters for
City Council Mtgs



STAFF REVIEW FORM

Effective: April 1, 2026

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TODAY'S DATE: 4/28/2026
 BID PROPOSAL #: N.A.
 AGENDA ITEM TITLE: Finance Third Quarter Budget Amendment
 PREPARED BY: Chay Linseman
 VENDOR NAME: N.A.

Section 1. BACKGROUND/SUMMARY OF PROPOSED ACTION..

Vendor Compliance (This vendor has been properly vetted and the responses are below) :

Federal gov't	(All documentation current, no violations)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
State gov't	(All documentation current, no violations)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
City of Flint	(All documentation current, no violations)	<input type="checkbox"/> YES	<input type="checkbox"/> NO

The requesting authority is validating that this vendor has been in full compliance with all past contract provisions and has not violated the terms of any contract with the City of Flint.

NOTE: Preparer **MUST** include a response to the conditions below:

- Did we do an assessment of first consideration to internal City of Flint staff and resources (explain)?
- Why was this vendor chosen?
- What history does this vendor have with the City of Flint?
- What steps will be taken to do a post-performance of the vendor?

1855

PROCUREMENT (MUST BE SPECIFIED)

Please specify how this vendor was identified: (Check one)

- Sole Source (Please attach sole source statement to requisition)
- Competitive Bid Process (Please attach bid tabulation/documents to requisition)
- Cooperative Contract (MIDeal, Sourcewell, GSA, or another municipality)
*Contract must be attached to your requisition and contract must appear on the vendor's quote for goods/services
- (3) Quotes (please attach all quotes to your requisition)



STAFF REVIEW FORM

Effective: April 1, 2026

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Section 2. PREVIOUS ALLOCATIONS (INCLUDE ALL ACCOUNTS USED FOR THIS PURPOSE)/ PROVIDE RESOLUTION OR CONTRACT INFORMATION THAT APPLIES..

Fiscal Year	Account	PO Number	FY PO Amount	FY Expensed	Resolution
N.A.					

N.A.

Section 3. POSSIBLE BENEFIT TO THE CITY OF FLINT (RESIDENTS AND/OR CITY OPERATIONS) INCLUDE PARTNERSHIPS AND COLLABORATIONS..

N.A.

Section 4. FINANCIAL IMPLICATIONS..

IF ARPA related Expenditure:

Has this request been reviewed by E&Y Firm: YES NO IF NO, PLEASE EXPLAIN:

NOTE: Accountant MUST include the following information:

- What is the total amount budgeted for this purpose?
- What percentage is being spent with this vendor?
- What is the justification for spending this amount of money with this vendor?
- What percentage is being spent out of each line item used in this request?
- List all the known budgeted funds from that line item.

This is a 3rd quarter budget adjustment for Finance to accept the MI Local Retirement Grant Program for FY26 in the amount of \$27,000,000 and add the revenue and expenditures budgets amending FY26 in those areas.

If this grant is not accepted, the City of Flint will remain in further deficit to pertaining to OPEB liabilities. As a result of this award, the FY26 budget must be amended to recognize revenue and expenditure applied across departments within the City.



STAFF REVIEW FORM

Effective: April 1, 2026

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BUDGETED EXPENDITURE? YES NO **IF NO, PLEASE EXPLAIN:** We will need a budget amendment as indicated in the table below.

Dept.	Name of Account	Account Number	Grant CODE	Amount
Finance	State Grants - Other	See Attachment – Multiple Rev	N.A.	\$27,000,000
Finance	MERS Defined Benefit Pension	See Attachment – Multiple Exp	N.A.	\$27,000,000
FY26 GRAND TOTAL				\$0

WHEN APPLICABLE, IF MORE THAN ONE (1) YEAR, PLEASE ESTIMATE TOTAL AMOUNT FOR EACH BUDGET YEAR: (This will depend on the term of the bid proposal)

BUDGET YEAR 1: +/- \$0

BUDGET YEAR 2: _____

BUDGET YEAR 3: _____

OTHER IMPLICATIONS (i.e., collective bargaining).. _____

PRE-ENCUMBERED? YES NO **REQUISITION NO:** _____

ACCOUNTING APPROVAL: [Signature] **Date:** 04/28/2026

WILL YOUR DEPARTMENT NEED A CONTRACT? YES NO

Section 5. RESOLUTION DEFENSE TEAM..

(Place the names of those who can defend this resolution at City Council)

	NAME	PHONE NUMBER
1	Phillip Moore	810-766-7266 ext 2301
2		
3		

STAFF RECOMMENDATION: (PLEASE SELECT): **APPROVED** **NOT APPROVED**

DEPARTMENT HEAD SIGNATURE: [Signature]
Phillip Moore (Apr 28, 2026 07:32:30 EDT)
(Name, Title)

ADMINISTRATION APPROVAL: [Signature]
Chris Edwards (Apr 29, 2026 17:42:30 EDT)
((\$20,000 or above spending authorizations))



STAFF REVIEW FORM

Effective: April 1, 2026

(Do not alter or modify this form without written permission from the City Administrator)

Section 6. VENDOR EVALUATION.

Business Title:	N.A.	Vendor ID:	
Review Period:		Department:	
Project Name:		Project Type:	

Vendor Goals:

N.A.

	1 = Poor	2 = Fair	3 = Sufficient	4 = Good	5 = Excellent
Job Knowledge:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work Quality:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Timeliness:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compliance with Contract:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Warranty (If Product):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsiveness:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cost Effectiveness:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Total Performance:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Rating:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DEFECTS (IF ANY): IF CHECKED, PLEASE EXPLAIN:

N.A.



STAFF REVIEW FORM

Effective: April 1, 2026

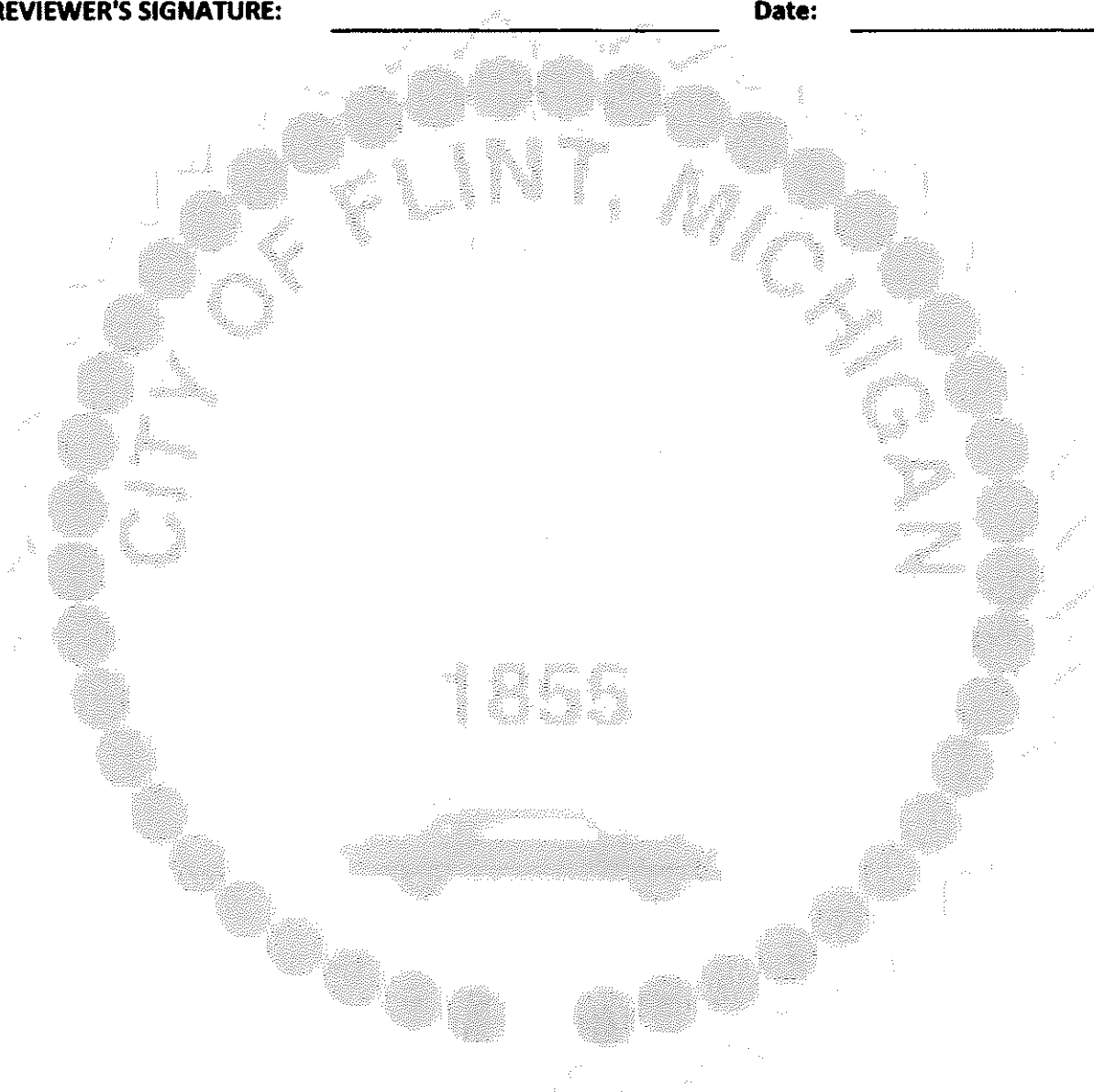
(Do not alter or modify this form without written permission from the City Administrator)

Performance / Other Comments:

N.A.

REVIEWER'S SIGNATURE: _____

Date: _____



Revenue: State Grant

Fund	GL Number	Fund Name	State Grant
101	101-000.000-569.000	General Fund	17,460,875.00
202	202-000.000-569.000	Major Street	719,719.00
203	203-000.000-569.000	Local Street	657,966.00
205	205-000.000-569.000	Public Safety	2,337,840.00
207	207-000.000-569.000	Police Fund	853,214.00
208	208-000.000-569.000	Parks/Recreation	22,458.00
219	219-000.000-569.000	Street Lighting	4,209.00
226	226-000.000-569.000	Rubbish Collection	35,649.00
249	249-000.000-569.000	Building Department	536,141.00
590	590-000.000-569.000	Sewer	1,996,492.00
591	591-000.000-569.000	Water	1,743,859.00
627	627-000.000-569.000	Fringe Benefit	56,140.00
636	636-000.000-569.000	IT Services	294,737.00
661	661-000.000-569.000	Motor Pool	280,703.00
			27,000,000.00

Expenditures: State Grant

FUND	GL NUMBER	DESCRIPTION	FY26 Amend Budget	Pension Grant Addn'l Contribution	Revised FY26 Budget
101	101-101.000-717.010	MERS DEFINED BENEFIT PENSION	81,756	112,281	194,037
101	101-171.000-717.010	MERS DEFINED BENEFIT PENSION	453,232	622,454	1,075,686
101	101-172.000-717.010	MERS DEFINED BENEFIT PENSION	51,097	70,175	121,272
101	101-173.000-717.010	MERS DEFINED BENEFIT PENSION	75,624	103,860	179,484
101	101-191.100-717.010	MERS DEFINED BENEFIT PENSION	245,268	336,844	582,112
101	101-215.000-717.010	MERS DEFINED BENEFIT PENSION	40,878	56,141	97,019
101	101-215.200-717.010	MERS DEFINED BENEFIT PENSION	40,878	56,141	97,019
101	101-230.200-717.010	MERS DEFINED BENEFIT PENSION	168,621	231,579	400,200
101	101-233.000-717.010	MERS DEFINED BENEFIT PENSION	40,878	56,141	97,019
101	101-253.200-717.010	MERS DEFINED BENEFIT PENSION	408,779	561,404	970,183
101	101-257.000-717.010	MERS DEFINED BENEFIT PENSION	204,390	280,703	485,093
101	101-282.000-717.010	MERS DEFINED BENEFIT PENSION	81,756	112,281	194,037
101	101-266.000-717.010	MERS DEFINED BENEFIT PENSION	204,390	280,703	485,093
101	101-268.000-717.010	MERS DEFINED BENEFIT PENSION	81,756	112,281	194,037
101	101-269.000-717.010	MERS DEFINED BENEFIT PENSION	20,439	28,070	48,509
101	101-270.000-717.010	MERS DEFINED BENEFIT PENSION	122,634	168,422	291,056
101	101-301.000-717.010	MERS DEFINED BENEFIT PENSION	5,380,469	7,389,370	12,769,839
101	101-336.000-717.010	MERS DEFINED BENEFIT PENSION	4,038,164	5,545,890	9,584,054
101	101-701.000-717.010	MERS DEFINED BENEFIT PENSION	220,485	302,807	523,292
101	101-703.000-717.010	MERS DEFINED BENEFIT PENSION	61,930	85,053	146,983
101	101-728.014-717.010	MERS DEFINED BENEFIT PENSION	20,439	28,070	48,509
101	101-732.000-717.010	MERS DEFINED BENEFIT PENSION	670,035	920,205	1,590,240
202	202-447.201-717.010	MERS DEFINED BENEFIT PENSION	145,117	199,299	344,416
202	202-449.200-717.010	MERS DEFINED BENEFIT PENSION	49,054	67,369	116,423
202	202-449.201-717.010	MERS DEFINED BENEFIT PENSION	175,773	241,401	417,174
202	202-449.203-717.010	MERS DEFINED BENEFIT PENSION	120,590	165,615	286,205
202	202-449.211-717.010	MERS DEFINED BENEFIT PENSION	4,088	5,614	9,702

202	202-450.100-717.010	MERS DEFINED BENEFIT PENSION	29,432	40,421	69,853
203	203-447.201-717.010	MERS DEFINED BENEFIT PENSION	55,186	75,791	130,977
203	203-449.200-717.010	MERS DEFINED BENEFIT PENSION	16,352	22,457	38,809
203	203-449.201-717.010	MERS DEFINED BENEFIT PENSION	171,688	235,791	407,479
203	203-449.203-717.010	MERS DEFINED BENEFIT PENSION	120,589	165,613	286,202
203	203-449.211-717.010	MERS DEFINED BENEFIT PENSION	4,087	5,613	9,700
203	203-449.215-717.010	MERS DEFINED BENEFIT PENSION	81,755	112,280	194,035
203	203-450.100-717.010	MERS DEFINED BENEFIT PENSION	29,432	40,421	69,853
205	205-315.201-717.010	MERS DEFINED BENEFIT PENSION	822,153	1,129,120	1,951,273
205	205-339.201-717.010	MERS DEFINED BENEFIT PENSION	880,113	1,208,720	2,088,833
207	207-315.204-717.010	MERS DEFINED BENEFIT PENSION	621,256	853,214	1,474,470
208	208-752.102-717.010	MERS DEFINED BENEFIT PENSION	16,351	22,456	38,807
219	219-448.000-717.010	MERS DEFINED BENEFIT PENSION	3,065	4,209	7,274
226	226-528.201-717.010	MERS DEFINED BENEFIT PENSION	25,957	35,649	61,606
249	249-371.100-717.010	MERS DEFINED BENEFIT PENSION	390,384	536,141	926,525
590	590-536.101-717.010	MERS DEFINED BENEFIT PENSION	53,652	73,684	127,336
590	590-540.100-717.010	MERS DEFINED BENEFIT PENSION	81,755	112,280	194,035
590	590-540.207-717.010	MERS DEFINED BENEFIT PENSION	61,316	84,210	145,526
590	590-540.208-717.010	MERS DEFINED BENEFIT PENSION	459,876	631,580	1,091,456
590	590-550.100-717.010	MERS DEFINED BENEFIT PENSION	490,535	673,686	1,164,221
590	590-550.200-717.010	MERS DEFINED BENEFIT PENSION	20,438	28,069	48,507
590	590-550.202-717.010	MERS DEFINED BENEFIT PENSION	286,145	392,983	679,128
591	591-536.100-717.010	MERS DEFINED BENEFIT PENSION	53,652	73,684	127,336
591	591-536.206-717.010	MERS DEFINED BENEFIT PENSION	20,438	28,069	48,507
591	591-540.100-717.010	MERS DEFINED BENEFIT PENSION	71,536	98,245	169,781
591	591-540.200-717.010	MERS DEFINED BENEFIT PENSION	51,097	70,175	121,272
591	591-540.202-717.010	MERS DEFINED BENEFIT PENSION	602,949	828,072	1,431,021
591	591-545.200-717.010	MERS DEFINED BENEFIT PENSION	265,706	384,912	630,618
591	591-545.201-717.010	MERS DEFINED BENEFIT PENSION	204,389	280,702	485,091
627	627-000.001-717.010	MERS DEFINED BENEFIT PENSION	20,439	28,070	48,509
627	627-270.360-717.010	MERS DEFINED BENEFIT PENSION	20,439	28,070	48,509
636	636-228.000-717.010	MERS DEFINED BENEFIT PENSION	214,609	294,737	509,346
661	661-229.000-717.010	MERS DEFINED BENEFIT PENSION	204,390	280,703	485,093

APPROPRIATIONS - ALL FUNDS

19,659,681

27,000,000

46,659,681.00

Key Information for Grantees

PA 121 of 2024, the FY25 Michigan budget and FY24 supplemental, includes funding for special grants intended for a single recipient. The budget includes language (called boilerplate) that provides a description of the project as well as certain requirements that all projects must comply with. Boilerplate language is binding and all projects must comply with the rules and regulations contained in the language.

You can find the budget bill [here](#). Transparency boilerplate was included in all department budgets and the FY24 supplemental.

Important information to note:

- The attached application will be used to develop and execute a grant agreement between each grantee and the relevant department. Grantees should work with their Legislative Sponsor to return the following application form to the State Budget Office.
- All applications must be submitted and legislative sponsors identified no later than December 13, 2024 pursuant to boilerplate.
- Eligible grantees include: units of local government, public authorities or other political instrumentalities, institutions of higher education, other state departments, entities registered with the department of licensing and regulatory affairs (LARA) or the department of attorney general (AG) that have been in existence for at least 12 months, or other entities that can demonstrate through tax filings or government records that they have been in existence for at least 12 months.
 - To check registration with LARA, check [here](https://cofs.lara.state.mi.us/SearchApi/Search/Search):
 - To check registration with AG, check [here](https://www.ag.state.mi.us/CharitableTrust/frmDisclaimer.aspx):
- Please ensure primary grant contact on the application is the fiduciary contact for the project.
- If the attached application is incomplete or missing information, grant processing may be delayed.
- To receive funds, all organizations must be registered in the State of Michigan SIGMA Vendor Self-Service (VSS) System. More information about registering for VSS can be found [here](#).
- Within 60 days of an executed grant agreement, an initial disbursement of up to 50% will be provided to the grantee. Please note, a 50% initial payment is not guaranteed nor required, and any advanced payments may be subject to additional approvals from the Office of Financial Management pursuant to the Financial Management Guide of the State of Michigan. (Defined terms and conditions are included in the grant agreement).

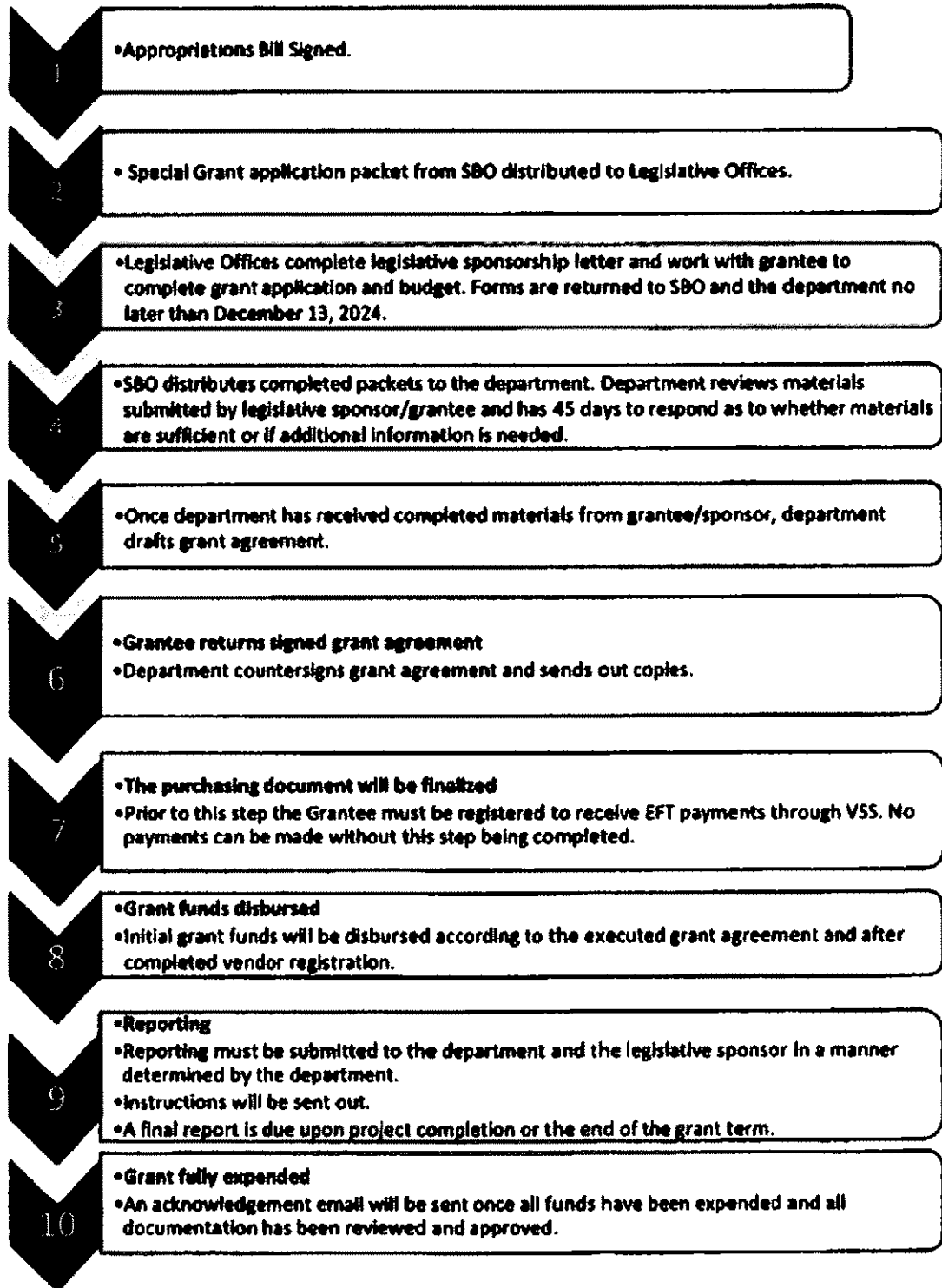
- **After the initial disbursement, additional funds will be disbursed on a reimbursement basis after verification that previous funds were expended in accordance with the project purpose.**
- **There is no requirement to have match funds for the grant.**
- **The grant cannot be increased or deviated from the boilerplate language.**
- **Grant funds can only be used for expenditures that occur on or after the effective date of the appropriations act unless otherwise specified in department policy.**
- **Any interest over \$1,000 earned on grant funds, while in the possession of the grantee, must be returned to the State of Michigan.**
- **Any questions that arise prior to submitting a grant application should be directed to the Grantee's Legislative Sponsor.**
- **Any questions that arise after submitting a grant application should be directed to the department.**
- **For timing and next steps, please review the attached process document.**

Completed application materials can be submitted to:

DTMB-SBOGrantForms@michigan.gov

Special Grant Process

This process flow is a general guideline; some projects will differ. Please feel free to contact us at any time if you have questions or concerns related to the process or the specifics of your grant.



Special Grant Application Form

Official Grantee: City of Flint	
Grantee Full Address: 1101 S. Saginaw Street, Flint, MI 48502	
Grantee Primary Contact: Seamus Bannon	
Phone: 810-875-0772	Email: sbannon@cityofflint.com
Legislative Sponsor(s): Cherry	Appropriated Amount: 27,000,000.00
Cherry	Cherry

Questions for Legislative Sponsor

1. Is the legislative sponsor and/or any family members of the legislative sponsor associated with this organization? (Ex: board member, employee, financial donor, etc.) **No**
If so, please explain:

2. Does this grant comply with the provisions of Article IV, §10 of the Michigan Constitution and PA 318 of 1968, MCL 15.301 to 15.310? **Yes**

Questions for Official Grantee

1. Is the grantee a unit of local government, public authority or other political instrumentality as authorized by law, institution of higher education, or other state department? **Yes**
2. If no, is the entity registered with the department of licensing and regulatory affairs or the department of attorney general and been in existence for at least the 12 months preceding the effective date of this act? **N/A**
3. If the answers to #1 and #2 are no, does the grantee have other state or federal tax filings or other government records that demonstrate the grantee has been in existence for at least the 12 months preceding the effective date of this act? **N/A**
If yes, please attach any relevant records.

4. Please describe the public purpose of the project, demonstrating it is consistent with language authorizing grant in PA 121 of 2024. Please provide additional explanation that gives more detail than is currently contained in the boilerplate language.

\$27M in funding will be contributed to the Flint Pension Fund. For years, the city has struggled to make an actuarial determined contribution (ADC) given the funding level of the pension system. This grant will go directly to fund the city's long-term liabilities.

*Grantees can check registration with LARA [here](#) and with AG [here](#).

5. Fill out the anticipated dollar amount for each respective category of the budget, using the excel budget form provided. Please note the general administrative expense cannot exceed 10% of the grant amount.

6. Anticipated time-frame for each cost identified in the budget (this will reflect the period of the grant).

Fiscal year 2025 (July 1, 2025 to June 30, 2026)

7. I acknowledge that the boilerplate language related to this grant has been read and confirm that all requirements for the grantee and project comply with the boilerplate language pertaining to this grant. (Sign to acknowledge)

Seamus Bannon

8. I acknowledge that I will be required to submit progress reports and a final report including:

- i. A summary of the Grant Activities performed over the period determined by the department;
- ii. An accounting of Grantee's actual expenditure of all funds on the Project over the period determined by the department, including the breakdown of Grantee's actual use of Grant funds on the Project within each applicable category of the Budget, and corresponding copies of supporting documentation of such expenditures, such as receipts, general ledgers, or other evidence of expenditure activity statements; the Grantee's estimated percentage of completion of the Project; and
- iii. Any other information deemed relevant by Grantee to support the Grant Activities actually performed.

9. Identify authorized signer(s) for Grant Agreement.

Clyde W. Edwards

10. Please be advised any portion of the grant funds paid to grantee and not spent or not spent in accordance with the grant agreement must be returned to the department.

NOTICE:

This Grant Application Form is not a legally binding agreement and should not be viewed as such. Moreover, the Grant Application Form does not embody all of the terms and conditions of the grant agreement and neither the department nor the grantee will be bound until there is an executed grant agreement that sets forth all the terms and conditions.

sbannon

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Special Grant Project Budget

Please enter the major cost elements of the project, selecting from the drop down list options. If you select an activity with a ":" please add a few additional words of description in the "Other/Additional Notes" column. You will be asked to report based on these budget categories. It is recommended that the budget have between 2-5 line items. Keeping the budget at a fairly high-level minimizes the need to amend the budget if the project costs deviate slightly from the plan. The "Local" and "Other" columns are optional. Six line items is the maximum allowed.

1. Grantor: City of Flint	2. Project Title: Pension Funding Grant			
3. Project Cost Elements: Assistance with the actuarial determined contribution (ADC) for our pension payment. Activities Other: Direct Payment to Plan Provider (MERS)	A. Funding Sources: Special Grant from the FY25 Michigan budget and FY24 supplemental Michigan Enhancement Grant	Local Funding	Other Funding	Total
	\$	\$	\$	\$
Total	\$	-	-	27,000,000.00
	\$	-	-	27,000,000.00



STAFF REVIEW FORM

Effective: April 1, 2026

(Do not alter or modify this form without written permission from the City Administrator)

TODAY'S DATE: May 1, 2026

BID PROPOSAL #: N.A.

AGENDA ITEM TITLE: Law Department – Third Quarter Budget Amendment

PREPARED BY: V. Foster for J. Gurley

VENDOR NAME: N.A.

Section 1. BACKGROUND/SUMMARY OF PROPOSED ACTION..

Vendor Compliance (This vendor has been properly vetted and the responses are below) :

Federal gov't	(All documentation current, no violations)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
State gov't	(All documentation current, no violations)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
City of Flint	(All documentation current, no violations)	<input type="checkbox"/> YES	<input type="checkbox"/> NO

The requesting authority is validating that this vendor has been in full compliance with all past contract provisions and has not violated the terms of any contract with the City of Flint.

NOTE: Preparer MUST include a response to the conditions below:

- **Did we do an assessment of first consideration to internal City of Flint staff and resources (explain)?**
- **Why was this vendor chosen?**
- **What history does this vendor have with the City of Flint?**
- **What steps will be taken to do a post-performance of the vendor?**

The City's Self-Insurance Fund (677) requires additional funding to cover outstanding expenses. Unanticipated litigation costs and significant legal settlements have created a shortfall in the Self-Insurance Fund that requires replenishment through a budget transfer. The Law Department is requesting a transfer of \$3M from General Fund (101) to the Self-Insurance Fund (677).

The transfer of funds request includes an increase of the Claims & Settlements budget by \$2M and Supplies and Operating Expenses budget by \$1M to cover Professional Services, which includes outside legal counsel engaged in defending the City of Flint.

PROCUREMENT (MUST BE SPECIFIED)

Please specify how this vendor was identified: (Check one)

- Sole Source (Please attach sole source statement to requisition)
- Competitive Bid Process (Please attach bid tabulation/documents to requisition)
- Cooperative Contract (MIDeal, Sourcewell, GSA, or other municipality)
 - *Contract must be attached to your requisition and contract must appear on the vendor's quote for goods/services
- (3) Quotes (please attach all quotes to your requisition)



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Section 2. PREVIOUS ALLOCATIONS (INCLUDE ALL ACCOUNTS USED FOR THIS PURPOSE)/ PROVIDE RESOLUTION OR CONTRACT INFORMATION THAT APPLIES..

Fiscal Year	Account	PO Number	FY PO Amount	FY Expensed	Resolution

Section 3. POSSIBLE BENEFIT TO THE CITY OF FLINT (RESIDENTS AND/OR CITY OPERATIONS) INCLUDE PARTNERSHIPS AND COLLABORATIONS..

Payment of settlements as ordered by courts must be paid without delay or the city could face sanctions and additional legal fees.

Section 4. FINANCIAL IMPLICATIONS..

IF ARPA related Expenditure:

Has this request been reviewed by E&Y Firm: YES NO IF NO, PLEASE EXPLAIN:

NOTE: Accountant MUST include the following information:

- What is the total amount budgeted for this purpose?
- What percentage is being spent with this vendor?
- What is the justification for spending this amount of money with this vendor?
- What percentage is being spent out of each line item used in this request?
- List all the known budgeted funds from that line item.

BUDGETED EXPENDITURE? YES NO **IF NO, PLEASE EXPLAIN:** As stated, the funds need to be budgeted to the transfer account to then be distributed to the GLs that will fund the previously described areas of need.

Dept.	Name of Account	Account Number	Grant CODE	Amount
Legal	Transfers out (FUND 667)	101-000.000-995.667	N.A.	\$3,000,000
Legal	Transfers In (FUND 101)	677-000.000-699.101	N.A.	\$3,000,000
Legal	Professional Services	677-266.200-812.000	N.A.	\$1,000,000
Legal	Litigations & Suits	677-266.200-956.300	N.A.	\$2,000,000
FY26 GRAND TOTAL				\$3,000,000



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WHEN APPLICABLE, IF MORE THAN ONE (1) YEAR, PLEASE ESTIMATE TOTAL AMOUNT FOR EACH BUDGET YEAR: (This will depend on the term of the bid proposal)

BUDGET YEAR 1: _____

BUDGET YEAR 2: _____

BUDGET YEAR 3: _____

OTHER IMPLICATIONS (i.e., collective bargaining).. _____

PRE-ENCUMBERED? YES NO REQUISITION NO: _____

ACCOUNTING APPROVAL: [Signature] Date: 05/01/2026

WILL YOUR DEPARTMENT NEED A CONTRACT? YES NO

Section 5. RESOLUTION DEFENSE TEAM..

(Place the names of those who can defend this resolution at City Council)

	NAME	PHONE NUMBER
1	Joanne Gurley, City Attorney	766-7146
2	Phillip Moore, Chief Financial Officer	766-7266
3		
4		

STAFF RECOMMENDATION: (PLEASE SELECT): APPROVED NOT APPROVED

DEPARTMENT HEAD SIGNATURE: [Signature]
JoAnne Gurley (May 1, 2026 15:52:17 EDT)
(Name, Title)

ADMINISTRATION APPROVAL: [Signature]
Clyde Edwards/ A0641 (May 1, 2026 16:20:37 EDT)
(\$20,000 or above spending authorizations)

Section 6. VENDOR EVALUATION..



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Business Title:

Vendor ID:

Review Period:

Department:

Project Name:

Project Type:

Vendor Goals:

	1 = Poor	2 = Fair	3 = Sufficient	4 = Good	5 = Excellent
Job Knowledge:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work Quality:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Timeliness:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compliance with Contract:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Warranty (If Product):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsiveness:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cost Effectiveness:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Total Performance:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Rating:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DEFECTS (IF ANY): IF CHECKED, PLEASE EXPLAIN:



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Performance / Other Comments:

REVIEWER'S SIGNATURE: _____

Date: _____

