## Certification of 2011 Public Act 152 Compliance Economic Vitality Incentive Program/County Incentive Program

Issued under authority of 2012 Public Act 200. Filing of this form or Form 4888 Certification of Employee Compensation is mandatory to qualify for payments

Each city/village/township/county applying for Employee Compensation payments under the 2011 Public Act 152 compliance option must:

- Certify to the Michigan Department of Treasury (Treasury) that the local unit listed below provides medical benefits for its employees and elected public officials in compliance with 2011 Public Act 152 or certify that the local unit does not provide medical benefits to its employees and elected public officials.
- 2. Submit to Treasury any required board resolutions/meeting minutes.

City/village/township: This certification, along with any required board resolutions/meeting minutes, must be received by June 1, 2013 to receive the June and August payments or on or before July 31, 2013 to receive the August payment. Post mark dates will not be considered. For questions, call (517) 373-2697.

County: This certification, along with any required board resolutions/meeting minutes, must be received by June 1, 2013 (or the first day of a payment month) in order to qualify for that month's payment. Post mark dates will not be considered. For questions, call (517) 373-2697.

PART 1: LOCAL UNIT INFORMATION		
Local Unit Name Village of Stockbridge	Local Unit County Name Ingham County	lame ty
Local Unit Code 333020	Contact E-Mail Address clerk@vil.stockbridge.mi.us	ress ckbridge.mi.us
Contact Name Contact Name Pn	Contact Title Contact Telephone Number President (517) 851-7435	Number
PART 2::2011 PUBLIC ACT 152 COMPLIANCE	I //\(CE)	
Indicate the option the local unit has selected to comply with 2011 Public Act 152:  1. Hard Caps (MCL 15.563) (no attachment required)  A public employer shall pay no more of the annual costs or illustrative ra payments to health savings accounts, flexible spending accounts, or sim to \$5,692.50 times the number of employees with single person coverage spouse coverage, plus \$15,525.00 times the number of employees with on or after January 1, 2013.	mply with 2011 Public Act 152:  nent required) e annual costs or illustrative rate and any it is spending accounts, or similar accountible spending accounts, or similar accountes with single person coverage, \$11,385. the number of employees with family cove	The option the local unit has selected to comply with 2011 Public Act 152:  1. Hard Caps (MCL 15.563) (no attachment required)  1. Hard Caps (MCL 15.563) (no attachment required)  A public employer shall pay no more of the annual costs or illustrative rate and any payments for reimbursements of co-pays, deductibles, or payments to health savings accounts, flexible spending accounts, or similar accounts used for health care costs, than a total amount equal to \$5,692.50 times the number of employees with single person coverage, \$11,385.00 times the number of employees with single person coverage, \$11,385.00 times the number of employees with family coverage, for all medical benefit plan coverage years beginning on or after January 1, 2013.
Annual 80/20 (attach board resolution     A public employer shall pay not more than employees and elected public officials, for	2. Annual 80/20 (attach board resolution/meeting minutes showing annual majority vote of governing body) (M A public employer shall pay not more than 80% of the total annual costs of all the medical benefit plans it offers or cont employees and elected public officials, for a medical benefit plan coverage year beginning on or after January 1, 2012.	<ol> <li>Annual 80/20 (attach board resolution/meeting minutes showing annual majority vote of governing body) (MCL 15.564)</li> <li>A public employer shall pay not more than 80% of the total annual costs of all the medical benefit plans it offers or contributes to for its employees and elected public officials, for a medical benefit plan coverage year beginning on or after January 1, 2012.</li> </ol>
3. Annual Exemption (attach board res A local unit of government may annually e medical benefit plan coverage year.	olution/meeting minutes showing annu exempt itself from options 1 and 2 above, t	<ol> <li>Annual Exemption (attach board resolution/meeting minutes showing annual 2/3 vote of governing body) (MCL 15.568)</li> <li>A local unit of government may annually exempt itself from options 1 and 2 above, by a 2/3 vote of the governing body for the next succeeding medical benefit plan coverage year.</li> </ol>
4. Employee Contract/Work Agreement Still in Effect The local unit's contract/employee work agreements ento	4. Employee Contract/Work Agreement Still in Effect The local unit's contract/employee work agreements entered into prior to September 15, 2011 do not expire until	er 15, 2011 do not expire until
5. N/A The local unit does not provide medical b	<ol><li>N/A</li><li>The local unit does not provide medical benefits to its employees or elected public officials</li></ol>	officials.
PART 3: CERTIFICATION  In accordance with 2012 Public Act 200, the undersigned hereby certifies to Treasur funded health insurance contribution act, 2011 Public Act 152, or does not provid tradied board resolutions/meeting minutes are attached to this signed certification.	signed hereby certifies to Treasury that the iblic Act 152, or does not provide medica ached to this signed certification.	PART 3: CERTIFICATION  In accordance with 2012 Public Act 200, the undersigned hereby certifies to Treasury that the above mentioned local unit has compiled with the publicly funded health insurance contribution act, 2011 Public Act 152, or does not provide medical benefits to employees and elected public officials. Any required board resolutions/meeting minutes are attached to this signed certification.
Printed Name of Chief Administrative Officer (as defined in MCL 141.422b) Heath Corey	n MCL 141.422b)	President
Chief Administrative Officer Signature (as defined in MCL 141.422b)	141.422b)	Date May 16, 2013
Completed and signed form (including required attachment, if elected option 2 or 3) should be e-mailed to: TreasRe if you are unable to submit via e-mail, mail the completed form and required attachment (if elected option 2 or 3) to: Michigan Department of Treasury Office of Revenue and Tax Analysis PO Box 30722 Lansing, MI 48909	achment, if elected option 2 or 3) should b npleted form and required attachment (if e	Completed and signed form (including required attachment, if elected option 2 or 3) should be e-mailed to: TreasRevenueSharing@michigan.gov. If you are unable to submit via e-mail, mail the completed form and required attachment (if elected option 2 or 3) to:  Michigan Department of Treasury  Office of Revenue and Tax Analysis  PO Box 30722  Lansing, MI 48809
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EVIP/CIP Eligible	Certification Received	EVIP/CIP Notes
Final Certification	Resolution Received	