



## Jefferson County Board of Health Agenda

1541 Annex Road, Jefferson, WI 53549

920-674-7275

October 15<sup>th</sup>, 2025

1:00 p.m.

Jefferson County Courthouse

311 S. Center Avenue, RM C1021

Jefferson, WI 53549

[Join the meeting now](#)

Meeting ID: 293 636 423 962 6

Passcode: fn6eL2xu

### Board Members

Samantha LaMuro, R.T, Chair; Meg Turville-Heitz, Vice-Chair; Steve Nass; Jessica Coburn, RN, PhD; Donald Williams, MD

1. Call to Order
2. Roll Call (establish a quorum)
3. Certification of Compliance with the Open Meetings Law
4. Approval of the Agenda
5. Approval of Board of Health Meeting Minutes from July 16<sup>th</sup>, 2025
6. Communications
  - a. [Ebola Outbreak in the Democratic Republic of Congo](#)
7. Public Comment
8. Approval of Health Department Financial Report
9. Discussion and Approval of the Environmental Data Tracking Grant
10. Operational Update of the Environmental Public Health Consortium
11. Operational Update of the Public Health Divisions
  - a. Divisional Updates
    - i. Access to & Linkage with Clinical Care
    - ii. Maternal Child & Family Health
    - iii. Communicable Disease Control
    - iv. Chronic Disease and Injury Prevention
    - v. Environmental Public Health
12. Operational Update on Avian Influenza Outbreaks
13. Operational Update on the Strategic Plan
14. Future Agenda Items
15. Adjourn

### **Next Scheduled Meeting: January 21<sup>st</sup>, 2026**

*A Quorum of any Jefferson County Committee, Board, Commission or other body, including the Jefferson County Board of Supervisors, may be present at this meeting.*

*Individuals requiring special accommodations for attendance at the meeting should contact the County Administrator at 920-674-7101 24 hours prior to the meeting so appropriate arrangements can be made.*



**Jefferson County Health Department**  
**1541 Annex Road, Jefferson, WI 53549**  
**920-674-7275**

**Jefferson County Board of Health Minutes**  
**July 16, 2025**  
**Jefferson County Courthouse**  
**311 S. Center Avenue, County Board Room C1021**  
**Jefferson, WI 53549**  
**or Zoom Meeting**

**Board Members**

**Samantha LaMuro, R.T, Chair; Meg Turville-Heitz, Vice-Chair; Steve Nass;**  
**Jessica Coburn, RN, PhD; Donald Williams, MD**

1. **Call to Order:** Meeting was called to order by LaMuro at 1:00 p.m.
2. **Roll Call (establish a quorum):**  
Board of Health Members Present: Samantha LaMuro, R.T.; Meg Turville-Heitz; Steve Nass; Donald Williams, M.D. (came in after roll call) **Quorum established per LaMuro.**  
Others Present: Elizabeth McGeary, Director; Kendell Cooper, Public Health Program Manager; Michele Schmidt, Recorder; Holly Hisel, Environmental Health (via zoom); Patricia Cicero, Land and Water Conservation Director.  
Guest: Anita Martin, Janet Foust and Ronni Monroe.
3. **Certification of Compliance with the Open Meetings Law:** McGeary certified compliance with the Open Meetings Law.
4. **Approval of the Agenda:** No changes to the Agenda were requested. Motion by Nass/Turville-Heitz to approve the Agenda. Motion passed 3-0.
5. **Approval of Board of Health Meeting Minutes from April 16<sup>th</sup>, 2025:** Motion by Turville-Heitz/Nass to approve the minutes as printed. Motion passed 3-0.
6. **Communications:** None at this time.
7. **Public Comment:** 2 guests spoke.
8. **Approval of Health Department Financial Report:** Schmidt reviewed the "May 2025 Statement of Revenue & Expense Report". Turville-Heitz questioned about current status and McGeary discussed changes in grant funding. Motion by Nass/Turville-Heitz to approve the financial report. Motion passed 4-0.
9. **Approval of the 2024 Health Department Annual Report:** McGeary discussed and reported there are 2 corrections to be made on page 12. Williams would like a change on page 10 regarding his place of employment, change from "Internal Medicine and Pediatrics to Rock River Community Clinic". Nass, Turville-Heitz and LaMuro would like a change to their credentials on page 10. Nass to add P.T., LAT, Turville-Heitz to add PhD, and LaMuro to add CIC, R.T.(R), ARRT. Motion by Nass/Williams to approve the Annual Report with these changes. Motion passed 4-0.

- 10. Operational Update of the Environmental Health Program:** Hisel discussed working on renewal licenses. Hisel reported Sydney Bohman has been hired to replace Kaylie. Sydney has started training with Tyler. Halfway through beach sampling. Hisel discussed issues with some public pools.
- 11. Discussion on Mandated Services of the Local Health Department:** McGeary gave a screen presentation. Nass and Turville-Heitz commented that McGeary should speak with Joan Fitzgerald and Melissa regarding Public Health funding.
- 12. Operational Update of the Public Health Divisions**
- a. Divisional Updates
    - i. Access to & Linkage with Clinical Care - McGeary discussed changes with immunizations and IGRA planning.
    - ii. Maternal Child & Family Health – McGeary discussed and commented that Maria de la luz Lira received a “Nurse of the Year Award”.
    - iii. Communicable Disease Control – McGeary discussed and Cooper reviewed the CDs.
    - iv. Chronic Disease and Injury Prevention – McGeary discussed.
    - v. Environmental Public Health – McGeary discussed. McGeary reported about the Arsenic testing, tick drags and Purple Air Monitors. Guest made a public comment. McGeary discussed the comments made during Public Comment.
  - b. Staffing Vacancies – not discussed.
- 13. Operational Update on the Strategic Plan:** McGeary reported changes in the VISTA Program.
- 14. Future Agenda Items:** No future Agenda items requested at this time.
- 15. Adjourn:** Motion by Turville-Heitz/Nass to adjourn the meeting at 2:19 p.m. Motion passed 4-0.

**Next Scheduled Meeting: October 15th, 2025**

*Minutes prepared by: Michele Schmidt, Accountant II, Jefferson County Health Department and reviewed by Elizabeth McGeary, Director/Health Officer.*



-	January	February	March	April	May	June	July	August	September	October	November	December	2025 Total	Staff Member Responsible
Administration Division														
Please refer to Strategic Plan for variety of Outcomes/Objectives														
Students	2	2	3	2	1	0	0	0	8				18	Kendell
Number of Staff Trainings	25	9	10	12	7	1	3	3	4				74	Kendell- ALL staff to write their trainings on the tab
Number of Communication Channels Utilized	3	3	3	4	3	3	4	4	4				31	Kendell
Social Media (Posts)	85	70	74	95	91	74	71	65	75				700	Kendell- All staff to send enter their data into the <a href="#">social media posts</a> spreadsheet
Social Media (Reach)	10,240	5760	6383	13,197	7080	20,444	51,600	7878	9,552				132,134	Kendell- All staff to send enter their data into the <a href="#">social media posts</a> spreadsheet
Social Media Engogments	243	101	120	209	121	351	548	180	189				2062	Kendell- All staff to send enter their data into the <a href="#">social media posts</a> spreadsheet
Social Media (Reach/Post)	348	294	245	437	266	751	3565	445	395				6746	Kendell
Memos (Updates) Provided on Current Health Issues	0	3	3	3	0	1	3	1	4				18	Elizabeth
# of Poster Presentations	0	1	0	0	1	0	0	0	0				2	Staff to notify Elizabeth
Number of Partners	96	96	96	99	99	99	99	99	99				882	Elizabeth
Long Term Grant Proposals	0	1	0	0	1	0	0	0	0				2	Elizabeth
Short Term Grant Proposals	0	0	1	1	2	2	1	1	0				8	Elizabeth
Maternal, Child, and Family Health Division														
Outcome: Families, especially infants and young children in Jefferson County are healthy and well.														
Strategic Plan: Objective 4.3: By July 1st, 2026, significantly improve maternal and child health outcomes across relevant public health measures.														
PNCC Referrals	8	5	13	12	12	10	11	14	13				98	Maria
PNCC Clients	22	13	15	17	18	17	16	18	16				152	Maria
# of Provider Referrals	5	3	6	8	11	5	9	5	8				60	Maria
Number of home visits to at risk mothers and babies	22	13	15	17	18	17	16	18	16				152	Maria
PNCC Billable Services	29	21	18	28	22	27	14	11	16				186	Michele
TalkReadPlay Referrals	0	0	0	0	0	0	0	0	0				0	Maria
TalkReadPlay Visits	0	0	0	0	0	0	0	0	0				0	Maria

-	January	February	March	April	May	June	July	August	September	October	November	December	2025 Total	Staff Member Responsible
Talk ReadPlay Clients	0	0	0	0	0	0	0	0	0				0	Maria
Breast Feeding Support Groups	0	0	0	0	0	0	0	0	0				0	Maria
Breast Feeding Support Group Attendees	0	0	0	0	0	0	0	0	0				0	Maria
Headstart CarePlans	0	1	1	0	2	1	1	6	2				14	Kathryn
Headstart Menu Analysis Hours	1.5	1.5	2	1.5	0.75	0	0	2	/					Amy
Headstart Nutrition Care Plans	0	0	1	0	1	0	1	15	3				21	Amy
School Consultations	4	0	2	2	1	0	2	2	1				14	Brittany
Daycare Consultations	0	0	0	0	1	0	0	0	0				1	Brittany
ASQ Screenings Completed	0	0	9	0	0	0	0	0	0				9	Maria
# of ASQs that required referral	0	0	0	0	0	0	0	0	0				0	Maria
Breast Feeding Support Visits Provided	2	1	0	1	1	0	1	0	0				6	Maria
Number of Parenting Groups Provided	1	1	1	1	1	1	1	1	1				9	Maria
Number in attendance of Parenting Group	3	4	16	20	5	18	11	21	7				175	Maria
Number of new baby letters sent	44	72	55	53	72	72	55	49	16				44	Patty
WIC Caseload Average	Final - 1172	Final - 1140	Final- 1154	Final - 1153	Final - 1129	Final- 1124	Final - 1128	Final - 1146	Initial - 1146					Jennifer
WIC Breastfeeding Peer Support Contacts	142	130	154	160	135	120	119	114	137				1211	Jennifer
Access to and Linkage with Clinical Care Outcome: Improve Children's health and access to routine early childhood hearing and vision screenings. Outcome: Achieve and maintain effective vaccination coverage levels for universally recommended vaccines among children Outcome: Increase routine vaccine coverage for adolescents Outcome: Increase percentage of people who are vaccinated annually against influenza Strategic Plan: Objective 4.5: By July 1st, 2026, enhance clinical service delivery to underserved and high-risk populations.														
# VFC Vaccinations Provided (exclude covid-19 and flu)	20	10	11	12	15	9	16	13	20				126	Brittany
# VFA Vaccinations Provided (exclude covid-19 and flu)	38	21	18	47	11	9	13	22	17				196	Brittany
Clinic Immunization Clients	24	17	13	22	13	7	15	15	15				141	Brittany

## Jefferson County Health Department

-	January	February	March	April	May	June	July	August	September	October	November	December	2025 Total	Staff Member Responsible						
Clinic Total Immunizations	73	41	34	66	26	19	29	35	38				361	Brittany						
# of children age 0-24 months recieving vaccinations	2	1	2	1	2	2	1	0	1				12	Brittany						
# of children age 3-5 years recieving vaccinations	2	3	1	2	1	0	0	2	2				13	Brittany						
# of school age children 6-12 years recieving vaccinations	4	2	1	1	3	0	2	10	4				27	Brittany						
# of adolescents 13-18 receiving vaccinations	5	1	1	1	3	1	3	1	1				17	Brittany						
# of HPV vaccinations administered to females	2	0	0	1	4	1	2	0	2				12	Brittany						
# of HPV Vaccinations administered to males	2	1	0	1	0	0	2	0	0				6	Brittany						
# of Influenza vaccinations provided	10	7	3	6	0	1	0	0	0				27	Brittany						
# of COVID-19 Vaccinations	5	3	2	1	0	0	0	1	0				12	Brittany						
Pregnancy Tests administered	1	2	1	1	3	2	1	0	2				13	Brittany						
TB Skin tests placed	4	6	8	8	5	10	7	4					52	Patty						
TB skin tests read	4	6	8	7	5	10	7	4					51	Patty						
# of IGRAs performed	-	2	0	0	0	0	5	4	2				13	Brittany						
Hearing Screenings Performed	0	0	0	0	0	0	0	0	299				299	Brittany						
# of children re-screened	0	0	0	0	0	0	0	0	0				0	Brittany						
Number of Children Referred for Hearing Concern	0	0	0	0	0	0	0	0	0				0	Brittany						
Vision Screenings Performed	0	0	0	0	0	0	0	0	608				608	Brittany						
Number of Children Referred for Vision Concern	0	0	0	0	0	0	0	0	47				47	Brittany						
# of Mobile Clinics	0	0	0	0	0	0	0	0	0				0	Brittany						



-	January	February	March	April	May	June	July	August	September	October	November	December	2025 Total	Staff Member Responsible
County Wide Blood Lead Level Screenings	57	50	56	87	59	60	67	61	65				562	Maria
Case Managed Blood Lead Level (>10ug/dl)	1	0	0	1	0	0	0	0	3				5	Maria
Case Managed Blood Lead Level (3.5-9ug/dl)	6	3	1	2	2	3	4	2	4				27	Maria
Lead Level (<3.5ug/dl)	50	47	55	78	57	57	63	59	58				524	Maria
Lead Nurse Home Visit	0	1	0	0	0	0	0	1	2				4	Maria
PHVM # Items distributed	180	205	515	383	410	224	257	250	485				2909	Vanessa
# of Narcan distributed	27	108	0	69	26	0	217	28	2				477	Vanessa
# of FTS distributed	0	700	0	0	200	0	30	3000	40				3970	Vanessa
# of xylazine distributed	---	---	---	---	---	---	40	0	0				40	Vanessa
# of DFC items distributed (Deterro, lockboxes/bags)	0	0	0	15	15	24	16	39	54				163	Vanessa
# of tobacco compliance checks completed	0	0	56	0	0	0	0	0	0				56	Vanessa
# of alcohol compliance checks completed	0	50	0	0	0	0	20	0	0				70	Vanessa
# of Hidden in Plain Sight demonstrations	0	1	1	0	0	0	0	0	0				2	Vanessa
# of trainings/conferences made possible by JCDFC	0	0	5	0	3	0	4	2	11				25	Vanessa

#### Communicable Disease Division

**Outcome:** Reduce Preventable Infectious Disease  
**Strategic Plan:** Objective 4.2: Communicable Disease: By July 1st, 2026, reduce the annual incidence of all communicable diseases, excluding COVID-19, by 5%.

Total Disease Investigations Conducted	479	683	203	103	86	100	115	108	112				1989	Kathryn
Confirmed Disease Investigations Conducted	356	594	134	40	26	32	36	32	42				1292	Kathryn
Total Probable and Suspect Cases	20	12	18	20	18	23	36	38	27				212	Kathryn
Total Category I Diseases Confirmed	2	1	1	1	1	0	0	1	0				7	Kathryn
Total Category II Diseases Confirmed	354	593	133	39	25	32	36	31	42				1285	Kathryn
# of confirmed STIs	7	7	14	10	15	10	13	9	10				95	Kathryn
Confirmed TB Cases	1	0	0	0	0	0	0	0	0				1	Kathryn

Changed from 5 to 3.5 as of October



-	January	February	March	April	May	June	July	August	September	October	November	December	2025 Total	Staff Member Responsible
Reported LTBI Cases	3	2	4	3	3	2	10	9	5				41	Kathryn
Outbreaks/Trends Investigated	3	5	0	1	1	0	0	1	2				13	Kathryn
# of MDRO Investigated	1	0	1	2	0	1	0	1	1				7	Kathryn
Influenza Cases	198	373	57	9	4	2	0	1	2				646	Kathryn
Hospitalized Influenza Cases	33	63	18	3	0	0	0	0	2				119	Kathryn
STI Kits Given	1	1	1	0	6	1		0	0				10	Brittany/Sarah
# of Enteric Samples collected	3	0	0	0	0	0	0	0	0					Kathryn
Specimen Submission for Rabies	7	1	5	2	5	6	1	5	3				35	Kathryn

**Environmental Health Division**  
*Strategic Plan:* Objective 4.9: By July 1st, 2026, assess environmental hazards in Jefferson County and address as appropriate.

Retail Food Serving Meals Inspections	27	23	58	30	33	32	18	32	18				271	Holly/Mary
Retail Food not serving meals Inspections	31	38	18	22	14	12	6	6	10				157	Holly/Mary
School Inspections	2	2	14	10	7	0	0	0	0				35	Holly/Mary
Tattoo & Body Piercing	0	0	0	0	0	0	0	0	0				0	Holly/Mary
Lodging	6	17	11	13	5	14	9	2	5				82	Holly/Mary
Campgrounds	0	0	0	1	4	10	0	1	2				18	Holly/Mary
Pools	17	17	12	18	14	19	18	18	11				144	Holly/Mary
Re-Ed Camps	0	0	0	0	2	0	1	0	0				3	Holly/Mary
Beach Water Sampling	0	0	0	0	3	12	15	12	0				42	Holly/Mary
Radon Kits Provided	37	15	4	2	8	2	0	2	0				70	Patty
Human Health Hazard Complaints	3	3	2	2	0	0	4	4	1				19	Holly/Mary
Well Water Testing	1	2	2	5	0	1	4	1	1				17	Patty
Elevated Blood Lead Level Inspection	0	0	0	0	0	0	0	0	1				1	Maria

Emergency Preparedness (This is not a division but rather woven into each Public Health Foundational Area)

## Jefferson County Health Department

[illegible]



## Highly Pathogenic Avian Influenza Confirmed in Jefferson County

**FOR IMMEDIATE RELEASE:** October 2, 2025

**Contact:** Molly Mueller, Public Information Officer, (608) 910-1929

[molly.mueller@wisconsin.gov](mailto:molly.mueller@wisconsin.gov)

MADISON, Wis. – The Wisconsin Department of Agriculture, Trade and Consumer Protection (DATCP) has identified a case of highly pathogenic avian influenza (HPAI H5N1) in a commercial poultry flock in Jefferson County.

DATCP and the U.S. Department of Agriculture (USDA) animal health officials are working together in a joint incident response. The affected premises has been quarantined to restrict movement of poultry and poultry products. Birds on the property will be depopulated to prevent the spread of the disease. Birds from the flock will not enter the food system.

The H5N1 HPAI virus has continued to circulate in both wild and domestic birds in North America since December 2021. H5N1 HPAI viruses are highly contagious and often fatal to domestic poultry. Caused by influenza type A viruses, the disease varies in severity depending on the strain and species affected. The disease can be spread by contact with infected birds, commingling with wild birds or their droppings, equipment, or clothing worn by anyone working with the animals.

DATCP continues to urge all livestock owners to [implement strong biosecurity measures](#) to protect their flocks and herds from the disease. This includes washing hands, disinfecting equipment, restricting access to animals, and separating new additions to the flock or herd for at least 30 days. Poultry owners are asked, when possible, to keep their birds indoors.

When HPAI H5N1 is diagnosed in a Wisconsin poultry flock, a [control area](#) is established within a 10 kilometer area around the infected premises, restricting movement on or off any premises with poultry. To help producers determine if their poultry are located within an active control area or surveillance zone, poultry owners are encouraged to use DATCP's [mapping tool](#).

The Wisconsin Department of Health Services (DHS) and Jefferson County Public Health are monitoring exposed farm workers for HPAI symptoms. The risk to the general public in Wisconsin remains low. Prevention information for farmworkers or others who have close contact with birds, dairy cows, or other relevant animals can be found under [Protective Actions for People](#).

DATCP reminds Wisconsin livestock owners to register their premises. State law requires that all livestock owners register where their animals are kept. Registration helps animal health officials communicate with flock and herd owners during disease outbreaks.

To report increased mortality or signs of illness among domestic birds, dairy cattle, or other animals, contact DATCP by following the instructions on the [Animal Disease Reporting webpage](#). For updates on how the virus is affecting domestic birds in Wisconsin, and to find resources on protecting Wisconsin poultry, visit DATCP's HPAI in Poultry webpage: [https://datcp.wi.gov/Pages/Programs\\_Services/HPAIWisconsin.aspx](https://datcp.wi.gov/Pages/Programs_Services/HPAIWisconsin.aspx).

### H5N1 in Other Species

The HPAI H5N1 virus has continued to circulate in both wild and domestic birds in North

America since December 2021. Since that time, the H5N1 virus has also affected other species, including mammalian species. To date, Wisconsin has not identified an H5N1 infection in dairy herds in the state. DATCP continues to work with USDA to conduct testing for H5N1, encourage biosecurity, and provide resources to producers.

For updates on how the H5N1 virus is affecting dairy cattle across the country, and to find resources on protecting Wisconsin dairy cattle, visit DATCP's H5N1 in Dairy Cattle webpage: [https://datcp.wi.gov/Pages/Programs\\_Services/AvianInfluenzaCattle.aspx](https://datcp.wi.gov/Pages/Programs_Services/AvianInfluenzaCattle.aspx).

###

*Find more DATCP news in our [newsroom](#), on [Facebook](#), [X](#), and [Instagram](#).*



# Well Water Sampling Information

## For Residents Near the 2025 Avian Influenza Compost Site (Zion & Hooper Road, Palmyra, WI)

The Jefferson County Health Department understands that residents living near the 2025 Avian Influenza Compost Site may have questions or concerns about their drinking water. To help ensure your water remains safe, we are offering voluntary well water testing for homes located within approximately one-half mile of the site — or in the surrounding area.

This testing effort is part of ongoing partnership between the Jefferson County Health Department, the Wisconsin Department of Health Services (DHS), and the Jefferson County Land and Water Conservation Department. Together, we have reviewed local soil and groundwater data and developed a testing schedule designed to monitor and protect community health.

## Sampling Schedule

- Baseline Sample: Collected within the next two weeks
- Second Sample: Collected approximately six months after the baseline
- Final Sample: Collected approximately twelve months after the baseline

A minimum of three samples will be collected from each participating household to monitor any changes over time. We will also review well construction reports and groundwater data to determine if any additional, or earlier, testing may be needed.

## Scheduling Your Sampling

If you would like your well water tested, please scan the QR code. We will do our best to accommodate your preferred date and time for sampling. A follow-up phone call or email will be sent to confirm and finalize your appointment.



**If you notice any sudden changes in your water's taste, color, or odor, please do not drink or use the water and contact the Jefferson County Health Department immediately at (920) 674-7275.**

Disease	Probable & Suspect January 2025	Probable & Suspect February 2025	Probable & Suspect March 2025	Probable & Suspect April 2025	Probable & Suspect May 2025	Probable & Suspect June 2025	Probable & Suspect July 2025	Probable & Suspect August 2025	Probable & Suspect September 2025	Probable & Suspect October 2025	Probable & Suspect November 2025	Probable & Suspect December 2025
Enteric/Gastrointestinal												
Campylobacteriosis	1	2	5	1	-	2	6	3	-	-	-	-
Cryptosporidiosis	-	-	-	-	1	-	-	1	-	-	-	-
Cyclosporiasis	-	-	-	-	-	-	-	-	-	-	-	-
E. Coll	8	4	2	4	3	5	7	16	9	-	-	-
Giardiasis	-	-	-	-	1	-	-	-	-	-	-	-
Listeriosis	-	-	-	-	-	-	-	-	-	-	-	-
Plesiomonas Infection	-	-	-	-	-	-	-	-	-	-	-	-
Salmonellosis	-	1	-	-	2	3	1	-	-	-	-	-
Shigellosis	-	-	-	-	-	-	-	-	-	-	-	-
Vibriosis, Non Cholera	-	-	-	-	-	-	-	-	-	-	-	-
Yersiniosis	-	1	-	-	1	1	-	-	-	-	-	-
Invasive Bacteria												
Invasive Strep A & B	-	-	-	-	-	-	-	-	-	-	-	-
Invasive Strep (Other)	-	-	-	-	-	-	-	-	-	-	-	-
Mycotic (fungal)												
Blastomycosis	-	-	-	-	-	-	-	-	-	-	-	-
Coccidioidomycosis	-	-	-	-	-	-	-	-	-	-	-	-
Histoplasmosis	1	-	-	-	1	-	-	-	-	-	-	-
Respiratory												
Asbestosis	-	-	1	1	1	1	-	-	1	-	-	-
Influenza	-	2	2	1	-	-	-	-	-	-	-	-
Influenza Hospitalizations	-	-	-	-	-	-	-	-	-	-	-	-
Respiratory Syncytial Virus (RSV)	-	-	-	-	-	-	-	-	-	-	-	-
RSV Hospitalizations	-	-	-	-	-	-	-	-	-	-	-	-
Covid-19 Hospitalizations	-	-	-	-	-	-	-	-	-	-	-	-
Legionellosis	-	-	-	-	-	-	-	-	-	-	-	-
Silicosis	-	-	-	2	-	-	-	-	-	-	-	-
Tuberculosis, Class A or B	-	-	-	-	-	-	-	-	1	-	-	-
Tuberculosis	-	-	-	-	-	-	-	1	-	-	-	-
Latent Tuberculosis	2	-	4	2	2	2	4	4	3	-	-	-
Sexually Transmitted												
Chlamydia Trachomatis	-	-	-	-	-	-	-	-	-	-	-	-
Gonorrhea	-	-	-	-	-	-	-	-	-	-	-	-
Vaccine Preventable												
Haemophilus Influenzae Invasive Disease	-	-	-	-	-	-	-	-	-	-	-	-
Hepatitis A	-	-	-	-	-	-	-	-	-	-	-	-
Hepatitis B, Acute	-	-	-	-	-	-	-	-	-	-	-	-
Hepatitis B, Chronic	-	-	-	-	-	-	-	-	1	-	-	-
Mumps	-	-	-	-	-	-	-	-	-	-	-	-
Pertussis	-	-	-	-	1	-	-	-	-	-	-	-
Strep Pneumonia	-	-	-	-	-	-	-	-	-	-	-	-
Varicella (Chickenpox)	-	1	-	-	-	-	-	-	-	-	-	-
Vectorborne												
Anaplasmosis	-	-	-	-	-	-	-	-	-	-	-	-
Arboviral Illness	-	-	-	-	-	-	-	-	-	-	-	-
West Nile Virus	-	-	-	-	-	-	-	-	-	-	-	-
Spotted Fever Rickettsiosis	-	-	-	-	-	1	-	-	-	-	-	-
Babesiosis	1	-	-	3	4	-	-	-	-	-	-	-
Lyme Disease	-	-	-	-	-	6	13	3	3	-	-	-
Toxoplasmosis	-	-	-	-	-	-	-	-	1	-	-	-
Zoonotic												
Brucellosis	-	-	1	-	-	-	-	-	-	-	-	-
Q Fever	-	-	-	-	-	-	-	-	-	-	-	-
Other												
Carbon Monoxide Poisoning	-	-	-	-	-	-	-	1	-	-	-	-
Hepatitis C, Acute	-	-	-	-	-	-	-	-	-	-	-	-
Hepatitis C, Chronic	-	-	2	-	-	-	1	-	-	-	-	-
Multidrug Resistant Organisms (MDROs)	1	-	-	1	-	-	-	1	-	-	-	-
Methicillin Resistant Staph Aureus (MRSA)	-	-	-	-	-	-	-	-	-	-	-	-
Mycobacterial Disease	-	-	-	-	-	-	-	-	-	-	-	-
Norovirus Infection	-	-	-	-	-	-	-	-	-	-	-	-
Total	14	11	17	15	17	21	32	30	19	0	0	0



# 2025-2026 Taking Action with Data Application Form

## APPLICANT INFORMATION

**Agency Name:** Jefferson County Health Department

**Agency Address:** 1541 Annex Road Jefferson, WI 53549

**Name of Project Lead:** Elizabeth M. McGeary

**Project Lead's Phone Number:** 920-674-7275

**Project Lead's Email Address:** emcgeary@jeffersoncountywi.gov

## OVERVIEW

**Name of Project:** Jefferson County Arsenic Risk Reduction Initiative

**Project Topic:** Water Quality- Arsenic

**Provide an overview of your project in 3-5 sentences:**

*The Jefferson County Health Department is launching a targeted initiative to identify and reduce exposure to arsenic in private wells. Using prior study data and geologic information, staff will engage households in priority areas and collect a minimum of 110 water samples for laboratory analysis. Homeowners will receive individualized results and mitigation guidance, while the broader community will benefit from educational sessions and the distribution of arsenic awareness materials to at least 500 residents. Finally, validated results will be shared with research partners, including Wisconsin Geological and Natural History Survey (WGNHS) to support the development of a county-wide predictive model of arsenic risk. Together, these efforts will address immediate exposure concerns while building long-term capacity to protect safe drinking water in Jefferson County.*

## TARGET POPULATION, BURDEN, AND NEED (15 POINTS)

**What jurisdiction and/or target population(s) will the project cover?**

*This project will serve residents of Jefferson County, Wisconsin, a predominantly rural county of approximately 85,000 people located in southeastern Wisconsin. More than one-quarter of households in Jefferson County rely on private wells for their drinking water, making them responsible for monitoring and maintaining their own water quality. Unlike municipal systems, private wells are not subject to routine regulatory testing, leaving homeowners particularly vulnerable to naturally occurring contaminants such as arsenic which isn't part of typical testing or testing when purchasing a home. The county includes a mix of rural communities, small towns, and growing suburban areas, with pockets of agricultural activity that can compound groundwater concerns. Spanish-speaking households represent a significant and growing portion of the county's population, particularly in communities such as Watertown and Palmyra. By focusing on private well users across Jefferson County, including areas where past studies have indicated higher arsenic risk, this project will directly reach households likely to be affected.*

**What is the burden of the selected environmental issue in your jurisdiction?**

*In 2023, the Jefferson County Land and Water Conservation Department (LWCD), Jefferson County Health Department, and UW–Stevens Point College of Natural Resources: Center for Watershed Science and Education partnered to conduct a comprehensive groundwater study. The goals were to evaluate drinking water quality, understand the impacts of land use and geology on groundwater, and assist rural residents in managing their private well systems. Of the 828 water samples collected and analyzed for 16 water quality parameters, 7% exceeded the EPA’s health-based drinking water standard for arsenic (0.010 mg/L). Even more concerning, arsenic was detected at any level in 27% of wells tested. Arsenic in private well water is a more significant problem in Jefferson County compared to statewide averages. According to the Wisconsin County Environmental Health Profiles, only 2.43% of arsenic test results for private wells statewide exceed the EPA standard in Wisconsin. In contrast, Jefferson County’s exceedance rate in 2024 was 12%, nearly five times higher.*

**Explain why this issue needs to be addressed.**

*These findings reveal a troubling and disproportionate burden of arsenic exposure for Jefferson County residents, many of whom rely solely on private wells for drinking water. Private wells are not subject to routine regulatory monitoring, meaning households may unknowingly consume unsafe water for years. Chronic arsenic exposure is linked to severe health outcomes, including skin lesions, cardiovascular disease, and an increased risk of certain cancers. Infants are also especially sensitive to arsenic that can affect cognitive development.*

**Describe how health equity will be considered in this project.**

*Access to safe drinking water is a fundamental public health necessity, yet for many Jefferson County residents, particularly those in rural and low-income households, this access is not guaranteed. Unlike municipal water systems, private wells are not routinely monitored, and the cost of water testing and mitigation can be a barrier for households with limited resources. With arsenic exceedances nearly five times more common in Jefferson County than the Wisconsin average, the disproportionate burden falls most heavily on rural households, who often have fewer options for alternative water sources, may face transportation, language, or income-related barriers to testing and remediation. This project will be designed with health equity at the center by removing cost barriers to arsenic (and other constituent) testing and providing culturally and linguistically appropriate education materials. By ensuring that residents most at risk for arsenic exposure are reached, informed, and supported, this project will help close the gap in drinking water safety across Jefferson County. The result will be not only improved health outcomes, but also a more equitable distribution of environmental health protections.*

**PROJECT DESCRIPTION (15 POINTS)**

**Provide a detailed description of the project in no more than one page.**

*The Jefferson County Health Department (JCHD) is implementing a comprehensive initiative to identify and reduce exposure to arsenic in private well water. Arsenic, a naturally occurring groundwater contaminant, poses significant health risks including cancer and cardiovascular disease. To better understand and reduce household exposure, by March 2026, JCHD will identify and engage at least 275 households, including those in areas where data indicate high arsenic levels. Using past study results, staff will conduct bilingual outreach through letters, fact sheets, social media, and direct homeowner contact. By September 2026, JCHD will obtain and analyze a minimum of 110 private well samples. To encourage participation, homeowners will be offered the Metals Package with conductivity through the University of Wisconsin–Stevens Point Water and Environmental Analysis Laboratory (WEAL). This package not only tests arsenic but also includes additional metals such as lead, manganese, copper, iron, and conductivity, providing homeowners with a more comprehensive understanding of their water quality. Offering this package is both an incentive for volunteers and a way to ensure consistency with the 2023 groundwater quality study, which used the same panel of tests. Homeowners will receive sampling kits with clear instructions and accessible drop-off*



*options. WEAL will conduct the laboratory analysis, while JCHD will track results in a secure database. Every participating household will receive a personalized report with results explained in plain language, along with mitigation guidance and educational follow-up. This ensures 100% of participants not only gain actionable information about arsenic risk but also receive broader insight into the safety of their drinking water.*

*It will be important through this initiative to increase awareness and build long-term capacity. By August 2026, JCHD will increase community awareness by distributing arsenic education materials to at least 500 residents, hosting three community sessions, and publishing a fact sheet summarizing findings and resources. To build long-term capacity, JCHD will maintain a secure database of all arsenic results and convene quarterly stakeholder meetings with WGNHS, UWSP, and LWCD. As appropriate, JCHD will also communicate with Department of Natural Resources (DNR), and DHS. By August 2026, a finalized dataset of a minimum 110 validated results will be transferred to research partners (WGNHS) for inclusion in a county-wide arsenic risk model. This model will allow us to further research into the arsenic risk across Jefferson County.*

*This project directly addresses both immediate exposure risks and long-term solutions. Residents will gain access to testing, timely results, and clear mitigation guidance. Vulnerable and Spanish-speaking households will be prioritized through bilingual outreach. At the same time, the validated dataset will inform a predictive risk model that strengthens local and state capacity to identify high-risk areas and guide future water safety policy. Through this dual focus on community action and research collaboration, Jefferson County will reduce current exposure risks while building the evidence base needed to protect future generations.*

## **PARTNERS AND STAKEHOLDER ENGAGEMENT (15 POINTS)**

**Describe the role that collaborating partners (both existing and new) will plan in the project. Include details on partner engagement, participation, and responsibilities.**

*Implementation of this project will significantly expand collaboration between Jefferson County and a variety of internal and external stakeholders, fostering new connections while strengthening existing partnerships. The Jefferson County Health Department (JCHD) and the Jefferson County Land and Water Conservation Department (LWCD) have a long history of working together on groundwater protection and agricultural best practices. Past joint initiatives include educational sessions on aerial spreading of manure and the 2023 groundwater study, which provided valuable baseline data on arsenic risk factors. These experiences have established a strong foundation of trust and cooperation that will continue throughout this project. (Letter of Support Appendix A).*

*Partner engagement will be structured, frequent, and purposeful. JCHD and LWCD will meet regularly to coordinate household outreach, sample collection logistics, and community education efforts. LWCD will play a critical role in connecting with rural households and agricultural landowners, providing context on land use and conservation practices that influence groundwater quality.*

*Academic and research partners will also remain central to this initiative. The University of Wisconsin–Stevens Point’s Center for Watershed Science and Education (WEAL) has collaborated with Jefferson County on multiple occasions to provide technical expertise, data collection support, and laboratory analysis. WEAL will analyze water samples for this project, including arsenic and other metals, and provide detailed reports to JCHD for use in both household education and county-wide risk assessment. (Letter of Support-Appendix B)*

*The Wisconsin Geological and Natural History Survey (WGNHS) will continue its role as a research partner, analyzing the expanded dataset and incorporating new well sampling into predictive models of arsenic risk. (Letter of Support-Appendix C). The results of the arsenic risk model will be used by Jefferson County to plan additional education and arsenic sampling to private well owners. The work completed by WGNHS will assist them in future development of arsenic risk models for other areas in Wisconsin, particularly nearby counties of Dodge, Fond du Lac, and Walworth.*

*In summary, this project will be carried out through a coordinated network of partners with clearly defined roles:*

- *JCHD: Project lead; household outreach; coordination of sampling; communication of results; education and follow-up.*
- *LWCD: Outreach to rural households and agricultural stakeholders; integration of conservation practices; partner engagement.*
- *WEAL: Laboratory analysis; technical expertise; support with data interpretation.*
- *WGNHS: Predictive modeling; mapping tool development; refinement of risk communication; research dissemination.*

*This collaboration ensures that project implementation is community-focused, scientifically rigorous, and policy-informed, addressing both immediate exposure concerns and long-term groundwater safety.*

## PROJECT WORK PLAN AND PERFORMANCE MEASUREMENT (50 POINTS)

### Goals, Objectives, Performance Measures, Activities, Person(s) Responsible, and Timeline

All items below should be included in the work plan table. We strongly recommend referencing the Application Content section (pages 9-11) of the RFA and Appendix B for detailed instructions and examples. In addition, the scoring rubric (Appendix C) offers criteria on how applications are scored and should also guide completion of this section.

<b>Goals and Objectives</b>	15 points
<b>Performance Measures</b>	10 points
<b>Activities</b>	15 points
<b>Person(s) Responsible</b>	5 points
<b>Timeline</b>	5 points
<b>Notes</b>	Not scored

**NOTE:** Add more rows as needed (i.e., to add objectives, performance measures, or activities) and delete those that are not needed. You are not required to have two goals (the second goal is listed for example purposes only). If appropriate for your project, you can add a third goal.

Goal 1: Identify and Reduce Exposure to Arsenic in Jefferson County's Private Wells			
Objective 1: Identify and engage households of potential risk of arsenic exposure by March 2026			
Activity	Person(s) Responsible	Timeline	Notes
Review past study data to compile a list of eligible homeowners in Jefferson County for recruitment of additional sampling.	JCHD, LWCD with assistance from WGNHS	January – February 2026	Measure: completed list of households compiled and letters mailed.

Develop outreach materials for recruitment (letters, fact sheets, website info, in both English and Spanish	JCHD	February – March 2026	Measure: number of materials developed and printed.
Conduct direct homeowner outreach using developed materials.	JCHD	March 2026	Measure: Number of households successfully reached.
<b>Objective 2:</b> Obtain and analyze a minimum of 110 private well water samples for arsenic by June 2026.			
<b>Activity</b>	<b>Person(s) Responsible</b>	<b>Timeline</b>	<b>Notes</b>
Provide homeowners with information on sample collection procedures and distribute sample kits.	JCHD	March 2026	Measure: number of kits distributed.
Partner with UW-Steven's Point WEAL for laboratory analysis and ensure results are tracked in secure database.	JCHD	March-May 2026	Measure: number of samples processed, and results received.
Provide personalized results and guidance to homeowners including recommendations for mitigation.	JCHD	May-June 2026	Measure: % of households receiving results and educational follow up.

<b>Goal 2:</b> Increase Community Awareness and Build Long-Term Capacity for further county- wide arsenic testing.			
<b>Objective 1:</b> By August 2026 develop and distribute relevant arsenic education materials to at least 500 residents.			
<b>Activity</b>	<b>Person(s) Responsible</b>	<b>Timeline</b>	<b>Notes</b>
Host at least three community education sessions targeting affected areas.	JCHD, LWCD	July- August 2026	Measure: number of educational sessions held
Distribute materials at Health Department, LWCD, local libraries, municipal buildings, and high-risk neighborhood mailing	JCHD, LWCD	July- August 2026	Measure: number of materials distributed
Distribute a county-wide fact sheet summarizing findings, risk areas, and resources for ongoing testing.	JCHD, LWCD	July- August 2026	Measure: number of fact sheets distributed.
<b>Objective 2:</b> By August 2026 110 validated water sample results transferred to research partners in a formal suitable for analysis			
<b>Activity</b>	<b>Person(s) Responsible</b>	<b>Timeline</b>	<b>Notes</b>
Convene quarterly stakeholder meetings with WGNHS, UWSP, LWCD	JCHD, LWCD, UWSP, WGNHS	September 2025- August 2026	Measure: number of meetings
Share finalized dataset with Wisconsin Geological and Natural History Survey and other partners to inform the county-wide arsenic risk model.	JCHD	August 2026	Measure: Dataset submission documented and acknowledged by research partners
Maintain a secure database of all arsenic sampling results.	JCHD	March – August 2026	Measure: Database created and updated with 100% of samples

## BUDGET (5 POINTS)

You may add more rows as needed and delete those that are unused.

**Fiscal Agent Representative: Elizabeth McGeary**

**Representative's Phone:** 920-674-7275

**Representative's Email:** emcgeary@jeffersoncountywi.gov

Budget Item	Quantity	Cost	Extended Cost (quantity X cost)	In-Kind Funding (not required)	Funding Requested in this Application
<b>Staff Support</b> (list names and positions)					
Elizabeth McGeary- Health Officer	104	\$ 58.19/Hour	\$ 6051.76	\$ 6051.76	\$ 0
Kendell Cooper- Program Manager	104	\$ 45.29/hour	\$ 4710.16	\$ 4710.16	\$ 0
<b>STAFF SUPPORT TOTAL</b>				<b>\$ 10761.92</b>	<b>\$ 0</b>
<b>Fringe Benefits</b> (list names and positions)					
Elizabeth McGeary- Health Officer		\$ 2082.21	\$ 2082.21	\$ 2082.21	\$ 0
Kendell Cooper- Program Manager		\$ 1882.98	\$ 1882.98	\$ 1882.98	\$ 0
<b>FRINGE BENEFITS TOTAL</b>				<b>\$ 3965.19</b>	<b>\$ 0</b>
<b>Consultant/Contracted Staff</b> (list names and affiliations)					
Translation Services (Contracted Staff with Jefferson County Health Department)	3 hours	\$ 30	\$ 90	\$ 0	\$ 90
<b>CONSULTANT/CONTRACTED TOTAL</b>				<b>\$ 0</b>	<b>\$ 90</b>
<b>Supplies</b> (itemize)					
Metals Package Test Kits from UW- Steven's Point	110	\$ 70	\$ 7700	\$ 0	\$ 7700
Conductivity Testing from UW-Steven's Point	110	\$ 14	\$ 1540	\$ 790	\$ 750
Postage for Lab Kits	110	\$ 6	\$ 660	\$ 0	\$ 660
Printing and Paper for brochures, flyers, educational materials					\$ 800
<b>SUPPLIES TOTAL</b>				<b>\$ 790</b>	<b>\$ 9910</b>
<b>Travel</b> (itemize)					
<b>TRAVEL TOTAL</b>				<b>\$ 0</b>	<b>\$ 0</b>
<b>Equipment</b> (itemize)					
<b>EQUIPMENT TOTAL</b>				<b>\$ 0</b>	<b>\$ 0</b>
<b>Other</b> (itemize)					
<b>OTHER TOTAL</b>				<b>\$ 0</b>	<b>\$ 0</b>
<b>TOTAL FUNDING</b>				<b>\$ 15517.11</b>	<b>\$ 10000</b>



# JEFFERSON COUNTY

## OFFICE OF THE COUNTY ADMINISTRATOR

FOR IMMEDIATE RELEASE

October 2, 2025

### **Jefferson County Officials Aware of New HPAI Case; Continuing Coordinated Response with State Agencies**

JEFFERSON, Wis. – Jefferson County officials are aware of a new non-negative test result for highly pathogenic avian influenza (HPAI) at a second facility located within the county. This result came after surveillance testing of that poultry flock.

The Wisconsin Department of Agriculture, Trade and Consumer Protection (DATCP) remains the lead entity coordinating the response. Their Public Information Officer can be reached at (608) 910-1929 or [molly.mueller@wisconsin.gov](mailto:molly.mueller@wisconsin.gov)

News of this second confirmed case is understandably difficult for everyone involved, especially the affected farm(s) and their neighbors. County officials want to reassure the public that numerous local, state, and federal partners are working closely together under the coordinated response led by DATCP. These efforts have been underway since the initial detection and will continue as we work to safeguard both the agricultural community and the public.

**Testing of birds** is being handled by DATCP for poultry and the Wisconsin Department of Natural Resources (DNR) for wild birds. Results of those tests are shared with the Jefferson County Health Department (JCHD) for distribution to local healthcare providers, affected farm(s), and the public.

**Testing and monitoring of employees** is the responsibility of JCHD, which is charged with preventing any transmission of HPAI among humans. This is done through direct outreach, preventative personal protective equipment (PPE), education, and symptom monitoring. If directed by the Wisconsin Department of Health Services (DHS) and the Centers for Disease Control and Prevention, testing for symptomatic individuals is conducted, and antiviral medications or vaccines can be distributed. Many times, this is done if there is evidence of human infection or an increased risk of human-to-human transmission.

**Depopulation** is handled by the affected facility(s) under their own plans, in consultation with and under the guidance of the appropriate state and federal agencies, including DATCP and the U.S. Department of Agriculture (USDA).

**Disposal** of impacted poultry or other birds is coordinated by DNR. For large depopulation events, this is generally handled through composting. According to DATCP, "Compost piles are regularly inspected by staff from the farm, the DNR, and DATCP for any evidence of leakage, odor, and disruption. The full composting process takes approximately 30 days from final construction and involves daily monitoring to ensure the compost is reaching the optimum temperature to deactivate the virus. Windrows will reach temperatures exceeding 130° F for at least 72 hours, and is sufficient to inactivate many pathogens, including avian influenza. After the composting process is complete and the compost has been released by DATCP, the compost will be removed from the premises at the discretion of the landowner."

**Groundwater testing:** After the May 2022 HPAI event, JCHD worked with DHS and State Lab of Hygiene to obtain approval for no-cost groundwater testing for nearby landowners. JCHD is again working with DHS to get similar approval, and if it is granted, JCHD will provide well-water test kits to homeowners residing near the compost site. This will be done in collaboration with the Town Chair. There will be an initial test to collect a baseline sample and a follow-up test at a later date. Both must be conducted following strict test collection protocols. During the May 2022 event, a total of 18 samples were originally submitted, but 11 of those residents did not submit a follow-up sample. Four of the initial 18 samples were also submitted incorrectly. JCHD and DHS did offer additional opportunities for testing to those residents. It is important that if testing occurs for this new event, any residents with questions on how to collect a valid sample should contact JCHD or DHS.

**Traffic control and road closures/restrictions** are managed by the appropriate unit of government. For Town roads, the Town Board makes these decisions. If restrictions are needed on County or State highways, the County or State will take the lead. The Jefferson County Sheriff's Office, Wisconsin State Patrol, and Jefferson County Highway Department are actively involved, providing equipment and personnel to ensure compliance with new traffic patterns. Routes to and from affected facilities or composting sites are carefully selected in coordination with the County, Town, DATCP, and facility operators. These routes are chosen to comply with weight limits, minimize safety concerns, and prevent unnecessary traffic disruptions. Your cooperation with these traffic changes is essential to ensure the response moves forward as quickly and effectively as possible.

**Additional support** is being provided by Jefferson County Emergency Management, Jefferson County Administration, Jefferson County Land & Water Conservation Department, and Wisconsin Emergency Management (WEM). The County has been and remains in regular communication with the affected facilities, local, state and federal agencies, and municipal partners throughout this process. Jefferson County continues to work collaboratively with all partners to ensure that every step of the response is conducted in the best interest of our county and its residents.

County officials encourage residents with any questions or concerns to contact DATCP or to visit their website at [https://datcp.wi.gov/Pages/Programs\\_Services/HPAIWisconsin.aspx](https://datcp.wi.gov/Pages/Programs_Services/HPAIWisconsin.aspx)

###



# Jefferson County Health Department - Statement of Revenues & Expenditures:

01/01/2025 - 08/31/2025	YTD Actual	Prorated Budget	Annual Budget	YTD Budget Variance
<b>REVENUE:</b>				
Total WIC	\$ 285,837.15	\$ 280,882.76	\$ 419,228.00	\$ 4,954.39
Public Health Fee for Service	\$ 60,684.77	\$ 153,754.28	\$ 229,484.00	\$ (93,069.51)
Public Health Grant Income	\$ 228,065.68	\$ 155,872.15	\$ 232,645.00	\$ 72,193.53
Total Public Health	\$ 288,750.45	\$ 309,626.43	\$ 462,129.00	\$ (20,875.98)
Total Income	\$ 574,587.60	\$ 590,509.19	\$ 881,357.00	\$ (15,921.59)
<b>EXPENSE:</b>				
WIC 4201 - 420109	\$ 248,959.31	\$ 256,551.71	\$ 382,913.00	\$ (7,592.40)
WIC Fit Family 4202	\$ 13,711.36	\$ 14,526.94	\$ 21,682.00	\$ (815.58)
WIC Peer Counselor 4203-420309	\$ 23,166.48	\$ 21,540.50	\$ 32,150.00	\$ 1,625.98
Total WIC	\$ 285,837.15	\$ 292,619.15	\$ 436,745.00	\$ (6,782.00)
Public Health = Tax Levy Supported Expenses	\$ 613,308.59	\$ -		\$ 613,308.59
Public Health Grants	\$ 268,587.17	\$ 195,613.20	\$ 291,960.00	\$ 72,973.97
Public Health Fee-for-Service	\$ 33,127.06	\$ 19,399.85	\$ 28,955.00	\$ 13,727.21
Total Public Health	\$ 915,022.82	\$ 215,013.05	\$ 320,915.00	\$ 700,009.77
Total Expense	\$ 1,200,859.97	\$ 507,632.20	\$ 757,660.00	\$ 693,227.77
<b>2025 SUMMARY</b>				
Total 2025 Income YTD:	\$ 574,587.60	\$ 590,509.19	\$ 881,357.00	\$ (15,921.59)
2025 County Tax Levy Applied - ORG 4115:	\$ 655,833.33	\$ 655,833.33	\$ 983,750.00	\$ -
Total 2025 Revenue:	\$ 1,230,420.93	\$ 1,246,342.52		\$ (15,921.59)
Total 2025 Expense:	\$ 1,200,859.97	\$ 507,632.20	\$ 757,660.00	\$ 693,227.77
2025 Annual Activity (Revenue vs. Expenses) as of 8/31/2025	\$ 29,560.96		\$ (757,660.00)	