

Agenda

REGULAR MEETING
MISSOULA RURAL FIRE DISTRICT

BOARD OF TRUSTEES

DATE: Wednesday, November 12th, 2025
TIME: 4:00 P.M.
PLACE: Station #1, 2521 South Avenue West, Missoula

CALL TO ORDER

ROLL CALL

READING OF MINUTES

PUBLIC COMMENT

CLAIMS

September Claims	\$ 5,160.18
October Claims	<u>\$200,837.33</u>
Total Claims	\$205,997.51

Discussion and Decision on September and October Claims

COMMUNICATIONS

TRUSTEE REPORTS

STAFF REPORTS

OLD BUSINESS

NEW BUSINESS

1. Discussion and Decision on Resolution 2025-10 the Adoption Agreement for Eligible Government 457 Plan

ADJOURNMENT

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MISSOULA RURAL FIRE DISTRICT
Claim Details
For the Accounting Period: 9/25

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Report ID: AP100V

For dates posted from 10/15/25 to 11/07/25

* ... Over spent expenditure

Claim/ Line #	Check Invoice #/Inv Date/Description	Vendor #/Name/ Invoice #/Inv Date/Description	Document \$/ Line \$	Disc \$	PO #	Fund Org Acct	Object	Proj	Cash Account
47152	83604S	1905 KALEVA LAW OFFICE	3,850.00						
2	9063 09/04/25	LEGAL SERVICES	3,850.00			1000 10 420510	352		101000
		Total for Vendor:	3,850.00						
47170	83631S	228 MISSOULA COUNTY TREASURER	511.46						
1	CINV000512 10/27/25	SEPT PHONES	511.46			1000 10 420510	345		101000
		Total for Vendor:	511.46						
47145	-99266C	259 MSUES FIRE TRAINING SCHOOL	190.00						
1	26-248 09/17/25	WALKER FF1	95.00			1000 60 420462	380		101000
2	26-248 09/17/25	WALKER HAZMAT	95.00			1000 60 420462	380		101000
		Total for Vendor:	190.00						
47229	83647S	1714 STRYKER SALES CORP	68.72						
1	9210427064 09/30/25	EMS SUPPLIES	68.72			1000 80 420461	222		101000
		Total for Vendor:	68.72						
47149	83603S	1628 UNIVISION	540.00						
1	265475 09/30/25	SUPPORT	540.00			1000 10 420510	368		101000
		Total for Vendor:	540.00						
		# of Claims	5	Total:	5,160.18	# of Vendors	4		
		Total Electronic Claims	190.00						
		Total Non-Electronic Claims	4970.18						

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MISSOULA RURAL FIRE DISTRICT
Fund Summary for Claims
For the Accounting Period: 9/25

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Fund/Account	Amount
1000 GENERAL FUND	
101000 CASH ON DEPOSIT - COUNTY TREASURER	5,160.18
Total:	5,160.18

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MISSOULA RURAL FIRE DISTRICT
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For the Accounting Period: 10/25

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Claim/ Line #	Check Invoice #/Inv Date/Description	Vendor #/Name/ Invoice #/Inv Date/Description	Document \$/ Line \$	Disc \$	PO #	Fund Org Acct	Object	Proj	Cash Account
47143	83605S	1026 A2Z PERSONNEL	1,039.70						
1	475702 10/15/25	ADMIN ASST E CLARK/CHRISTMAN	1,039.70			1000 10 420510	356		101000
47167		1026 A2Z PERSONNEL	1,169.50						
1	475989 10/28/25	ADMIN ASST E.CHRISTMAN	1,169.50			1000 10 420510	356		101000
		Total for Vendor:	2,209.20						
47168		933 ALLEGIS CORPORATION	87.02						
1	3108637 10/31/25	322	87.02			1000 20 420440	272		101000
		Total for Vendor:	87.02						
47169	C	1788 AMAZON CAPITAL SERVICES	2,062.02						
1	W99P4C3V 10/30/25	STATION SUPPLIES	285.17*			1000 50 420460	210		101000
2	1JX3THXP 10/27/25	STA 5	33.98			1000 50 420460	365		101000
3	T1VLTMD 10/27/25	OFFICE SUPPLIES	39.21			1000 10 420510	210		101000
4	WYJPKN4M 10/26/25	STATION SUPPLIES	371.37*			1000 50 420460	210		101000
5	GXM9LQYC 10/17/25	STA 2	59.70			1000 50 420460	362		101000
6	HP1RLWVN 10/17/25	305	439.99			1000 20 420440	272		101000
7	LVQGHGHW 10/12/25	STA 2	158.77			1000 50 420460	362		101000
8	W9RKDLFG 10/09/25	STATION SUPPLIES	435.57*			1000 50 420460	210		101000
9	JN71DPMV 10/09/25	RVC	38.62			1000 60 420462	291		101000
10	R3V164P4 10/08/25	RVC	24.04			1000 60 420462	291		101000
11	YT7QCT6K 10/07/25	SMALL TOOLS	94.54			1000 20 420440	234		101000
12	IQPY6WTH 10/07/25	TRAINING	125.00			1000 30 420430	220		101000
13	6CPG16XP 10/01/25	OFFICE SUPPLIES	-62.93			1000 10 420510	210		101000
14	KXKVC337 10/07/25	STA 2	18.99			1000 50 420460	362		101000
		Total for Vendor:	2,062.02						
47192		32 BIG BEAR SIGN COMPANY, INC.	34.00						
1	2025-1450 10/09/25	ADDRESS SIGN	34.00			1000 40 420410	220		101000
		Total for Vendor:	34.00						
47135	83606S	1100 BIG SKY EMS EDUCATION	145.00						
1	101525PF01 10/15/25	FINLAY BIG SKY EMS SYMPOSI	145.00			1000 10 420510	380		101000
		Total for Vendor:	145.00						

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47133	83607S	819 BLACKFOOT COMMUNICATIONS	358.70						
1	1001251664	10/01/25 STA 2	358.70			1000 10 420510	345		101000
		Total for Vendor:	358.70						
47193		1963 BOUND TREE MEDICAL, LLC	4,136.18						
1	85944490	10/03/25 EMS SUPPLIES	892.72			1000 80 420461	222		101000
2	85955214	10/13/25 EMS SUPPLIES	1,233.36			1000 80 420461	222		101000
3	85961710	10/17/25 EMS SUPPLIES	828.62			1000 80 420461	222		101000
4	85963253	10/20/25 EMS SUPPLIES	50.37			1000 80 420461	222		101000
5	85973195	10/28/25 EMS SUPPLIES	810.47			1000 80 420461	222		101000
6	85978320	10/31/25 EMS SUPPLIES	320.64			1000 80 420461	222		101000
		Total for Vendor:	4,136.18						
47171	83632S	1480 BRIAN LAFOREST	15.00						
1	103125BL01	10/31/25 LAFOREST OCT GYM REIMB	15.00			1000 20 420440	132		101000
		Total for Vendor:	15.00						
47160	83622S	948 CASEY PORTE	127.32						
1	102425CP01	10/24/25 ANNUAL PHYSICAL	127.32			1000 10 420510	356		101000
		Total for Vendor:	127.32						
47122	83608S	1424 CHARTER	691.63						
1	9880110125	10/01/25 STA 5	242.63			1000 10 420510	345		101000
2	8140110125	10/01/25 STA 1	449.00			1000 10 420510	345		101000
47156	83623S	1424 CHARTER	274.06						
1	1011259605	10/11/25 STA 1	15.89			1000 10 420510	345		101000
2	8847011014	10/14/25 STA 6	258.17			1000 10 420510	345		101000
47172	83633S	1424 CHARTER	328.62						
1	1719102025	10/20/25 STA 4	328.62			1000 10 420510	345		101000
		Total for Vendor:	1,294.31						

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47146	-99264C	1815 CHEMNET CONSORTIUM INC	230.00						
1	130262 10/08/25	RFF SCHILLER	65.00			1000 60 420462	391		101000
2	130262 10/08/25	RFF WOOD	65.00			1000 60 420462	391		101000
3	130262 10/08/25	RFF FAY	100.00			1000 60 420462	391		101000
47173	C	1815 CHEMNET CONSORTIUM INC	65.00						
1	130557 10/28/25	RFF STORY DRUG SCREENING	65.00			1000 60 420462	391		101000
		Total for Vendor:	295.00						
47227		1583 CITI CARDS	4,633.81						
1	9808 10/20/25	CA WL BAGGAGE	40.00			1000 50 420460	379		101000
2	9808 10/20/25	CA WL BAGGAGE	40.00			1000 50 420460	379		101000
3	9808 10/20/25	CA WL BAGGAGE	40.00			1000 50 420460	379		101000
4	9808 10/20/25	CA WL BAGGAGE	50.00			1000 50 420460	379		101000
5	9808 10/20/25	CA WL BAGGAGE	50.00			1000 50 420460	379		101000
6	9808 10/20/25	CA WL BAGGAGE	50.00			1000 50 420460	379		101000
7	9808 10/20/25	CA WL PARKING	24.00			1000 50 420460	379		101000
8	9808 10/20/25	CA WL CAR RENTAL FUEL	66.53			1000 20 420440	231		101000
9	9808 10/20/25	CA WL BAGGAGE	40.00			1000 50 420460	379		101000
10	9808 10/20/25	CA WL BAGGAGE	40.00			1000 50 420460	379		101000
11	9808 10/20/25	CA WL BAGGAGE	50.00			1000 50 420460	379		101000
12	9808 10/20/25	CA WL BAGGAGE	50.00			1000 50 420460	379		101000
13	9808 10/20/25	CA WL BAGGAGE	150.00			1000 50 420460	379		101000
14	9808 10/20/25	CA WL LODGING	201.60			1000 50 420460	379		101000
15	9808 10/20/25	CA WL LODGING	201.60			1000 50 420460	379		101000
16	9808 10/20/25	CONSULTANT	274.00			1000 10 420510	356		101000
17	9808 10/20/25	FLU CLINIC FOOD	16.47			1000 50 420460	379		101000
18	9808 10/20/25	FLU CLINIC FOOD	45.98			1000 50 420460	379		101000
19	9808 10/20/25	FINLAY LODGING	560.04			1000 10 420510	379		101000
20	9808 10/20/25	FINLAY MSFCA REGISTRATION	500.00			1000 10 420510	380		101000
21	9808 10/20/25	HORSENS MSFCA REGISTRATION	200.00			1000 10 420510	380		101000
22	9808 10/20/25	MEDIATE/ROSSIER ROPE TECH	154.00			1000 50 420460	380		101000
23	9808 10/20/25	COMPRESSOR RENTAL	189.75			1000 50 420460	367		101000
24	9808 10/20/25	COMPRESSOR RENTAL	155.25			1000 50 420460	367		101000
25	9808 10/20/25	INCIDENT MEAL	94.50			1000 50 420460	379		101000
26	9808 10/20/25	305	29.72			1000 20 420440	272		101000

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27	9808 10/20/25	SMALL TOOLS	107.94			1000 20 420440	234		101000
28	9808 10/20/25	SCBA	560.00			1000 50 420460	204		101000
29	9808 10/20/25	305	69.45			1000 20 420440	272		101000
30	9808 10/20/25	SCBA	28.22			1000 50 420460	204		101000
31	9808 10/20/25	305 PLOW	-630.14			1000 20 420440	272		101000
32	9808 10/20/25	MEIDATE ROPE TECH LODGING	843.54			1000 50 420460	379		101000
33	9808 10/20/25	STARLINK	50.00			1000 10 420510	368		101000
34	9808 10/20/25	GARBAGE	89.76			1000 10 420510	342		101000
35	9808 10/20/25	CA WL LODGING	201.60			1000 50 420460	379		101000
Total for Vendor:			4,633.81						
47140	83609S	1299 CITY OF MISSOULA-FINANCE	41.01						
1	1879501022	10/02/25 STA 1	41.01			1000 10 420510	341		101000
47174	83634S	1299 CITY OF MISSOULA-FINANCE	57.30						
1	1024251979	10/24/25 STA 1	24.19			1000 10 420510	341		101000
2	1029251945	10/29/25 STA 2	33.11			1000 10 420510	341		101000
Total for Vendor:			98.31						
47226		216 CLEARWATER CREDIT UNION	10,371.67						
1	1244600	10/22/25 ZOOM	17.63			1000 10 420510	368		101000
2	1244600	10/22/25 CA WL LODGING	1,979.04			1000 50 420460	379		101000
3	1244600	10/22/25 CA WL LODGING	1,979.04			1000 50 420460	379		101000
4	1244600	10/22/25 CA WL LODGING	1,979.04			1000 50 420460	379		101000
5	1244600	10/22/25 FEES	11.89			1000 10 420510	356		101000
6	1244600	10/22/25 CA WL LODGING	130.00			1000 50 420460	379		101000
7	1244600	10/22/25 CA WL LODGING	130.00			1000 50 420460	379		101000
8	1244600	10/22/25 CA WL LODGING	130.00			1000 50 420460	379		101000
9	1244600	10/22/25 EXTERNAL BACK UP	114.98			1000 10 420510	268		101000
10	1244600	10/22/25 STA 1 COFFEE	174.78			1000 10 420510	210		101000
11	1244600	10/22/25 CABLES	82.99			1000 10 420510	268		101000
12	1244600	10/22/25 CABLES	24.97			1000 10 420510	268		101000
13	1244600	10/22/25 CABLES	129.99			1000 10 420510	268		101000
14	1244600	10/22/25 301 CAR WASH	28.99			1000 20 420440	372		101000
15	1244600	10/22/25 302 CAR WASH	28.99			1000 20 420440	372		101000
16	1244600	10/22/25 303 CAR WASH	28.99			1000 20 420440	372		101000
17	1244600	10/22/25 332 CAR WASH	28.99			1000 20 420440	372		101000

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Claim/ Line #	Check Invoice #	Vendor #/Name/ Inv Date/Description	Document \$/ Line \$	Disc \$	PO #	Fund Org Acct	Object	Proj	Cash Account
18	1244600	10/22/25 HDMI CABLE	25.19			1000 10 420510	268		101000
19	1244600	10/22/25 HOUPPERT CAR SEAT CERT	55.00			1000 50 420460	380		101000
20	1244600	10/22/25 VEHICLE ADAPTERS	23.98			1000 10 420510	268		101000
21	1244600	10/22/25 CROWELL BLUE CARD	385.00			1000 50 420460	380		101000
22	1244600	10/22/25 COMPUTER	219.00			1000 10 420510	268		101000
23	1244600	10/22/25 HORSENS MSFCA CONFERENCE	241.60			1000 10 420510	379		101000
24	1244600	10/22/25 SCHNEE MSFCA CONFERENCE	483.20			1000 10 420510	379		101000
25	1244600	10/22/25 FINLAY MSFCA CONFERENCE	483.20			1000 10 420510	379		101000
26	1244600	10/22/25 STATION SUPPLIES	52.30*			1000 50 420460	210		101000
27	1244600	10/22/25 HDMI CABLES	13.49			1000 10 420510	268		101000
28	1244600	10/22/25 COMPUTERS	518.00			1000 10 420510	268		101000
29	1244600	10/22/25 ROSSIER ROPE TECH LODGING	843.54			1000 50 420460	379		101000
30	1244600	10/22/25 RFF WIDMAN DRIVING RECORD	7.87			1000 60 420462	391		101000
31	1244600	10/22/25 ADOBE	19.99			1000 10 420510	368		101000
Total for Vendor:			10,371.67						
47128	83610S	1921 CLINICAL ENGINEERING SERVICES,	5,580.00						
1	2367	10/01/25 ANNUAL TESTING	5,580.00			1000 80 420461	356		101000
Total for Vendor:			5,580.00						
47066	83567S	1502 CORY HORSENS	189.00						
1	100125CH01	10/01/25 HORSENS MSFCA PER DIEM	189.00			1000 10 420510	379		101000
Total for Vendor:			189.00						
47194	C	76 CULLIGAN WATER CONDITIONING	136.75						
1	6071381025	10/25/25 ALL STATIONS	136.75			1000 10 420510	341		101000
Total for Vendor:			136.75						
47176	83635S	1918 DANIELA HICKS	62.50						
1	103125DH01	10/31/25 HICKS OCT GYM REIMB	62.50			1000 50 420460	132		101000
Total for Vendor:			62.50						
47162	83627S	1309 ERIC HULEATT	276.04						
1	102725EH01	10/27/25 ANNUAL PHYSICAL	276.04			1000 10 420510	356		101000
Total for Vendor:			276.04						

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47195	C 1606 GARAGE DOOR GUYS		1,000.00						
1	12014 10/15/25 STA 6		1,000.00			1000 50 420460	366		101000
		Total for Vendor:	1,000.00						
47196	C 1415 GECKO FENCE & LANDSCAPE, LLC		70.00						
1	32475 10/31/25 STA 1 OCT LAWN MOWING		70.00			1000 50 420460	361		101000
		Total for Vendor:	70.00						
47197	C 1506 HARLOW'S TRUCK CENTER		122.24						
1	02P30576 10/28/25 OLD TENDER		122.24			1000 20 420440	272		101000
		Total for Vendor:	122.24						
47148	83611S 1980 HMH ENGINEERING		1,015.00						
1	MT25137-01 10/15/25 STA 4 AMBULANCE BAY		1,015.00*			1000 10 420510	920		101000
		Total for Vendor:	1,015.00						
47199	1258 I-STATE TRUCK CENTERS		296.46						
1	C253208881 10/22/25 311		296.46			1000 20 420440	272		101000
		Total for Vendor:	296.46						
47198	455 INLAND TRUCK PARTS		839.60						
1	IN-1891864 10/20/25 328		220.73			1000 20 420440	272		101000
2	IN-1892677 10/21/25 SMALL TOOLS		82.48			1000 20 420440	234		101000
3	IN-1892677 10/21/25 328		93.84			1000 20 420440	272		101000
4	IN-1892913 10/22/25 328		442.55			1000 20 420440	272		101000
		Total for Vendor:	839.60						
47177	83636S 864 JASON BUTLER		222.94						
1	102925JB01 10/29/25 BUTLER ANNUAL PHYSICAL		222.94			1000 10 420510	356		101000
		Total for Vendor:	222.94						
47134	83612S 969 JASON DUFNER		567.00						
1	101525JD01 10/15/25 DUFNER EMS WORLD PER DIEM		567.00			1000 50 420460	380		101000

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47178	83637S	969 JASON DUFNER	85.51						
1	102925JD01	10/29/25 DUFNER TRAVEL REIMB	85.51			1000 50 420460	379		101000
		Total for Vendor:	652.51						
47150	-99263C	1820 JENNIFER CULP	400.00						
1	1003	10/01/25 SEPTEMBER BOT MINUTES	400.00			1000 10 420510	356		101000
		Total for Vendor:	400.00						
47191	83638S	1982 JESSICA KINZER	1,328.45						
1	102825	10/28/25 CONSULTING SERVICES	1,328.45			1000 10 420510	356		101000
		Total for Vendor:	1,328.45						
47144	83613S	1673 JOE FORD	27.99						
1	101425JF01	10/14/25 HDMI CABLE	27.99			1000 10 420510	268		101000
		Total for Vendor:	27.99						
47136	83614S	1599 JON GILDEA	888.00						
1	101425	10/14/25 GILDEA DEA LICENSE	888.00			1000 80 420461	356		101000
		Total for Vendor:	888.00						
47141	83615S	1905 KALEVA LAW OFFICE	343.75						
1	9206	10/07/25 LEGAL SERVICES	343.75			1000 10 420510	352		101000
		Total for Vendor:	343.75						
47180	83639S	410 KEPRO	782.28						
1	0091448	10/01/25 ADMIN	66.78			1000 10 420510	147		101000
2	0091448	10/01/25 RM/ARM	19.08			1000 20 420440	147		101000
3	0091448	10/01/25 TO	9.54			1000 30 420430	147		101000
4	0091448	10/01/25 FP	9.54			1000 40 420410	147		101000
5	0091448	10/01/25 SUP	534.24			1000 50 420460	147		101000
6	0091448	10/01/25 VOL	143.10			1000 60 420462	147		101000
		Total for Vendor:	782.28						

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47181	83640S	862 KORY N. BURGESS	30.50						
1	103125KB01	10/31/25 BURGESS OCT GYM REIMB	30.50			1000 50 420460	132		101000
		Total for Vendor:	30.50						
47137	83616S	1979 LANGLAS & ASSOCIATES, INC	20,111.50						
1	11897	10/01/25 STA 4 AMBULANCE BAY	20,111.50*			1000 10 420510	920		101000
		Total for Vendor:	20,111.50						
47200	C	1282 LIFE-ASSIST, INC	33.58						
1	1646541	10/13/25 EMS SUPPLIES	33.58			1000 80 420461	222		101000
		Total for Vendor:	33.58						
47182	83641S	1981 LINDSAY STORY	21.65						
1	102925LS01	10/29/25 RFF STORY FINGERPRINTING	21.65			1000 60 420462	391		101000
		Total for Vendor:	21.65						
47201	C	148 LITHIA MOTORS	106.51						
1	182053	10/20/25 310	13.52			1000 20 420440	272		101000
2	485145	10/22/25 310	92.99			1000 20 420440	372		101000
		Total for Vendor:	106.51						
47202		1894 LOWE'S	373.05						
1	979207	10/03/25 STA 2	5.92			1000 50 420460	362		101000
2	973878	10/13/25 STA 2	46.06			1000 50 420460	362		101000
3	995769	10/21/25 STA 2	37.02			1000 50 420460	362		101000
4	976615	10/24/25 STA 2	284.05			1000 50 420460	362		101000
		Total for Vendor:	373.05						
47065	83568S	1568 MELISSA SCHNEE	315.00						
1	100125MS01	10/01/25 SCHNEE MSFCA PER DIEM	315.00			1000 10 420510	379		101000
		Total for Vendor:	315.00						
47126	83617S	208 MISSOULA COUNTY MEDICAL BENEFITS	114,397.20						
1	0000012843	10/01/25 ADMIN	10,893.80			1000 10 420510	143		101000
2	0000012843	10/01/25 RM/ARM	4,618.20			1000 20 420440	143		101000
3	0000012843	10/01/25 TO	2,309.10			1000 30 420430	143		101000

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MISSOULA RURAL FIRE DISTRICT
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4	0000012843 10/01/25 FP		2,309.10			1000 40 420410	143		101000
5	0000012843 10/01/25 SUP		94,267.00			1000 50 420460	143		101000
Total for Vendor:			114,397.20						
47124	83618S 230 MISSOULA ELECTRIC COOPERATIVE		504.23						
1	1062522395 10/06/25 STA 2		20.48			1000 10 420510	341		101000
2	1062522395 10/06/25 STA 6		263.29			1000 10 420510	341		101000
3	1062522395 10/06/25 STA 2		220.46			1000 10 420510	341		101000
Total for Vendor:			504.23						
47207	235 MISSOULA MOTOR PARTS		1,202.76						
1	555-19012 10/01/25 LUBRICANT		42.60			1000 20 420440	232		101000
2	555-19012 10/01/25 355		8.46			1000 20 420440	272		101000
3	555-19460 10/02/25 355		5.41			1000 20 420440	272		101000
4	555-19961 10/03/25 STA 5		27.24			1000 50 420460	365		101000
5	555-19961 10/03/25 311		53.48			1000 20 420440	272		101000
6	555-19961 10/03/25 328		53.48			1000 20 420440	272		101000
7	555-19961 10/03/25 341		53.48			1000 20 420440	272		101000
8	555-19961 10/03/25 351		26.74			1000 20 420440	272		101000
9	555-20920 10/06/25 ENGINE 1		126.76			1000 20 420440	272		101000
10	555-21592 10/08/25 LUBRICANT		15.02			1000 20 420440	232		101000
11	555-21779 10/08/25 ENGINE 1		11.12			1000 20 420440	272		101000
12	555-21939 10/08/25 ENGINE 1		-62.82			1000 20 420440	272		101000
13	555-22807 10/10/25 ENGINE 1		124.20			1000 20 420440	272		101000
14	555-23549 10/13/25 328		48.47			1000 20 420440	272		101000
15	555-23937 10/14/25 SHOP		5.77			1000 20 420440	270		101000
16	555-25074 10/16/25 328		111.36			1000 20 420440	272		101000
17	555-25969 10/20/25 336		115.42			1000 20 420440	272		101000
18	555-26799 10/21/25 LUBRICANT		51.96			1000 20 420440	232		101000
19	555-29412 10/28/25 SMALL TOOLS		14.09			1000 20 420440	234		101000
20	555-30003 10/30/25 LUBRICANT		335.84			1000 20 420440	232		101000
21	555-30501 10/31/25 LUBRICANT		34.68			1000 20 420440	232		101000
Total for Vendor:			1,202.76						

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MISSOULA RURAL FIRE DISTRICT
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Claim/ Line #	Check Invoice #/Inv	Vendor #/Name/ Date/Description	Document \$/ Line \$	Disc \$	PO #	Fund Org Acct	Object	Proj	Cash Account
47203	C	244 MISSOULA TEXTILE SERVICES	397.37						
1	10312520	10/31/25 ALL STATIONS	397.37			1000 10 420510	356		101000
		Total for Vendor:	397.37						
47225		1983 MONTANA PEST SOLUTIONS	225.00						
1	3381	10/27/25 STA 2	225.00			1000 50 420460	365		101000
		Total for Vendor:	225.00						
47123	-99269C	259 MSUES FIRE TRAINING SCHOOL	190.00						
1	26-249	10/08/25 MCGRAW DR/OP WL FIRE APPARATUS	95.00			1000 60 420462	380		101000
2	26-249	10/08/25 REAL BIRD DR/OP WL FIRE APPARA	95.00			1000 60 420462	380		101000
47184	C	259 MSUES FIRE TRAINING SCHOOL	285.00						
1	26-250	10/24/25 RFF REAL BIRD FFI	95.00			1000 60 420462	380		101000
2	26-250	10/24/25 RFF REAL BIRD HAZMAT	95.00			1000 60 420462	380		101000
3	26-250	10/24/25 RFF MCGRAW DR/OP	95.00			1000 60 420462	380		101000
		Total for Vendor:	475.00						
47204		205 MT ACE HARDWARE	69.99						
1	278541968	10/30/25 322	69.99			1000 20 420440	272		101000
		Total for Vendor:	69.99						
47153	83624S	1882 MT DEPT OF REVENUE	201.12						
1	102125	10/21/25 STA 4 AMBO BAY GCR TAX	201.12*			1000 10 420510	920		101000
		Total for Vendor:	201.12						
47183	83642S	263 MT FIREFIGHTERS TESTING	1,200.00						
1	2514	10/27/25 FY26 ANNUAL DUES	1,200.00			1000 10 420510	333		101000
		Total for Vendor:	1,200.00						
47179	83643S	1322 MURDOCHS RANCH & HOME SUPPLY	11.97						
1	0324768921	10/14/25 SHOP	11.97			1000 20 420440	270		101000
		Total for Vendor:	11.97						

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MISSOULA RURAL FIRE DISTRICT
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Claim/ Line #	Check Invoice #/Inv Date/Description	Vendor #/Name/ Invoice #/Inv Date/Description	Document \$/ Line \$	Disc \$	PO #	Fund Org Acct	Object	Proj	Cash Account
47208		295 NORCO	415.63						
1	0045024892 10/31/25	CYLINDER RENT	184.90			1000 80 420461	356		101000
2	0044864890 10/14/25	MEDICAL OXYGEN	230.73			1000 80 420461	222		101000
		Total for Vendor:	415.63						
47125	83619S	547 NORTHWESTERN ENERGY	565.11						
1	0461994-6 10/01/25	STA 5	519.24			1000 10 420510	341		101000
2	3571057-3 10/01/25	OLD STA 5	45.87			1000 10 420510	341		101000
47159	83625S	547 NORTHWESTERN ENERGY	992.09						
1	3868058-3 10/15/25	STA 4	923.96			1000 10 420510	341		101000
2	0537315-4 10/16/25	STA 6	68.13			1000 10 420510	341		101000
47164	83628S	547 NORTHWESTERN ENERGY	963.22						
1	0477741-3 10/17/25	STA 1	814.25			1000 10 420510	341		101000
2	1489125-3 10/17/25	STA 1	148.97			1000 10 420510	341		101000
47185	83644S	547 NORTHWESTERN ENERGY	63.34						
1	0536085-4 10/21/25	STA 2	63.34			1000 10 420510	341		101000
		Total for Vendor:	2,583.76						
47064	83569S	114 PAUL FINLAY	315.00						
1	100125PF01 10/01/25	FINLAY MSFCA PER DIEM	315.00			1000 10 420510	379		101000
47165	83629S	114 PAUL FINLAY	252.00						
1	102725PF01 10/27/25	FINLAY BIG SKY SYMPOSIUM P	252.00			1000 10 420510	379		101000
		Total for Vendor:	567.00						
47209		1824 PELICAN CHEMICALS, INC	245.82						
1	770243 10/24/25	DE-ICE SOLUTION	245.82			1000 20 420440	270		101000
		Total for Vendor:	245.82						
47062	83570S	1701 PHILLIP MEDIATE	822.21						
1	100125PM01 10/01/25	MEDICATE ADV ROPE PD	441.00			1000 50 420460	379		101000
2	100125PM02 10/01/25	MEDIATE ADV ROPE CAR RENT	381.21			1000 50 420460	379		101000

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MISSOULA RURAL FIRE DISTRICT
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Claim/ Line #	Check Invoice #/Inv	Vendor #/Name/ Date/Description	Document \$/ Line \$	Disc \$	PO #	Fund Org Acct	Object	Proj	Cash Account
47154	83626S	1701 PHILLIP MEDIATE	154.00						
1	101625PM01	10/16/25 MEDIATE CMC ROPE TECH REIM	154.00			1000 50 420460	379		101000
		Total for Vendor:	976.21						
47142	-99265C	1725 PIERCE LEASING	750.00						
1	95274	10/07/25 10/7/25-11/3/25 OFFICE TRAILER	750.00			1000 10 420510	530		101000
		Total for Vendor:	750.00						
47211	C	988 PLATT	290.10						
1	6R26480	10/07/25 SHOP	16.95			1000 20 420440	270		101000
2	6S08176	10/17/25 STOCK	273.15			1000 20 420440	270		101000
		Total for Vendor:	290.10						
47212	C	756 POMP'S TIRE SERVICE, INC	1,974.59						
1	1850054797	10/24/25 341	1,509.14			1000 20 420440	233		101000
2	1850053847	10/07/25 355	465.45			1000 20 420440	233		101000
		Total for Vendor:	1,974.59						
47213	C	1239 REHBEIN FORD	698.50						
1	14841	10/08/25 355	698.50			1000 20 420440	272		101000
		Total for Vendor:	698.50						
47187	83645S	31 REPUBLIC SERVICES #889	631.10						
1	003866244	10/31/25 ALL STATIONS	631.10			1000 10 420510	342		101000
		Total for Vendor:	631.10						
47215		349 SAFETY KLEEN CORPORATION	204.51						
1	98327599	10/16/25 SOLVENT	204.51			1000 20 420440	370		101000
		Total for Vendor:	204.51						
47220	C	360 SHIPPING DEPOT	32.45						
1	34731	10/03/25 POSTAGE	19.91			1000 10 420510	311		101000
2	35449	10/22/25 POSTAGE	12.54			1000 10 420510	311		101000
		Total for Vendor:	32.45						

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MISSOULA RURAL FIRE DISTRICT
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Claim/ Line #	Check Invoice #/Inv Date/Description	Vendor #/Name/ Invoice #/Inv Date/Description	Document \$/ Line \$	Disc \$	PO #	Fund Org Acct	Object	Proj	Cash Account
47127	-99268C	1929 STREAMLINE	300.00						
1	DDC535-000	10/01/25 MONTHLY WEB HOSTING	300.00			1000 10 420510	368		101000
		Total for Vendor:	300.00						
47216		1714 STRYKER SALES CORP	64.96						
1	9210427943	10/01/25 EMS SUPPLIES	64.96			1000 80 420461	222		101000
		Total for Vendor:	64.96						
47218	C	1707 TEAR IT UP LLC	52.60						
1	72660	10/20/25 SHREDDING SERVIES	52.60			1000 10 420510	356		101000
		Total for Vendor:	52.60						
47222	C	463 TRI ARC, INC.	17.48						
1	R34391	10/31/25 CYLINDER RENT	17.48			1000 20 420440	370		101000
		Total for Vendor:	17.48						
47130	83620S	1628 UNIVISION	3,425.30						
1	265293	10/01/25 MIRCOSOFT 365	2,109.30			1000 10 420510	368		101000
2	265293	10/01/25 SUPPORT	1,316.00			1000 10 420510	368		101000
47224		1628 UNIVISION	37.50						
1	265950	10/31/25 SUPPORT	37.50			1000 10 420510	368		101000
		Total for Vendor:	3,462.80						
47157	-99262C	408 VERIZON WIRELESS	1,214.90						
1	6125787721	10/11/25 WIRELESS	1,214.90			1000 10 420510	345		101000
		Total for Vendor:	1,214.90						
47132	-99267C	1861 WESTERN STATES FIRE PROTECTION	900.00						
1	991284	10/02/25 STA 4 ANNUAL SPRINKLER INSPECT	900.00			1000 50 420460	364		101000
		Total for Vendor:	900.00						
47223	C	1724 WEX BANK	5,173.58						
1	108331257	10/31/25 FUEL	5,173.58			1000 20 420440	231		101000
		Total for Vendor:	5,173.58						

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MISSOULA RURAL FIRE DISTRICT
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For the Accounting Period: 10/25

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Claim/ Line #	Check Invoice #/Inv Date/Description	Vendor #/Name/ Invoice #/Inv Date/Description	Document \$/ Line \$	Disc \$	PO #	Fund Org Acct	Object	Proj	Cash Account
47063	83571S	1855 WILLIAM ROSSIER	441.00						
1	100125LR01 10/01/25	ROSSIER CMC ADV ROPE PD	441.00			1000 50 420460	379		101000
47151	83621S	1855 WILLIAM ROSSIER	32.36						
1	100525LR01 10/05/25	ROSSIER CAR RENTAL REIMB	32.36			1000 50 420460	379		101000
		Total for Vendor:	473.36						
47188	83646S	1818 ZANON FULBRIGHT	30.50						
1	103125ZF01 10/31/25	FULBRIGHT OCT GYM REIMB	30.50			1000 50 420460	132		101000
		Total for Vendor:	30.50						
		# of Claims	86	Total:	200,837.33	# of Vendors	50		
		Total Electronic Claims			16,502.67				
		Total Non-Electronic Claims			184334.66				

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MISSOULA RURAL FIRE DISTRICT
Fund Summary for Claims
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Fund/Account	Amount
1000 GENERAL FUND	
101000 CASH ON DEPOSIT - COUNTY TREASURER	200,837.33
Total:	200,837.33

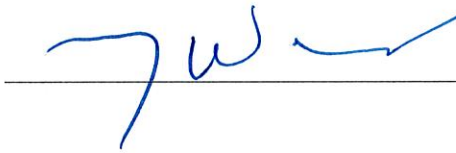
Claims reviewed and approved for payment at the Regular scheduled Missoula Rural Fire District Board of Trustee Meeting held Wednesday, November 12th, 2025, at 4:00 PM.



Melissa Schnee, Finance Director



Ben Murphy, Chairman



Dan Corti, Secretary

October 24, 2025

Dan Burger
8501 Haven Heights Road
Missoula, Montana 59808

Chief
Missoula Rural Fire Department
2521 South Avenue W
Missoula, Montana 59804


Dear Sir:

At approximately 5:45A, 10/19/2025, I contacted 911 for an unknown medical emergency. Lieutenant Kottwicz and Firefighter Hicks arrived at my home in response to that call. After intently listening to the explanation of my issue they proceeded to work as a team to obtain information defining those concerns. While attending to me their actions, explanations and respectful demeanor were caring, empathetic, respectful and professional. My wife was assured by their demeanor that I was in the best possible care.

Upon arrival at Saint Patrick Hospital the cardiac care physician stated, "Had those actions not been taken we would not be having this conversation".

I would like to commend Lieutenant Kottwicz and Firefighter Hicks for their actions.

Sincerely,



Dan Burger
Special Agent, FBI-Retired

cc: Lieutenant Kottwicz
Firefighter Hicks



United States
Department of
Agriculture

Forest
Service

Shasta-Trinity National Forest
Supervisor's Office

3644 Avtech Parkway
Redding, CA 96002
530-226-2500
TDD: 530-226-2490

File Code: 5100
Date: October 2, 2025

Missoula Rural Fire District
2521 South Avenue W
Missoula, MT 59804
Attn: Paul Finlay, Fire Chief

Dear Mr. Finlay,

On behalf of the Shasta-Trinity National Forest, I would like to thank you for your support during the unprecedented lightning events of the past few months. These storms brought over 9,000 strikes to our forest, sparking 117 lightning-caused fires. Additionally, we responded to 39 human-caused fires which occurred on federal land during this same timeframe. Through strong partnerships and effective coordination, we achieved a remarkable success rate, holding 95% of these fires to less than 10 acres.

Much of our success this season was due to partnerships with fire districts like yours. Missoula Engine 355 provided fire protection for the Shasta Lake Ranger District throughout the duration of our fire season and was instrumental in our successful initial attack on numerous fires across the entire Shasta-Trinity National Forest.

These results underscore what is possible when we work together across jurisdictions and communities. Your partnership allowed us to protect lives, reduce risk to property, preserve cultural and natural resources, and ensure that future generations can enjoy our National Forest System lands. We are stronger and more resilient because of the trust and teamwork you offered and we were deeply grateful to work alongside Missoula Engine 355 during these complex incidents.

With gratitude,

Rachel A. Birkey
Forest Supervisor
Shasta-Trinity National Forest



INCIDENT PERSONNEL PERFORMANCE RATING

INSTRUCTIONS: The immediate job supervisor will prepare this form for each subordinate. It will be delivered to the planning section before the rater leaves the fire. Rating will be reviewed with employee who will sign at the bottom.

THIS RATING TO BE USED ONLY FOR DETERMINING AN INDIVIDUAL'S PERFORMANCE

1. Name MRFD 355 (Cole Piley Engd)		2. Fire Name and Number 25SHF Support CA-SHF-000001	
3. Home Unit (address)		4. Location of Fire (address) SHF	
5. Fire Position Preposition	6. Date of Assignment From: 9/20/25 To: 9/28/25	7. Acres Burned N/A	8. Fuel Type(s) N/A

9. Evaluation

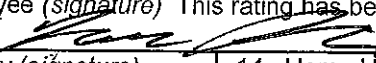
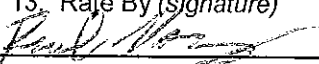
Enter X under appropriate rating number and under proper heading for each category listed. Definition for each rating number follows:

- 0 - Deficient. Does not meet minimum requirements of the individual statement. DEFICIENCIES MUST BE IDENTIFIED IN REMARKS.
- 1 - Needs to improve. Meets some or most of the requirements of the individual element. IDENTIFY IMPROVEMENT NEEDED IN REMARKS.
- 2 - Satisfactory. Employee meets all requirements of the individual element.
- 3 - Superior. Employee consistently exceeds the performance requirements.

Rating Factors	Hot Line				Mop-Up				Camp				Other (Specify)				
	0	1	2	3	0	1	2	3	0	1	2	3	0	1	2	3	
Knowledge of the job																	X
Ability to obtain performance																	X
Attitude																	X
Decisions under stress																	X
Initiative																	X
Consideration for personnel welfare																	X
Obtain necessary equipment and supplies																	X
Physical ability for the job																	X
Safety																	X
Other (specify)																	X

10. Remarks

The crew of 355 performed very well with project work of clearing trails, project work and also being fire ready, crew had a positive attitude and great work ethic. Engine crew was always on time to morning briefing and had great knowledge of the SHF.

11. Employee (signature) This rating has been discussed with me 			12. Date 9/28/25		
13. Rate By (signature) 		14. Home Unit (address) 36 Cottage Dr South Lake Tahoe		15. Position of Fire TFLD (C)	
			16. Date 9-28-25		

Dear Mr. [Name],
I have your letter of [Date] regarding [Subject].
I am sorry that I cannot give you a more definite answer at this time.
The [Department/Office] is still in the process of [Action].
I will be sure to contact you again as soon as a final decision has been reached.
Thank you very much for your patience and understanding.
Sincerely,
[Name]



THANK YOU SO MUCH!
-MRS. OLSON'S CLASS



Thank you so much!
We really appreciate!
The students LOVED it!

- Mrs. Olson John

BRAYDEN COOPER ELIQA
TODDYN

MAGON

MAHAYLA BELLA

CHRISTAH AMARA

HENRY JAMES

LILY CAZON

Thank you!

- Mrs. Basile's
1st Grade Class

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!



TO: Fire People

Thank you for
teaching us about
fire safety.

FROM: Aditya, M

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!



TO: FIRE DEPARTMENT

US YOU

FOR FIRE

ABOUT

FROM: Bode

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!



TO: Fire Department

THANK YOU
FOR TEACHING
US

SAKE

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!

TO: Fire People



Thank you for
teaching

To my

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!

TO: Fire People



THANK YOU FOR TEACHING
ABOUT FIRE SAFETY.

FROM:

THANK YOU FOR TEACHING US ABOUT

FIRE SAFETY!

TO:

Fire people



Thank you for
teaching us
about fire safety.

FROM:

Sophia

THANK YOU FOR TEACHING US ABOUT

FIRE SAFETY!

TO:

Fire people



for teaching us
about fire safety.

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!

TO:

Fire people
Thank you for



FROM:

pray for

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!

TO:

Fire People



Thank for every
thing

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!

TO: Fine people



Thank you for
teaching us
about fire safety

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!


TO: Fire people



I thank you for
keeping us safe


FROM: Dean

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!

TO: Fire people 
Thank you
for
safety.

FROM: Kade

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!

TO: Fire People 
Thank you for
helping
us
safely.

JANO

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!



TO: Fire People

THANK YOU FOR HELPING
US STAY SAFE

FROM: JANE

THANK YOU FOR TEACHING US ABOUT

FIRE SAFETY!

TO: FIRE FIGHTERS



THANK YOU FOR
TEACHING THIS

FROM: JACOB



FIRE SAFETY!



TO: Firefighters

Thank you for

Telling us it is

important thank you

FROM: Jackson

THANK YOU FOR TEACHING US ABOUT

FIRE SAFETY!



TO:

Firefighters
Thank you for

teaching us about

fire safety

FROM: Melodiah

FIRE SAFETY!



TO: Firefighters

I love firefighters.

FROM: Waxton

THANK YOU FOR TEACHING US ABOUT

FIRE SAFETY!



TO: Pete

Pete

FROM: _____

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!

TO:

firefighters



Thank you for telling

us fire safety

FROM:

Wyatt

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!

TO:

the firefighters



thank you for

making sure we

are safe from fires

FROM:

Margot

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!



TO: Firefighters
Facts for teaching
US how to how
if there is a fire.

FROM: Periah

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!



O:
Thank you for
teaching us to know
about firefighters
man

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!



TO: Firefighters

Thank you for helping

FROM: Gabe

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!



TO: Firefighters

Thank you for
helping us
stay safe
and for saving
things

FROM: [unclear]

Thank you
so much!

— Mrs. Olson's Class

**THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!**

: fire fits _____

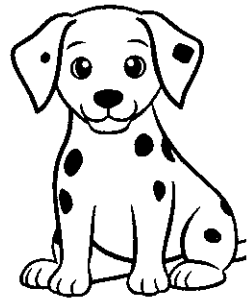


Thank you for putting out
the fires and the present
ation and teaching us about

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!

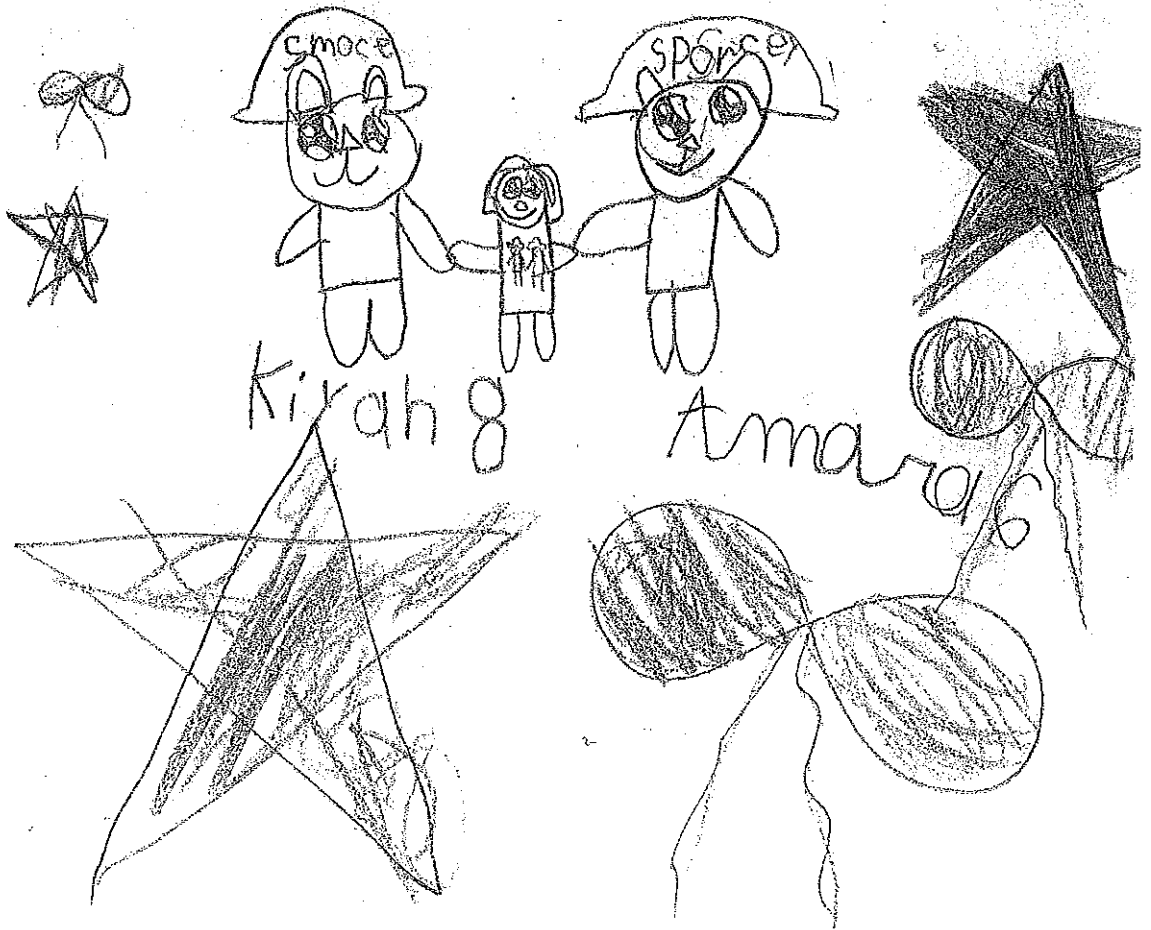
Firefighters

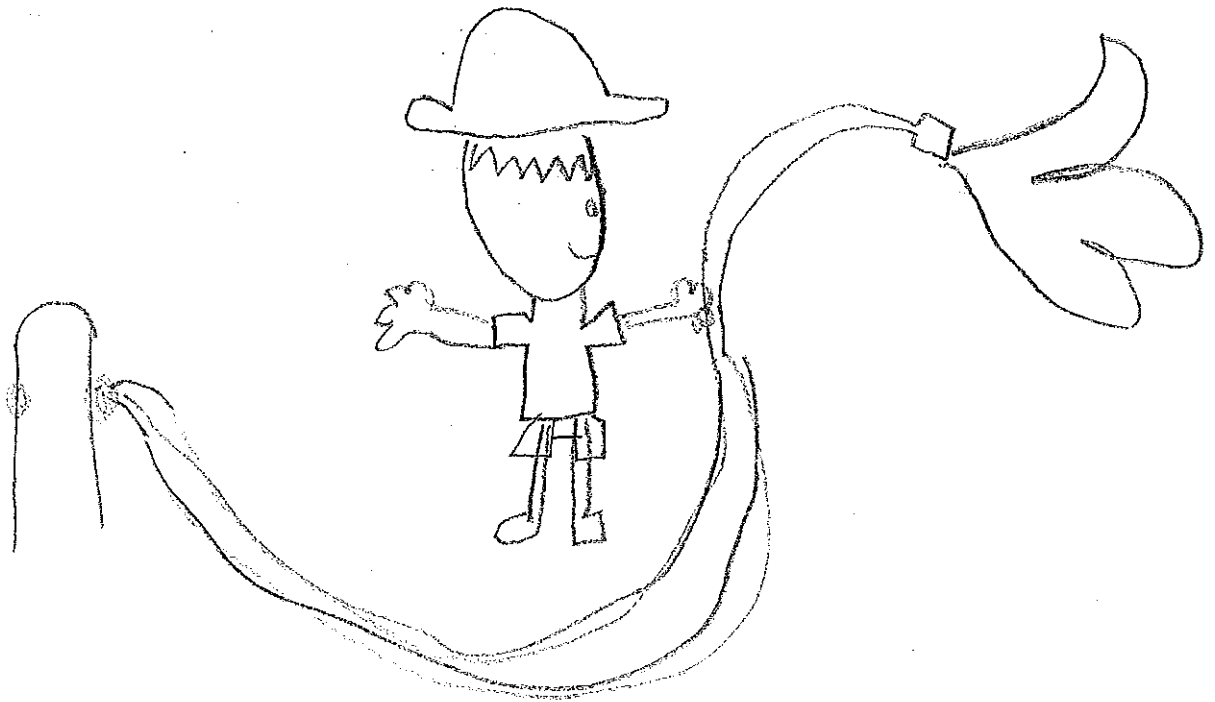
thank you for the
presentation



ROM:

Julia



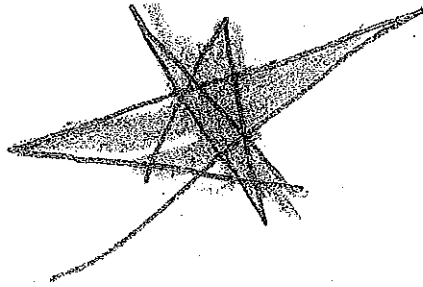
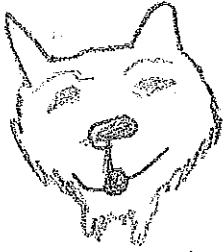


Thank you for visiting Lolo School!

Fire fighters

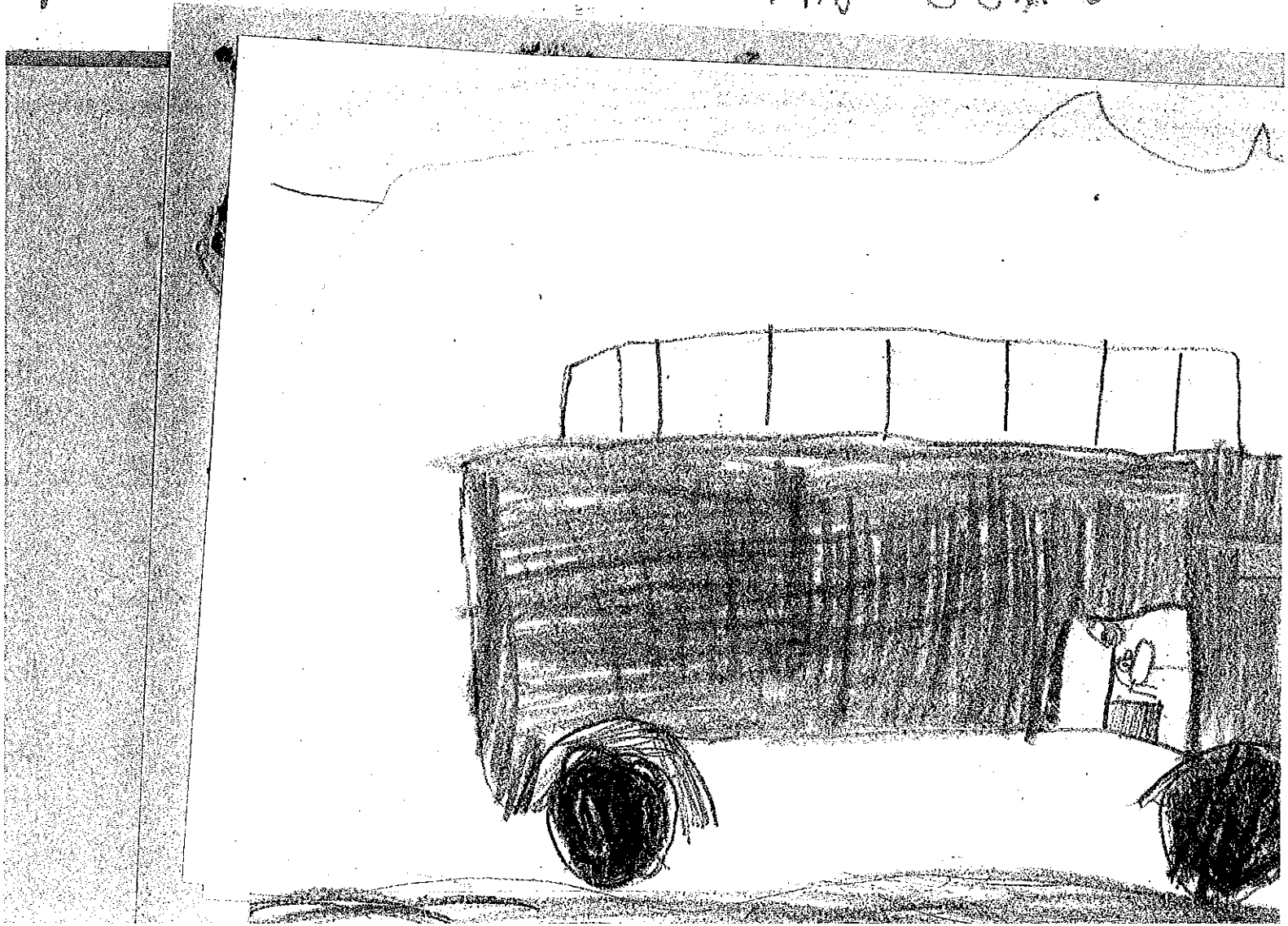
NAM CHRISTIAN

SOFT STOP



Thank you for keeping

US SAFE



THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!



THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!

THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!

THANK YOU FOR TEACHING US ABOUT
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THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!



THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!

Firefighters



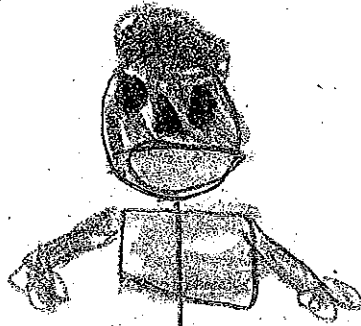
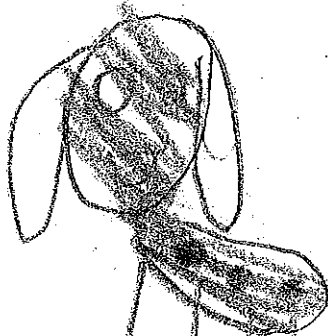
Thank you for the puppet

how. ♥♥♥♥♥ and fire safety.

from: COOPah

Thank you for visiting Lolo School!

Firefighters
Pet Show



m:

Ella Ella

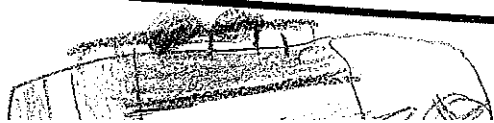
THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!

Firefighters



Putting out the fires. ©
Fire safety

Todd



Thank you for visiting Lolo School!

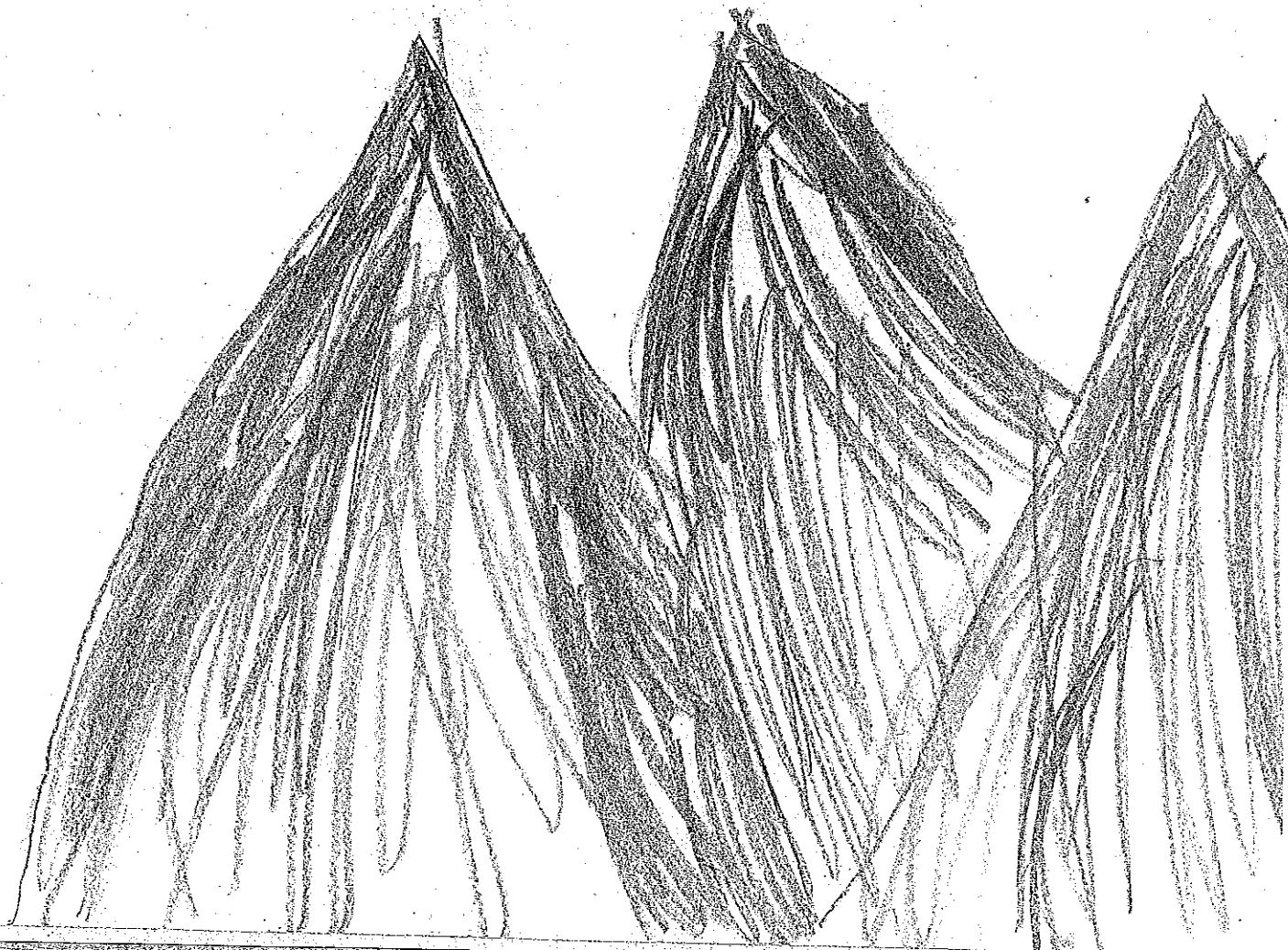


Fine Fighters

teaching us

about fine

safety



THANK YOU FOR TEACHING US ABOUT

FIRE SAFETY!

FIRE FIGHTERS

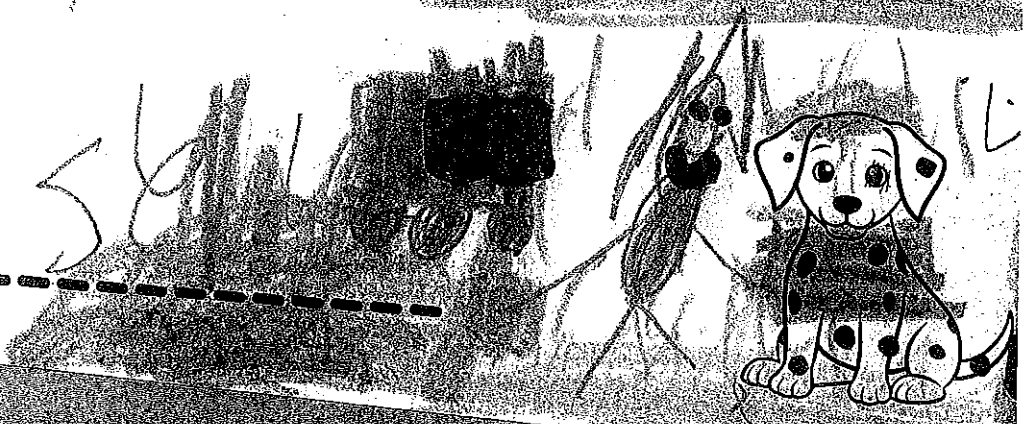
PUPPET SHOW

SHOW

Q.50h

rom:

Q.50h



Thank you for visiting Lolo School!



FIRE FIGHTERS

THANK YOU FOR
THE PRESENTATION

Thank you for visiting Lolo School!

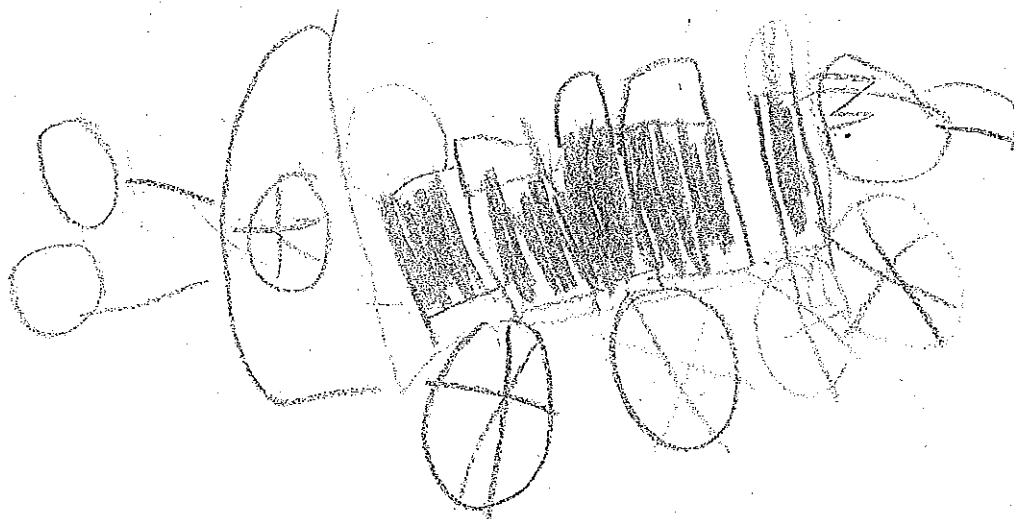


Firefighters

Thank you firefighters safety

Maha

Bella



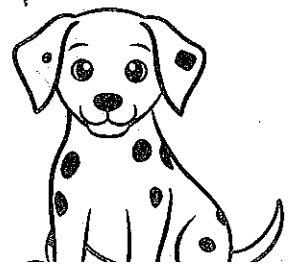


Firefighters
Thank You For Teaching

m: JAMES

**THANK YOU FOR TEACHING US ABOUT
FIRE SAFETY!**

teach
Thank you for teaching



m: Mason

We appreciate

you all!

October 2025 IT Report

Onboarded new users – Emma Christman, Maddie Schiller

Determine which computers will be able to be updated to Windows 11

Updated some computers to Windows 11

Diagnose MDT charging problem on 351

Acquire and install new computer for station meetings at Station 2

Acquire install new computers at Station 6 for Meetings and Crew 1

Diagnose Station Alerting problem

Finished updating IT Manager job description

Began retrieval of incident radio traffic for training purposes

Began new user computer configuration for Human Resources hire

Usual miscellaneous end user requests

Joe Ford
IT Manager

Deputy Fire Marshal Monthly Report

Peter V. Giardino

October 2025

Activities

Business Inspections (re-inspections):

- 6201 Brewery Way – Lolo Peak Brewery
- 7000 Graves Creek Road – The Jack Saloon (re-inspection needed)
- 4100 South Avenue West – Glacier Peak Preschool
- 10541 Deschamps Court
- Re-inspection for the Jack Saloon
- Opportunity Resources – 599 & 531 Howard Street (re-inspection needed)

Certificate of Occupancy Finals (Business)

- 7605 Pontrelli Place – Suite B (re-inspection needed)
- Completed re-inspection for 7605 Pontrelli Place – Suite B.

Residential Sprinkler Final, Rough-Ins, and C of O (residential) Inspections

- 18495 Highway 200 E.
- 7005 Siesta Drive
- Rough in sprinkler inspection for 7307 Peregrine Court.
- 6050 Cochise Drive
- 14633 Turah Road (re-inspection needed)
- Completed final for 14633 Turah Road.

Annexation

- I received PFA and started ACF for 14235 Mission View Drive.
- Prepared PFA's and began ACF for Adam Trina parcels.

Water Supply (cisterns, hydrants, etc.)

- Received notification that the cistern for Professional Drive is operational. 328's crew flow tested on 10/14.
- Phone conversation with Mike Snook re: adding hydrant locations to ArcGIS.

Lockboxes

- Generated invoice for Lifting Technologies located at 7406 Racetrack Dr.
- Replaced key for the Woodman School.
- Site visit to Lifting Technologies to discuss location of two (2) lockboxes.
- Locked keys in lockbox for Lifting Technologies.
- Locked keys in lockbox for 7605 Pontrelli Place
- Labeled and returned keys to lockbox for Orchard Gardens.

Community Risk Reduction, Fire Prevention, and Code Compliance

- MCFPA Fire Prevention School Programs
 - Lolo Elementary
 - Desmet Elementary
 - St. Joseph Elementary & Grade School

- Lowell Elementary
- Franklin Elementary
- Jeannette Rankin Elementary
- Frenchtown Elementary
- Potomac Elementary
- Ovando Elementary
- Hellgate Elementary (2 shows)
- Target Range Elementary
- Valley Christian School
- Sussex School
- Rattlesnake Elementary
- Hawthorn Elementary
- Site visit to Marshal Mountain to determine occupancy load for the old bar building.
- Ordered two (2) address signs for 14180 & 14580 Hellgate Lane, per website request.
- Delivered occupancy load sign to Marshal Mountain Park Director.
- Put together 80 swag bags for MRFD vaccination clinic and Watson's Children's Shelter.
- Researched sprinkler and fire alarm requirements for change of use A-3 occupancy.
- Picked up address signs from Big Bear.
- Approved site plan submitted for new SFR for 12655 Mill Creek Road – Driveway and turnaround.
- Meeting with Red Cross to discuss partnership opportunities (smoke detectors, etc.)
- Fire prevention presentation for Fort Courage Childcare. 311 attended.
- Provided comments to PDS re: 4285 Highway 93 South.
- Conversation with contractor re: sprinkler requirements for Mackintosh Manor subdivision.
- Researched fire code for qualification requirements for sprinkler system installers.
- Site visit to Missoula Fall Festival at 5280 Deschamps Lane to ensure access has been maintained.
- Site visit to 9745 Highway 12 W. to discuss location of C1/D1 container.

Fire Investigations

- Replied to DNRC re: Pertile Lane fire investigation so they could close out their report.

Classes/Training

- Fire extinguisher class for Frenchtown Dental employees.
- Fire extinguisher class for Missoula County employees, held at the Fairgrounds.
- Delivered ArcGIS pre plan refresher training during morning meetings (Oct. 27-29)

Plan Reviews

- 5562 Handy Lane
- 10825 Sleeman Creek Rd.
- Fire alarm riser for 9263 Bonner Mill Road
- Sprinkler plans for 7307 Peregrine Court
- 8340 Highway 200 E.
- 12655 Mill Creek Road
- 11020 Habitat Drive
- 12124 Flora Drive
- 6820 Bristle Cone Court
- 5835 Lariat Loop
- 9950 Longacres Drive -- Unit B4
- 9435 Futurity Drive
- Reviewed sprinkler plans for 6571 Lamar Trail.
- Reviewed sprinkler plans for 4105 Sierra Drive.
- 3200 Raser Drive – Thatcher Chemical
- 7945 Highway 200 E.
- 4105 Sierra Drive
- 10617 Upland Trail

- 715 Gary Drive

Image Trend:

- Made updates to the Community Homes inspection form. More updates are needed.

Assignments and Other Activities

- Virtual meeting with developers to discuss fire code requirements for new build at Grass Valley Industrial.
- Replied to insurance agent re: fire protection for 7855 Alta View.
- Spoke with contractor re: MRFD response capabilities for insurance coverage for new SFR at 3825 Ridge View RD.
- Officer's meeting
- DRT meeting
- Meeting with OEM and City Planners to discuss potential impacts of new zoning regulations.
- Monthly meeting with Public Works to discuss projects in MRFD's jurisdiction.
- Coordinated compliance meeting.
- State-wide Fire Marshal's meeting.
- DRT meeting to discuss Blackfoot Crossing, Phase 1.
- Updates to CRR files.
- Reviewed the Wye Infrastructure Plan (WIP).
- DRT meeting continued discussion re: Blackfoot Crossing.

Accreditation

- Reviewed CRA-SOC and SAM in preparation for peer team visit in December.

Public Relations Outreach Breakdown

October 2025

- 9 total documented events
 - 4 social media posts (Facebook/Instagram/Twitter)
 - 1 scheduled media appearance (Newspaper/Radio/TV)
 - 1 in station event (Car Seat Event/Station Tour)
 - 0 impromptu media appearance (Newspaper/Radio/TV)
 - 3 other (Fundraiser/Parade/Etc.)4

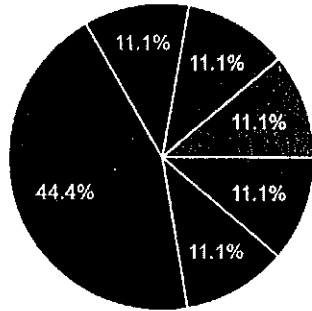
Date

9 responses

Oct 2025 | 1 2 10 11 2 13 16 20 28

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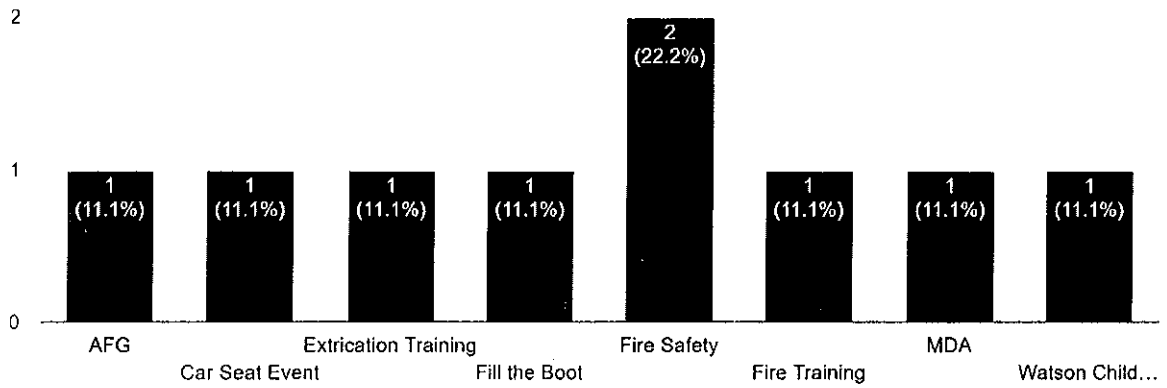
9 responses



- In-station event
- Scheduled media appearance
- Impromptu/incident media appearance
- Social Media Post
- Fill the Boot
- Watson Children's Center Visit
- Lolo School Puppet Show

Topic Being Discussed

9 responses





MRFD CFS Report

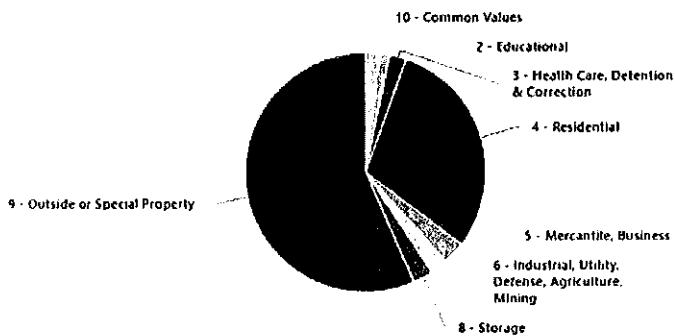
October 2025

Incident Numbers

October 2025	298	October 2024	323	Percent Change	-7.74%
YTD 2025	3218	YTD 2024	3444	Percent Change	-6.56%

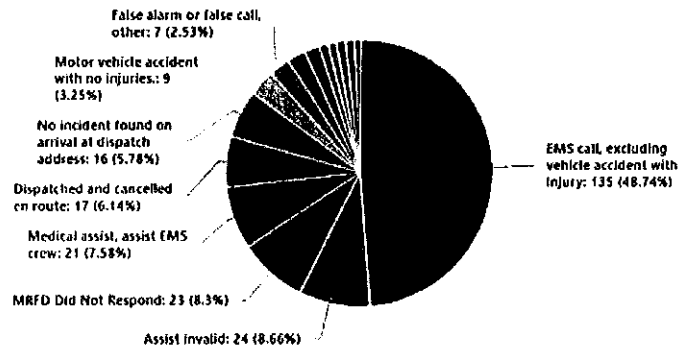
Incidents by Property Use Category

Oct 01, 2025 to Oct 31, 2025



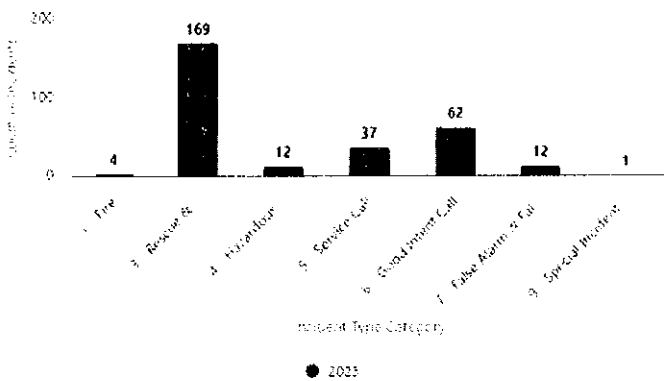
Incident Types (Top 15)

Oct 01, 2025 to Oct 31, 2025



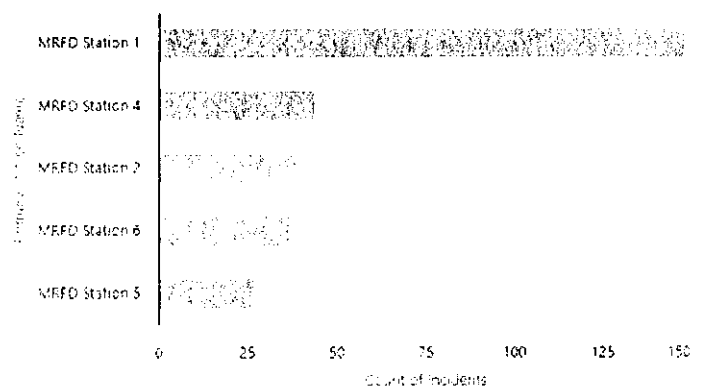
Incidents by Category and Year

Oct 01, 2025 to Oct 31, 2025



Incidents by Primary Station Name

Oct 01, 2025 to Oct 31, 2025

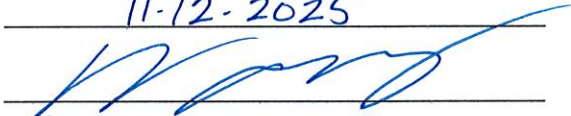


ADOPTING RESOLUTION # 2025-10

The undersigned authorized representative of Missoula Rural Fire District (the Employer) hereby certifies that the following resolutions were duly adopted by the Employer on the date specified below, and that such resolutions have not been modified or rescinded as of the signature date below:

RESOLVED, that the form of amended 457 Plan and Trust effective January 1, 2026, presented to this meeting is hereby approved and adopted and that an authorized representative of the Employer is hereby authorized and directed to execute and deliver to the Administrator of the Plan one or more counterparts of the Plan.

Date: 11-12-2025

Signed: 
Ben Murphy, chair
[print name/title]

**ADOPTION AGREEMENT FOR
ELIGIBLE GOVERNMENTAL 457 PLAN**

The undersigned Employer, by executing this Adoption Agreement, establishes an Eligible 457 Plan ("Plan"). The Employer, subject to the Employer's Adoption Agreement elections, adopts fully the Plan provisions. This Adoption Agreement, the basic plan document and any attached Appendices, amendments, or agreements permitted or referenced therein, constitute the Employer's entire plan document. All "Election" references within this Adoption Agreement or the basic plan document are Adoption Agreement Elections. All "Article" or "Section" references are basic plan document references. Numbers in parentheses which follow election numbers are basic plan document references. Where an Adoption Agreement election calls for the Employer to supply text, the Employer may lengthen any space or line, or create additional tiers. When Employer-supplied text uses terms substantially similar to existing printed options, all clarifications and caveats applicable to the printed options apply to the Employer-supplied text unless the context requires otherwise. The Employer makes the following elections granted under the corresponding provisions of the basic plan document.

1. **EMPLOYER (1.11).**

Name: Missoula Rural Fire District

Address: 2521 South Ave W

Street

Missoula Montana 59804-6407

City

State

Zip

Telephone: 406.549.6172

Taxpayer Identification Number (TIN): 81-0386669

2. **PLAN NAME.**

Name: Missoula Rural Fire District Deferred Compensation Plan

3. **PLAN YEAR (1.25).** Plan Year means the 12 consecutive month period (except for a short Plan Year) ending every (Choose one of a. or b. and choose c. if applicable): [Note: Complete any applicable blanks under Election c. with a specific date, e.g., "June 30" OR "the last day of February" OR "the first Tuesday in January." In the case of a Short Plan Year or a Short Limitation Year, include the year, e.g., "May 1, 2013."]]

a. December 31.

b. Plan Year: ending: June 30.

c. Short Plan Year: commencing: _____ and ending: _____.

4. **EFFECTIVE DATE (1.08).** The Employer's adoption of the Plan is a (Choose one of a. or b. Complete c. if new plan OR complete c. and d. if an amendment and restatement. Choose e. if applicable):

a. New Plan.

b. Restated Plan. The Plan is a substitution and amendment of an existing 457 plan.

Initial Effective Date of Plan

c. July 1, 1987 (enter month day, year; hereinafter called the "Effective Date" unless 4d is entered below)

Restatement Effective Date (If this is an amendment and restatement, enter effective date of the restatement.)

d. January 1, 2026 (enter month day, year)

Special Effective Dates: (optional)

e. Describe: _____

5. **CONTRIBUTION TYPES.** (If this is a frozen Plan (i.e., all contributions have ceased), choose a. only):

Frozen Plan

a. Contributions cease. All Contributions have ceased or will cease (Plan is frozen).

1. Effective date of freeze: _____ [Note: Effective date is optional unless this is the amendment or restatement to freeze the Plan.]

Contributions. The Employer and/or Participants, in accordance with the Plan terms, make the following Contribution Types to the Plan (Choose one or more of b. through d. if applicable):

- b. **Pre-Tax Elective Deferrals.** The dollar or percentage amount by which each Participant has elected to reduce his/her Compensation, as provided in the Participant's Salary Reduction Agreement (Choose one or more as applicable.):

And will Roth Elective Deferrals be made?

1. **Yes.** [Note: The Employer may not limit Deferrals to Roth Deferrals only.]
 2. **No.**

And will Matching Contributions be made with respect to Elective Deferrals?

3. **Yes.** See Question 16.
 4. **No.**

- c. **Nonelective Contributions.** See Question 17.

- d. **Rollover Contributions.** See Question 30.

6. **EXCLUDED EMPLOYEES (1.10).** The following Employees are Excluded Employees and are not eligible to participate in the Plan (Choose one of a. or b.):

- a. **No exclusions.** All Employees are eligible to participate.
- b. **Exclusions.** The following Employees are Excluded Employees (Choose one or more of 1. through 9.):
1. **Part-time Employees.** Employees who normally work less than 20 hours per week.
 2. **Part-Time, Seasonal, and Temporary Employees as defined in Treas. Reg. §31.3121(b)(7)-2(d)(2)(iii).** [This exclusion is sometimes used in FICA replacement plans.]
 3. **Hourly-paid Employees.**
 4. **Salaried Employees.**
 5. **Nonresident aliens as defined in Code §410(b)(3)(C).**
 6. **Employees covered by a collective bargaining agreement unless the agreement provides otherwise.**
 7. **Employees in an appointed or elected position.**
 8. **Leased Employees.** The Plan excludes Leased Employees.
 9. **Specify: Seasonal Employees: All other Employees are eligible for contributions except for Employer Non-elective contributions, which are only allowed for Employees participating in the Montana Public Employee Retirement System**

7. **INDEPENDENT CONTRACTOR (1.16).** The Plan (Choose one of a., b. or c.):

- a. **Participate.** Permits Independent Contractors to participate in the Plan.
- b. **Not Participate.** Does not permit Independent Contractors to participate in the Plan.
- c. **Specified Independent Contractors.** Permits the following specified Independent Contractors to participate:

[Note: If the Employer elects to permit any or all Independent Contractors to participate in the Plan, the term Employee as used in the Plan includes such participating Independent Contractors.]

8. **COMPENSATION (1.05).** Subject to the following elections, Compensation for purposes of allocation of Deferral Contributions means:

Base Definition (Choose one of a., b., c. or d.):

- a. Wages, tips and other compensation on Form W-2.
- b. Code §3401(a) wages (wages for withholding purposes).
- c. 415 safe harbor compensation.
- d. Alternative (general) 415 Compensation.

[Note: The Plan provides that the base definition of Compensation includes amounts that are not included in income due to Code §§401(k), 125, 132(f)(4), 403(b), SEP, 414(h)(2), & 457. Compensation for an Independent Contractor means the amounts the Employer pays to the Independent Contractor for services, except as the Employer otherwise specifies below. The base definition of Compensation is used to determine Includible Compensation.]

Modifications to Compensation definition. The Employer elects to modify the Compensation definition as follows (*Choose one of e. or f.*):

- e. **No modifications.** The Plan makes no modifications to the definition.
- f. **Modifications** (*Choose one or more of 1. through 9.*):
 - 1. **Fringe benefits.** The Plan excludes all reimbursements or other expense allowances, fringe benefits (cash and noncash), moving expenses, deferred compensation and welfare benefits.
 - 2. **Elective Contributions.** [1.05(E)] The Plan excludes a Participant's Elective Contributions.
 - 3. **Bonuses.** The Plan excludes bonuses.
 - 4. **Overtime.** The Plan excludes overtime.
 - 5. **Excess Compensation.** The Plan excludes Compensation in excess of _____ (enter definitely determinable amount, such as "\$100,000," or "the compensation limit under Code §401(a)(17)").
 - 6. **Shift differentials.** The Plan excludes shift differential pay.
 - 7. **Differential wage payments.** The Plan excludes differential wage payments described in Code §3401(h)(2).
 - 8. **Union exclusions.** The Plan excludes such categories of a Participant's Compensation as are provided for exclusion in the collective-bargaining agreement which applies to the Participant.
 - 9. **Specify:** Longevity Incentive, Hazmat Incentive, EMT/Paramedic Incentive, & Clothing Allowance

Compensation taken into account. For the Plan Year in which an Employee first becomes a Participant, the Plan Administrator will determine the allocation of matching and nonelective contributions by taking into account (*Choose one of g. or h.*):

- g. **Plan Year.** The Employee's Compensation for the entire Plan Year. (*N/A if no matching or nonelective contributions*)
- h. **Compensation while a Participant.** The Employee's Compensation only for the portion of the Plan Year in which the Employee actually is a Participant. (*N/A if no matching or nonelective contributions*)

9. **POST-SEVERANCE COMPENSATION (1.05(F)).**

Includible Compensation (post-severance compensation adjustments) (*select all that apply at a.; leave blank if none apply*)

NOTE: Unless otherwise elected under a. below, the following defaults apply: 415 Compensation will **include** (to the extent provided in Plan Section 1.05(B)(3)), post-severance regular pay, leave cash-outs and payments from nonqualified unfunded deferred compensation plans.

- a. The defaults listed above apply except for the following (*select one or more*):
 - 1. Leave cash-outs will be **excluded**
 - 2. Nonqualified unfunded deferred compensation will be **excluded**
 - 3. Disability continuation payments will be **included** for all Participants and the salary continuation will continue for the following fixed or determinable period: _____
 - 4. Other: (must be definitely determinable): _____

Plan Compensation (post-severance compensation adjustments)

- b. **Defaults apply.** Compensation will **include** (to the extent provided in Plan Section 1.05 and to the extent such amounts would be included in Compensation if paid prior to severance of employment) post-severance regular pay, leave cash-outs, and payments from nonqualified unfunded deferred compensation plans. (skip to Question 10)
- c. **Exclude all post-severance compensation.** Exclude all post-severance compensation for allocation purposes.
- d. **Post-severance adjustments.** The defaults listed at b. apply except for the following (*select one or more*):
 - 1. Regular pay will be **excluded**
 - 2. Leave cash-outs will be **excluded**
 - 3. Nonqualified unfunded deferred compensation will be **excluded**
 - 4. Disability continuation payments will be **included** for all Participants and the salary continuation will continue for the following fixed or determinable period: _____
- e. Other: (must be definitely determinable) _____

10. **NORMAL RETIREMENT AGE (1.20).** A Participant attains Normal Retirement Age under the Plan (*Choose one of a., b. or c.*):

- a. **Plan designation.** [Plan Section 3.05(B)] When the Participant attains age 60. [*Note: The age may not exceed age 70 1/2. The age may not be less than age 65, or, if earlier, the age at which a Participant may retire and receive benefits under the Employer's pension plan, if any.*]

- b. **Participant designation.** [Plan Section 3.05(B) and (B)(1)] When the Participant attains the age the Participant designates, which may not be earlier than age _____ and may not be later than age _____. [Note: The age may not exceed age 70 1/2.]
- c. **Pension Benefit Age.** The Pension Benefit Age defined in Plan Section 1.20.

Special Provisions for Police or Fire Department Employees (Choose d. and/or e. as applicable):

- d. **Police department employees.** [Plan Section 3.05(B)(3)] (Choose 1., 2. or 3.):
 - 1. **Plan designation.** [Plan Section 3.05(B)] When the Participant attains age _____. [Note: The age may not exceed age 70 1/2 and may not be less than age 40.]
 - 2. **Participant designation.** [Plan Section 3.05(B) and (B)(1)] When the Participant attains the age the Participant designates, which may not be earlier than age _____ (no earlier than age 40) and may not be later than age _____. [Note: The age may not exceed age 70 1/2.]
 - 3. **Pension Benefit Age.** The Pension Benefit Age defined in Plan Section 1.20.
- e. **Fire department employees.** [Plan Section 3.05(B)(3)] (Choose 1., 2. or 3.):
 - 1. **Plan designation.** [Plan Section 3.05(B)] When the Participant attains age _____. [Note: The age may not exceed age 70 1/2 and may not be less than age 40.]
 - 2. **Participant designation.** [Plan Section 3.05(B) and (B)(1)] When the Participant attains the age the Participant designates, which may not be earlier than age _____ (no earlier than age 40) and may not be later than age _____. [Note: The age may not exceed age 70 1/2.]
 - 3. **Pension Benefit Age.** The Pension Benefit Age defined in Plan Section 1.20.

11. **ELIGIBILITY CONDITIONS (2.01).** (Choose one of a. or b.):

- a. **No eligibility conditions.** The Employee is eligible to participate in the Plan as of his/her first day of employment with the employer.
- b. **Eligibility conditions.** To become a Participant in the Plan, an Eligible Employee must satisfy the following eligibility conditions (Choose one or more of 1., 2. or 3.):
 - 1. **Age.** Attainment of age _____.
 - 2. **Service.** Service requirement (Choose one of a. or b.):
 - a. **Year of Service.** One year of Continuous Service.
 - b. **Months of Service.** _____ month(s) of Continuous Service.
 - 3. **Specify:** _____

12. **PLAN ENTRY DATE (1.24).** "Plan Entry Date" means the Effective Date and (Choose one of a. through g. The Employee will enter on the Entry Date which immediately follows the date the employee satisfies the eligibility conditions, unless h. is selected. See 6.03(B) regarding the timing of deferral elections.):

- a. **Annual.** The first day of the Plan Year coinciding with or next following the Employee's satisfaction of the Plan's eligibility conditions, if any.
- b. **Semi-annual.** The first day of the first month and of the seventh month of the Plan Year.
- c. **Quarterly.** The first day of each Plan Year quarter.
- d. **Monthly.** The first day of each month.
- e. **Date of hire.** The Employee's employment commencement date with the Employer.
- f. **Immediate.** The Employee's employment commencement date with the Employer, or, if later, upon satisfaction of eligibility conditions.
- g. **Specify:** _____
- h. **Immediately following or coincident with.** The Employee will enter on the Entry Date immediately following or coincident with the date the Employee satisfies the eligibility conditions.

13. **SALARY REDUCTION CONTRIBUTIONS (1.30)**. A Participant's Salary Reduction Contributions under Election 5b. are subject to the following limitation(s) in addition to those imposed by the Code (Choose one of a. or b.):

- a. **No limitations.**
- b. **Limitations.** (Choose one or more of 1., 2. or 3.):
 - 1. **Maximum deferral amount.** A Participant's Salary Reductions may not exceed: _____ (specify dollar amount or percentage of Compensation).
 - 2. **Minimum deferral amount.** A Participant's Salary Reductions may not be less than: _____ (specify dollar amount or percentage of Compensation).
 - 3. **Specify:** _____

[Note: Any limitation the Employer elects in b. 1. through b.3. will apply on a payroll basis unless the Employer otherwise specifies in b.3.]

Special NRA Catch-Up Contributions (3.05). The Plan (Choose one of c. or d.):

- c. **Permits.** Participants may make NRA catch-up contributions.
- d. **Does not permit.** Participants may not make NRA catch-up contributions.

Age 50 Catch-Up Contributions (3.06). The Plan (Choose one of e. or f.):

- e. **Permits.** Participants may make age 50 catch-up contributions.
- f. **Does not permit.** Participants may not make age 50 catch-up contributions.

14. **SICK, VACATION AND BACK PAY (3.02(A))**. The Plan (Choose one of a. or b.):

- a. **Permits.** Participants may make Salary Reduction Contributions from accumulated sick pay, from accumulated vacation pay or from back pay.
- b. **Does Not Permit.** Participants may not make Salary Reduction Contributions from accumulated sick pay, from accumulated vacation pay or from back pay.

15. **AUTOMATIC ENROLLMENT (3.02(B))**. Does the Plan provide for Automatic Deferrals? (Choose one of the following) [Note: if Eligible Automatic Contribution Arrangement (EACA), select 15c and complete Questions 31 & 32]:

- a. **Does not apply.** Does not apply the Plan's automatic enrollment provisions.
- b. **Applies.** The Plan applies the Automatic Deferrals provisions described in election 31 effective as of _____. The Plan is not an EACA.
- c. **EACA.** The Plan will provide an Eligible Automatic Contribution Arrangement (EACA) effective as of _____. Complete Questions 31 & 32.

16. **MATCHING CONTRIBUTIONS (3.03(A))**. The Employer Matching Contributions under Election 5.b.1. are made as follows (Choose one or more of a. through d.):

- a. **Fixed formula.** An amount equal to (Choose one of 1. through 3.):
 - 1. **Deferral percentage.** _____% of each Participant's Salary Reduction Contributions.
 - 2. **Flat dollar.** \$_____ if the Participant's Salary Reduction Contributions are at least _____ (Enter percentage of compensation or dollar amount).
 - 3. **Contract.** The contribution determined pursuant to the Participant's employment contract or the collective-bargaining agreement which applies to the Participant.
- b. **Discretionary formula.** An amount (or additional amount) equal to a matching percentage the Employer from time to time may deem advisable of each Participant's Salary Reduction Contributions.

- c. **Tiered formula.** The Employer will make matching contributions equal to a uniform percentage of each tier of each Participant's Salary Reduction Contributions, determined as follows:

NOTE: Fill in only percentages or dollar amounts, but not both. If percentages are used, each tier represents the amount of the Participant's applicable contributions that equals the specified percentage of the Participant's Compensation (add additional tiers if necessary):

Tiers of Contributions (indicate \$ or %)	Matching Percentage
First _____	_____ %
Next _____	_____ %
Next _____	_____ %
Next _____	_____ %

- d. **Specify:** _____

Time Period for Matching Contributions. The Employer will determine its Matching Contribution based on Salary Reduction Contributions made during each (Choose one of e. through i.):

- e. **Plan Year.**
 f. **Plan Year quarter.**
 g. **Calendar month.**
 h. **Payroll period.**
 i. **Specify:** _____

Percentage Limit on Salary Reduction Contributions Taken into Account. In determining a Participant's Salary Reduction Contributions taken into account for the above-specified time period under the Matching Contribution formula, the following limitations apply (Choose one of j. through m.):

- j. **All Salary Reduction Contributions.** The Plan Administrator will take into account all Salary Reduction Contributions.
 k. **Percentage limitation.** The Plan Administrator will disregard Salary Reduction Contributions exceeding _____ % of the Participant's Compensation.
 l. **Discretionary percentage.** The Plan Administrator will take into account the Salary Reduction Contributions as a percentage of the Participant's Compensation as the Employer determines.
 m. **Specify:** _____

Salary Reduction Contributions Disregarded. In determining a Participant's Salary Reduction Contributions taken into account for the above-specified time period under the Matching Contribution formula, all Salary Reduction Contributions will be taken into account other than those specified below (Check all that apply):

- n. **Age 50 Catch-Up Contributions.**
 o. **Special NRA Catch-Up Contributions.**
 p. **Specify:** _____

Allocation Conditions. To receive an allocation of Matching Contributions, a Participant must satisfy the following allocation condition(s) (Choose one of q. or r.):

- q. **No allocation conditions.**
 r. **Conditions.** The following allocation conditions apply to Matching Contributions (Choose one or more of 1. through 4.):
1. **Service condition.** The Participant must complete the following number of months of Continuous Service during the Plan Year: _____
 2. **Employment condition.** The Participant must be employed by the Employer on the last day of the Plan Year.
 3. **Limited Severance Exception.** Any condition specified in 1. or 2. does not apply if the Participant incurs a Severance from Employment during the Plan Year on account of the following event or events in the current Plan Year or a prior Plan Year. (Check all that apply):
 - a. **Death.**
 - b. **Disability.**
 - c. **Attainment of Normal Retirement Age.**
 4. **Specify:** _____

17. **NONELECTIVE CONTRIBUTIONS (3.03(B))**. The Nonelective Contributions under Election 5.c. are made as follows: *(Choose one)*:

- a. **Discretionary - Pro-Rata**. An amount the Employer in its sole discretion may determine.
- b. **Fixed**. *(Choose one of 1. through 3.)*
 - 1. **Percentage**. _____% of Compensation.
 - 2. **Flat dollar**. \$_____.
 - 3. **Contract**. The contribution determined pursuant to the Participant's employment contract or the collective-bargaining agreement which applies to the Participant.
- c. **Other**. A Nonelective Contribution may be made as follows: _____

Allocation Conditions. (3.08). To receive an allocation of Nonelective Contributions, a Participant must satisfy the following allocation condition(s) *(Choose one of d. or e.)*:

- d. **No allocation conditions**.
- e. **Conditions**. The following allocation conditions apply to Nonelective Contributions *(Choose one or more of 1. through 4.)*:
 - 1. **Service condition**. The Participant must complete the following number of months of Continuous Service during the Plan Year: _____.
 - 2. **Employment condition**. The Participant must be employed by the Employer on the last day of the Plan Year.
 - 3. **Limited Severance Exception**. Any condition specified in 1. or 2. does not apply if the Participant incurs a Severance from Employment during the Plan Year on account of the following event or events in the current Plan Year or a prior Plan Year *(Check all that apply)*:
 - a. **Death**.
 - b. **Disability**.
 - c. **Attainment of Normal Retirement Age**.
 - 4. **Specify**: _____

Time Period for Nonelective Contributions. The Employer will determine its Nonelective Contributions based on employment and Compensation during each *(Choose one of f. through j.)*:

- f. **Plan Year**.
- g. **Plan Year quarter**.
- h. **Calendar month**.
- i. **Payroll period**.
- j. **Specify**: _____

18. **TIME AND METHOD OF PAYMENT OF ACCOUNT (4.02)**. The Plan will distribute to a Participant who incurs a Severance from Employment his/her Vested Account as follows:

Timing. The Plan, in the absence of a permissible Participant election to commence payment later, will pay the Participant's Account *(Choose one of a. through e.)*:

- a. **Specified Date**. _____ days after the Participant's Severance from Employment.
- b. **Immediate**. As soon as administratively practicable following the Participant's Severance from Employment.
- c. **Designated Plan Year**. As soon as administratively practicable in the _____ Plan Year beginning after the Participant's Severance from Employment.
- d. **Normal Retirement Age**. As soon as administratively practicable after the close of the Plan Year in which the Participant attains Normal Retirement Age.
- e. **Specify**: _____

Method. The Plan, in the absence of a permissible Participant election, will distribute the Participant's Account under one of the following method(s) of distribution *(Choose one or more of f. through k. as applicable)*:

- f. **Lump sum**. A single payment.
- g. **Installments**. Multiple payments made as follows: _____
- h. **Installments for required minimum distributions only**. Annual payments, as necessary under Plan Section 4.03.
- i. **Annuity distribution as available pursuant to the policies and options determined in the discretion of the Plan Administrator**.

j. **Partial distributions**, provided the minimum withdrawal is \$_____ (leave blank if no minimum). See Section 4.02(D).

k. **Specify:** _____

Participant Election. [Plan Sections 4.02(A) and (B)] The Plan (Choose one of l., m. or n.):

l. **Permits.** Permits a Participant, with Plan Administrator approval of the election, to elect to postpone distribution beyond the time the Employer has elected in a. through e. and also to elect the method of distribution (including a method not described in f. through k. above).

m. **Does not permit.** Does not permit a Participant to elect the timing and method of Account distribution.

n. **Specify:** _____

Mandatory Distributions. Notwithstanding any other distribution election, following Severance from Employment (Choose o. or p.):

o. **No Mandatory Distributions.** The Plan will not make a Mandatory Distribution.

p. **Mandatory Distribution.** If the Participant's Vested Account is not in excess of \$7,000 (unless a different amount selected below) as of the date of distribution, the Plan will make a Mandatory Distribution following Severance from Employment.

1. **Mandatory Distribution.** If the Participant's Vested Account is not in excess of \$_____ as of the date of distribution, the Plan will make a Mandatory Distribution following Severance from Employment.

Qualified Health Insurance Premiums.

q. **Payment permitted.** The plan permits payment of qualified health insurance premiums for Eligible Retired Public Safety Officers, as set forth in Section 4.08.

Rollovers in determination of \$7,000 threshold. Unless otherwise elected below, amounts attributable to rollover contributions (if any) will be included in determining the \$7,000 threshold for timing of distributions, form of distributions or consent rules.

r. **Exclude rollovers** (rollover contributions will be excluded in determining the \$7,000 threshold)

NOTE: Regardless of the above election, if the Participant consent threshold is \$1,000 or less, then the Administrator must include amounts attributable to rollovers for such purpose. In such case, an election to exclude rollovers above will apply for purposes of the timing and form of distributions.

19. **BENEFICIARY DISTRIBUTION ELECTIONS.** Distributions following a Participant's death will be made as follows (Choose one of a. through d.):

a. **Immediate.** As soon as practical following the Participant's death.

b. **Next Calendar Year.** At such time as the Beneficiary may elect, but in any event on or before the last day of the calendar year which next follows the calendar year of the Participant's death. (N/A if participant is restricted)

c. **As Beneficiary elects.** At such time as the Beneficiary may elect, consistent with Section 4.03. (N/A if participant is restricted)

d. **Describe:** _____

[Note: The Employer under Election 19d. may describe an alternative distribution timing or afford the Beneficiary an election which is narrower than that permitted under Election 19c., or include special provisions related to certain beneficiaries, (e.g., a surviving spouse). However, any election under Election 19d. must require distribution to commence no later than the Section 4.03 required date.]

20. **DISTRIBUTIONS PRIOR TO SEVERANCE FROM EMPLOYMENT (4.05).** A Participant prior to Severance from Employment may elect to receive a distribution of his/her Vested Account under the following distribution options (Choose one of a. or b.):

a. **None.** A Participant may not receive a distribution prior to Severance from Employment.

b. **Distributions.** Prior to Severance from Employment are permitted as follows (Choose one or more of 1. through 4.):

1. **Unforeseeable emergency.** A Participant may elect a distribution from his/her Account in accordance with Plan Section 4.05(A) (for the Participant, spouse, dependents or beneficiaries)

2. **De minimis exception.** [Plan Section 4.05(B)] If the Participant: (i) has an Account that does not exceed \$7,000; (ii) has not made or received an allocation of any Deferral Contributions under the Plan during the two-year period ending on the date of distribution; and (iii) has not received a prior Plan distribution under this de minimis exception, then (Choose one of a., b. or c.):

a. **Participant election.** The Participant may elect to receive all or any portion of his/her Account.

b. **Mandatory distribution.** The Plan Administrator will distribute the Participant's entire Account.

c. **Hybrid.** The Plan Administrator will distribute a Participant's Account that does not exceed \$_____ and the Participant may elect to receive all or any portion of his/her Account that exceeds \$_____ but that does not exceed \$7,000.

3. **Age.** A Participant who attains age _____ (Enter age not less than 59 1/2 and not greater than 73) may elect distribution of any or all of his/her Account. The Plan can operationally permit distributions as early as January 1 of the calendar year the Participant attains such age.
4. **Specify:** _____

[Note: An Employer need not permit any in-service distributions. Any election must comply with the distribution restrictions of Code Section 457(d).]

21. **QDRO (4.06).** The QDRO provisions (Choose one of a., b. or c.):

- a. **Apply.**
- b. **Do not apply.**
- c. **Specify:** _____

22. **ALLOCATION OF EARNINGS (5.07(B)).** The Plan allocates Earnings using the following method (Choose one or more of a. through f.):

- a. **Daily.** See Section 5.07(B)(4)(a).
- b. **Balance forward.** See Section 5.07(B)(4)(b).
- c. **Balance forward with adjustment.** See Section 5.07(B)(4)(c). Allocate pursuant to the balance forward method, except treat as part of the relevant Account at the beginning of the Valuation Period _____ % of the contributions made during the following Valuation Period: _____
- d. **Weighted average.** See Section 5.07(B)(4)(d). If not a monthly weighting period, the weighting period is _____
- e. **Directed Account method.** See Section 5.07(B)(4)(e).
- f. **Describe Earnings allocation method:** _____

[Note: The Employer under Election 22f. may describe Earnings allocation methods from the elections available under Election 22 and/or a combination thereof as to any: (i) Participant group (e.g., Daily applies to Division A Employees OR to Employees hired after "x" date. Balance forward applies to Division B Employees OR to Employees hired on/before "x" date.); (ii) Contribution Type (e.g., Daily applies as to Discretionary Nonelective Contribution Accounts. Participant-Directed Account applies to Fixed Nonelective Contribution Accounts); (iii) investment type, investment vendor or Account type (e.g., Balance forward applies to investments placed with vendor A and Participant-Directed Account applies to investments placed with vendor B OR Daily applies to Participant-Directed Accounts and balance forward applies to pooled Accounts).]

23. **HEART ACT PROVISIONS (1.31(C)(3)/3.13).** The Employer elects to (Choose one of a. or b. and c. or d.):

Continued Benefit Accruals.

- a. **Not apply the benefit accrual provisions of Section 3.13.**
- b. **Apply the benefit accrual provisions of Section 3.13.**

Distributions for deemed severance of employment (1.31(C)(3))

- c. **The Plan does NOT permit distributions for deemed severance of employment.**
- d. **The Plan Administrator may by policy permit distributions for deemed severance of employment.**

24. **VESTING/SUBSTANTIAL RISK OF FORFEITURE (5.11).** A Participant's Deferral Contributions are [Note: If a Participant incurs a Severance from Employment before the specified events or conditions, the Plan will forfeit the Participant's non-vested Account. Caution: if a Deferral is subject to vesting schedule or other substantial risk of forfeiture, it does not count as a deferral for purposes of the annual deferral limit until the year it is fully vested.] (Choose all that apply of a. through d.):

- a. **100% Vested/No Risk of Forfeiture.** Immediately Vested without regard to additional Service and no Substantial Risk of Forfeiture. The following contributions are 100% Vested:
1. **All Contributions.** (skip to 25.)
 2. **Only the following contributions.** (select all that apply):
 - a. **Salary Reduction Contributions.**
 - b. **Nonelective Contributions.**
 - c. **Matching Contributions.**
- b. **Forfeiture under Vesting Schedule.** Vested according to the following:
- Contributions affected.** The following contributions are subject to the vesting schedule (Choose one or more of 1., 2. or 3.):
1. **Salary Reduction Contributions.**

- 2. Nonelective Contributions.
- 3. Matching Contributions.

Vesting Schedule:

- 4. Vesting Schedule.

Years of Service	Vested Percentage
_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %
_____	_____ %

For vesting purposes, a "Year of Service" means:

- 5. _____

[Note: It is extremely rare to apply a vesting schedule to Salary Reduction Contributions.]

- c. **Substantial Risk of Forfeiture.** Vested only when no longer subject to the following Substantial Risk of Forfeiture as follows:

Contributions affected. The following contributions are subject to the substantial risk of forfeiture under c. (Choose one or more of 1., 2. or 3.):

- 1. Salary Reduction Contributions.
- 2. Nonelective Contributions.
- 3. Matching Contributions.

Risk Provisions: Vested only when no longer subject to the following Substantial Risk of Forfeiture as follows (Choose one of 4. or 5.):

- 4. The Participant must remain employed by the Employer until _____, unless earlier Severance from Employment occurs on account of death or disability, as the Plan Administrator shall establish.
- 5. Specify: _____

Additional Provisions (Choose d. if applicable)

- d. Specify: _____

FORFEITURE ALLOCATION. [Plan Sections 5.11(A) and 5.14] The Plan Administrator will allocate any Plan forfeitures as selected below. The Employer has the option to use forfeitures to pay plan expenses first and then allocate the remaining forfeitures in accordance with the selections below: (Choose one of the following):

- e. **Additional Contributions.** As the following contribution type (Choose one of 1. or 2.):
 - 1. **Nonelective.** As an additional Nonelective Contribution.
 - 2. **Matching.** As an additional Matching Contribution.
- f. **Reduce Fixed Contributions.** To reduce the following fixed contribution (Choose one of 1. or 2.):
 - 1. **Nonelective.** To reduce the Employer's fixed Nonelective Contribution.
 - 2. **Matching.** To reduce the Employer's fixed Matching Contribution.
- g. Specify: _____

25. **TRUST PROVISIONS.** The following provisions apply to Article VIII of the Plan (Choose as applicable; leave blank if not applicable):

- a. **Modifications.** The Employer modifies the Article VIII Trust provisions as follows: _____. The remaining Article VIII provisions apply.
- b. **Substitution.** The Employer replaces the Trust with the Trust Agreement attached to the Plan.

26. **CUSTODIAL ACCOUNT/ANNUITY CONTRACT (8.16).** Instead of holding all of the Deferred Compensation in the Trust established in Article VIII, the Employer will hold all or part of the Deferred Compensation in one or more custodial accounts or annuity contracts which satisfy the requirements of Code §457(g) if (a.) is selected.

- a. **Custodial account(s) or annuity contract(s).**
- b. **Specify (Optional):** _____

[Note: The Employer under b. may wish to identify the custodial accounts or annuity contracts or to designate a portion of the Deferred Compensation to be held in such vehicles versus held in the Trust.]

27. **VALUATION.** In addition to the last day of the Plan Year, the Trustee (or Plan Administrator as applicable) must value the Trust Fund (or Accounts) on the following Valuation Date(s) (Choose one of a. or b.):

- a. **No additional Valuation Dates.**
- b. **Additional Valuation Dates.** (Choose one or more of 1., 2. or 3.):
 - 1. **Daily Valuation Dates.** Each business day of the Plan Year on which Plan assets for which there is an established market are valued and the Trustee or Employer is conducting business.
 - 2. **Last day of a specified period.** The last day of each _____ of the Plan Year.
 - 3. **Specified Valuation Dates:** _____

[Note: The Employer under Election 26b.3. may describe Valuation Dates from the elections available under Election 26b. and/or a combination thereof as to any: (i) Participant group (e.g., No additional Valuation Dates apply to Division A Employees OR to Employees hired after "x" date. Daily Valuation Dates apply to Division B Employees OR to Employees hired on/before "x" date.); (ii) Contribution Type (e.g., No additional Valuation Dates apply as to Discretionary Nonelective Contribution Accounts. The last day of each Plan Year quarter applies to Fixed Nonelective Contribution Accounts); (iii) investment type, investment vendor or Account type (e.g., No additional Valuation Dates apply to investments placed with vendor A and Daily Valuation Dates apply to investments placed with vendor B OR Daily Valuation Dates apply to Participant-Directed Accounts and no additional Valuation Dates apply to pooled Accounts).]

28. **TRUSTEE** (Select all that apply; leave blank if not applicable.):

- a. Individual Trustee(s) who serve as Trustee(s) over assets not subject to control by a corporate Trustee. (Add additional Trustees as necessary.)

Name(s)	Title(s)
<u>Ben John Murphy</u>	<u>Trustee</u>
<u>Jeff Merritt</u>	<u>Trustee</u>
_____	_____
_____	_____

Address and Telephone number (Choose one of 1. or 2.):

- 1. Use Employer address and telephone number.
- 2. Use address and telephone number below:

Address: _____
Street

City State Zip

Telephone: _____

- b. Corporate Trustee

Name: _____

Address: _____
Street

City State Zip

Telephone: _____

AND, the Corporate Trustee shall serve as:

- c. a Directed (nondiscretionary) Trustee over all Plan assets except for the following:

- d. a Discretionary Trustee over all Plan assets except for the following:

29. **PLAN LOANS (5.02(A)).** The Plan permits or does not permit Participant Loans (Choose one of a. or b.):

- a. Does not permit.
- b. Permitted pursuant to the Loan Policy.

30. **ROLLOVER CONTRIBUTIONS (3.09).** The Rollover Contributions under Election 5.d. are made as follows, subject to any additional limitations which may be provided by policy pursuant to Plan Section 3.09(A):

Who may roll over (Choose one of a. or b.):

- a. Participants only.
- b. Eligible Employees or Participants.

Sources/Types. The Plan will accept a Rollover Contribution (Choose one of c. or d.):

- c. All. From any Eligible Retirement Plan and as to all Contribution Types eligible to be rolled into this Plan.
- d. Limited. Only from the following types of Eligible Retirement Plans and/or as to the following Contribution Types:

Distribution of Rollover Contributions (Choose one of e., f. or g.):

- e. Distribution without restrictions. May elect distribution of his/her Rollover Contributions Account in accordance with Plan Section 4.05(C) at any time.
- f. No distribution. May not elect to receive distribution of his/her Rollover Contributions Account until the Plan has a distributable event under Plan Section 4.01.
- g. Specify: _____

31. **AUTOMATIC DEFERRAL PROVISIONS (3.02(B), 3.14).** (Leave blank if 15a. is selected.)

Participants subject to the Automatic Deferral Provisions. The Automatic Deferral Provisions apply to Employees who become Participants after the Effective Date of Automatic Deferrals (except as provided in d. below). Employees who became Participants prior to such Effective Date are subject to the following (a. – d. are optional):

- a. All Participants. All Participants, regardless of any prior Salary Reduction Agreement, unless and until a Participant makes an Affirmative Election after the Effective Date of Automatic Deferrals.
- b. Election of at least Automatic Deferral amount. All Participants, except those who, on the Effective Date of Automatic Deferrals, are deferring an amount which is at least equal to the Automatic Deferral Percentage.
- c. No existing Salary Reduction Agreement. All Participants, except those who have in effect a Salary Reduction Agreement on the effective date of Automatic Deferrals regardless of the Salary Reduction Contribution amount under the Agreement.
- d. Describe: _____

Automatic Deferral Percentage. Unless a Participant makes an Affirmative Election, the Employer will withhold the following Automatic Deferral Percentage (select e. or f.):

- e. Constant. The Employer will withhold _____% of Compensation each payroll period.

Escalation of deferral percentage (select one or leave blank if not applicable)

- 1. Scheduled increases. This initial percentage will increase by _____% of Compensation per year up to a maximum of _____% of Compensation.
- 2. Other (described Automatic Deferral Percentage): _____

Automatic Deferral Optional Election

- f. Optional election (leave blank if not applicable)

Suspended Salary Reduction Contributions. If a Participant's Salary Reduction Contributions are suspended pursuant to a provision of the Plan (e.g., distribution due to military leave covered by the HEART Act), then a Participant's Affirmative Election will expire on the date the period of suspension begins unless otherwise elected below.

- 1. A Participant's Affirmative Election will resume after the suspension period.

32. In-Plan Roth Rollover Contributions from otherwise distributable amounts (IRR)

- a. Yes, allowed.

Effective Date (enter date)

- 1. IRR Effective Date: _____

33. In-Plan Roth Rollover Contributions from otherwise nondistributable amounts (IRT)

- a. Yes, allowed.

Effective Date (enter date)

- 1. IRT Effective Date: _____

34. Is spousal consent required for non-spouse beneficiary designations by married participants (6.01(A))?

a. Yes.

b. No.

This Plan is executed on the date(s) specified below:

Use of Adoption Agreement. Failure to complete properly the elections in this Adoption Agreement may result in disqualification of the Employer's Plan. The Employer only may use this Adoption Agreement only in conjunction with the corresponding basic plan document.

EMPLOYER: Missoula Rural Fire District

By: 

Ben John Murphy


TRUSTEE

Jeff Merritt


TRUSTEE

11/14/25

DATE SIGNED

11/12/25

DATE SIGNED

11-17-25

DATE SIGNED