#### STATE OF NEBRASKA

# REPORT OF JOINT PUBLIC AGENCIES, INTERLOCAL AGREEMENTS, TRADE NAMES, CORPORATE NAMES & BUSINESS NAMES

FOR THE PERIOD JULY 1, 2018 THROUGH JUNE 30, 2019

State Statute Section 13-513 requires any governing body which is a party to an agreement pursuant to the Interlocal Cooperation Act or the Joint Public Agency Act or is conducting business under a Trade Name, Corporate Name, or Business Name to report such information to the Auditor of Public Accounts on or before **September 20** of each year.

Lexington Regional Health Center		Dawson
SUBDIVISION NAME		COUNTY
	Subdivision Contact I	nformation
Name & Title:	Wade Eschenbrenner, CFO	
Mailing Address:	PO Box 980	
City, Zip:	Lexington, 68850	
Phone Number:	308-	324-8302
E-Mail Address:	weschenbro	enner@lexrhc.org
	INTERLOCAL AGREEMENTS AND J	OINT PUBLIC AGENCIES
This sub	division was <b>NOT</b> involved in any Agreemer	its during the period.
•	on <b>WAS</b> involved in any Agreements during providing the information requested for all Agreements	
Column 1:	Provide the names of all subdivisions that <b>Note:</b> You do not need to list your own su	
Column 2:	Provide the dates covered by the Agreeme 6/30/19, or if not specifically written out in	
Column 3:	Include a brief description of the purpose	of the Agreement.
	TRADE NAMES, CORPORATE NAME	S AND BUSINESS NAMES
	division did <b>NOT</b> conduct business under a uring the period.	
•	on <b>DID</b> conduct business under a Trade Na uch names on the following page.	me, Corporate Name or other Business Name,

#### **Contact and Submission Information**

Deann Haeffner, Assistant Deputy Auditor

Auditor of Public Accounts
State Capitol, Suite 2303

FAV: (400) 474 00

Lincoln, Nebraska 68509

(402) 471-2111 **FAX**: (402) 471-3301

deann.haeffner@nebraska.gov

**To Submit Form Electronically:** 

www.auditors.nebraska.gov

### REPORT OF JOINT PUBLIC AGENCY AND INTERLOCAL AGREEMENTS

REPORTING PERIOD JULY 1, 2018 THROUGH JUNE 30, 2019

Lexington Regional Health Center SUBDIVISION NAME		Dawson	
		COUNTY	
Parties to Agreement (Column 1)	Agreement Period (Column 2)	Description (Column 3)	
	<u> </u>		
Lexington Regional Health Center  Dawson County Jail	07/01/2018 -6/30/2019	Contract for professional services provided to inmates of Dawson County jail.	
		T	
		<u></u>	
		<u> </u>	
		T	

<sup>\*</sup> Copy page as necessary to list ALL Agreements.

## REPORT OF TRADE NAMES, CORPORATE NAMES, BUSINESS NAMES

REPORTING PERIOD JULY 1, 2018 THROUGH JUNE 30, 2019

Lexington Regional Health Center	Dawson
SUBDIVISION NAME	COUNTY
List all Trade Names, Corporate Names and Business Name conducted business.	es under which the political subdivision

<sup>\*</sup> Copy page as necessary to list ALL Agreements.