

AGENDA
FINANCE COMMITTEE
OCTOBER 9, 2013

- I. Committee meeting called to order by Chairman.
- II. Motion to approve minutes of prior Committee meeting.
- III. **Action Agenda**
 - 1) Request for Transfer of Funds attached for Committee approval.
 - 2) **Request from the County Treasurer:**
None.
 - 3) **Referral from the Economic Growth & Development Committee:**
Planning & Community Development -
Request to amend the 2013 County Budget to increase estimated revenues and appropriations in the amount of \$33,374 to reflect the costs associated with reclassifying the Housing Cost Coordinator position from part-time to full-time, as per Resolution No. 22 of 2013.
 - 4) **Referral from the Gaslight Ad Hoc Committee:**
Jeffery Tennyson, Superintendent of Public Works, to provide update on bids for Charles R. Wood Park construction.
 - 5) **Referral from the Human Services Committee:**
Employment & Training Administration -
Request to amend the 2013 County Budget to increase estimated revenues and appropriations in the amount of \$4,420 to reflect the receipt of reimbursements received through the Trade Adjustment Act funding for the training of 12 dislocated workers.
 - 6) **Referrals from the Public Works Committee:**
DPW -
 - A) Request to increase Capital Project No. H.250 9550 280, *Highway Equipment Storage Building Roof*, in the amount of \$236.41 with the source of funding to be a transfer from Budget Code D.9950 910.
 - B) Request to close Capital Project No. H.250 9550 280, *Highway Equipment Storage Building Roof*.
 - 7) **Requests from the County Administrator/Items to be discussed:**
 - A) Request for an appropriation from the General Fund Surplus to the Sheriff's Budget in the amount of \$92,425 for overtime costs commensurate with SEA contract increases.
 - B) Request for a Contingent Fund transfer in the amount of \$118,667 to the Sheriff's Budget for overtime costs commensurate with SEA contract increases.
 - C) Request to authorize submission of a grant application to the New York State Office of Indigent Legal Services for grant funding in an amount not to exceed \$300,000 to improve the quality of services and reduce caseload for attorneys.
 - D) Request for an appropriation from the Computer Reserve to Departmental budgets in the amount of \$1,068 to purchase computers and related equipment and software.
 - E) Discussion regarding a power easement for the Schermerhorn t-hangars.
 - 8) Finance Committee action is required on the following items as approved by the Personnel Committee: Item Nos. 2 and 5.
- IV. **Pending Items**
 - 1) Accepting credit payments County-wide pending review of State contract and other vendors. County treasurer to provide an update at the next Committee meeting (06.13.13).

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

DEPARTMENT NAME: Clerk - Legislative Board

SIGNED: 

DATE: October 3, 2013

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1040 410	Clerk-Legislative Board- Supplies	A.1010 410	Legislative Board Supplies	\$1,000.00

Please state reason for transfers requested: To cover costs of office supplies for remainder of 2013

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Account- Other Payments/Contributions			

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

DEPARTMENT NAME: County Clerk

SIGNED:

DATE: 10/2/2013

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
✓A. 1410 130	Part-Time Salaries	✓A 1410 120	Overtime.	\$ 1000
✓A. 1665 130	Part Time Salaries	✓A. 1665 120	Overtime	\$ 100
A. 1410 130	general. County Clerk - Salaries - part time	A. 1410 120	general. County Clerk - Salaries overtime	
A. 1665 130	general. Public Records - Salaries - parttime	A. 1665 120	general. County Clerk - Salary Salaries overtime	

Please state reason for transfers requested: To balance account due to excessive work in Pistol Permit Unit (NYSAFE Act), and to balance A 1665 120 account.

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
✓ A.1990 469	general. Contingent Account- Other Payments/Contributions			

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

DEPARTMENT NAME: COUNTRYSIDE ADULT HOME

SIGNED:

DATE: 9/25/2013

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.6030.434	ALLOWANCES	A.6030.130	PART TIME SALARIES	\$30,000.00

general. countryside adult home → → *general. countryside adult home.*

Please state reason for transfers requested: REQUEST TO TRANSFER FUNDS FROM ALLOWANCES TO PART TIME SALARIES TO COVER THE COST OF PER DIEM AND PART TIME SALARIES FOR THE REMAINDER OF THE YEAR.

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
✓ A.1990 469	<i>general</i> Contingent Account- Other Payments/Contributions			

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

SIGNED: *Patricia [Signature]*

DATE: 10/3/13

	<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
1.	A.4054.444	Preschool -Education Expense	A.4054.810	Preschool-Retirement Expense	\$1,750.00
		<i>general. Ed/Physically Hand. Children - Travel/Education/Conference</i>			

Total Transfers **\$1,750.00**

1. To transfer funds to cover increase in Retirement Expense for Preschool Program

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Fund			

Please state reason for transfer request:

Total

Please file original request with Clerk of the Board and retain copy for your records

general. Contingent account. other payments/Contributions

10

REQUEST FOR TRANSFER OF FUNDS

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

FROM: PUBLIC WORKS

Name of Department

SIGNED: _____ DATE: 9/25/2013

FROM CODE	TITLE	TO CODE	TITLE	AMOUNT
✓D5112 8187 280	County Road, Cameron Road Projects. <i>County roads, CR#67</i>	D5112 8182 280	County Road, East River Drive Projects	\$15,000.00
✓D5112 8187 280	County Road, Cameron Road Projects	D5112 8186 280	County Road, Stone Schoolhouse Projects	\$2,500.00
✓D5112 8187 280	County Road, Cameron Road Projects	D5112 8190 280	County Road, Bay Road Projects	\$3,000.00
✓D5112 8187 280	County Road, Cameron Road Projects	D5112 8181 280	County Road, Bloody Pond Rd. Projects	\$14,000.00
✓D5112 8183 280	County Road, Trout Lake Rd. Projects	D5112 8191 280	County Road, Landon Hill Road Projects	\$20,000.00

County Road, County Roads, CR#48 Trout Lake Road, projects

Please state reason for transfers requested:

To transfer Funds from Completed Projects to Projects Req

D5112 8187 280 ✓
 County Road, County Roads.
 CR#67 Cameron Road.
 projects
 FIRST 4 codes

INGENT FUND TRANSFER

TO CODE

D5112 8182 280
 County Road, County Roads. CR#16
 East River Drive. Projects
 D5112 8186 280
 County Road, County Roads. CR#71
 Stone Schoolhouse. projects
 D5112 8190 280
 County Road, County Roads. CR#7
 Bay Road. projects
 D5112 8181 280
 County Road, County Roads. CR#59
 Bloody Pond Road. projects
 D5112 8191 280
 County Road, County Roads. CR#
 68
 Landon Hill Road. Projects

request:

Please file original request with Clerk of the Board and retain copy for your

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

DEPARTMENT NAME: Department of Public Works

SIGNED:

DATE: 09.30.2013

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
D.5110 413	County Road, Maintenance of Roads, Repair & Maint-Bldg/Property	D.9950 910	County Road, Transfers-Capital Projects, Interfund Transfers	\$236.41

Please state reason for transfers requested:

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Account- Other Payments/Contributions			

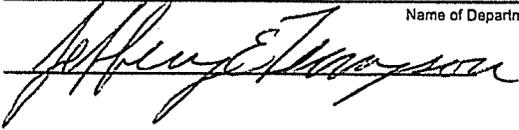
Please state reason for transfer request:

Please file original request with Clerk of the Board and retain copy for your records.

REQUEST FOR TRANSFER OF FUNDS

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

FROM: PUBLIC WORKS

SIGNED:  Name of Department DATE: 8/30/2013

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
DM.5130 439	Road Machinery Misc. Fees & Expense	A.1628 439	Waste Management Containment, Misc Fees & Expense	\$ 5,000.00
DM.5130 422	Road Machinery Repair & Maintenance Equipment	A.1628 422	Waste Management Containment, Repair & Maintenance Equipment	\$ 5,000.00

To transfer amounts budgeted under Road Machinery for Waste Management to the New Division Waste Management Containment.

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
------------------	--------------	----------------	--------------	---------------

Please state reason for transfer request:

Please file original request with Clerk of the Board and retain copy for your records.

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

DEPARTMENT NAME: Social Services

SIGNED: *Suzanne Wheeler*

DATE: 9/24/13

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.6010 110	Salaries - Regular <i>general. social services</i>	A.6010 862	EPO Co-Pay <i>general. social services</i>	\$10,000.00

Please state reason for transfers requested: To cover EPO co-pays through 12/31/13.

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	<i>general.</i> Contingent Account- Other Payments/Contributions			

Please state reason for transfer request:

Please file original request with Clerk of the Board and retain copy for your records.

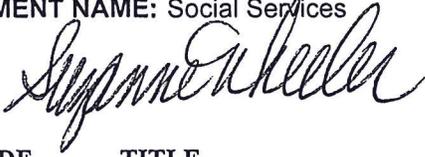
RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

DEPARTMENT NAME: Social Services

SIGNED:



DATE: 9/24/13

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
✓ A.6010 110	Salaries - Regular	✓ A.6010 130	Salaries - Part Time	\$25,000.00
<i>general. Social Services.</i>		<i>general. Social Services</i>		

Please state reason for transfers requested: To cover the wage of our temporary Heap positions which start on 10/1/13.

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
✓ A.1990 469	<i>general.</i> Contingent Account- Other Payments/Contributions			

Please state reason for transfer request:

Please file original request with Clerk of the Board and retain copy for your records.

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

FROM: WESTMOUNT HEALTH FACILITY
Name of Department

SIGNED: _____

DATE: October 3, 2013

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
✓EF.82400.700 140	Westmount, Housekeeping Service, HK , Salaries – Sick Leave Incentive	✓EF.82400.700 120	Westmount, Housekeeping Service, HK , Salaries – Over time	800.00
✓EF.82100.700 140	FSH HK LL maintenance Westmount, Dietary Service, FSH Salaries – Sick Leave Incentive	✓EF.82100.700 130	FSH HK LL maintenance Westmount, Dietary Service, FSH Salaries – Part time	1,600.00
✓EF.82200.700 140	FSH HK LL maintenance Westmount, Plant Operations & Maint Maintenance, Salaries – Sick Leave Incentive	✓EF.82100.700 130	Westmount, Dietary Service, FSH Salaries – Part time	400.00
✓EF.83110.100 140	FSH HK LL maintenance Westmount, Fiscal Service, Management & Supervisor, Salaries – Sick Leave Incentive	✓EF.82100.700 130	Westmount, Dietary Service, FSH Salaries – Part time	400.00
✓EF.82500.700 140	FSH HK LL maintenance Westmount, Laundry & Linen Service, LL , Salaries – Sick Leave Incentive	✓EF.82100.700 130	Westmount, Dietary Service, FSH Salaries – Part time	800.00
✓EF.60200.500 140	Westmount, Nursing – Nurses' Station, Aides, Salaries – Sick Leave Incentive	✓EF.60200.500 120	Westmount, Nursing-Nurses' Station, Aides, Salaries – Over Time	1,200.00
✓EF.83110.600 130	orderlies, assistants - office Westmount, Fiscal Service, Clerical & Other , Wages, Salaries – Part time	✓EF.82100.700 130	Westmount, Dietary Service, FSH Salaries – Part time	127.00
✓EF.73300.500 110	admin Westmount, Physical Therapy, Aides Salaries – Regular	✓EF.73300.500 120	orderlies, assistants Westmount, Physical Therapy, Aides Salaries – Over Time	35.00
✓EF.60200.500 110	Westmount, Nursing – Nurses' Station, Aides, Salaries – Regular	✓EF.60200.500 120	Westmount, Nursing-Nurses' Station Aides, Salaries – Over Time	20,000.00
✓EF.60200.500 110	orderlies, assistants Westmount, Nursing – Nurses' Station, Aides, Salaries – Regular	EF.60200.400 120	orderlies, assistants Westmount, Nursing-Nurses' Station LPN, Salaries – Over Time	20,000.00
	orderlies, assistants		§ Activities Directors wages	

Please state reason for transfers requested: Budget Transfers

RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

**If this is the result of a grant award, also complete and submit Form No. 5 or 6*

DEPARTMENT NAME: Planning and Community Development

DATE: 30 September 2013

(a) Purpose of Amendment:

Increase salary and fringe amounts to reflect staffing changes from Resolution 22 of 2013

(b) Appropriation Code, Object Code, Full Title and Amount:

See below

Sample: A.1010 470 Legislative Board – Contract

(c) Revenue Code (with title), and Amount:

A8021.1289 \$33,374

Sample: A. 6417.2654 Tourism Occupancy – Minor Sales – Tourism

*Please note all amount must be in whole dollars – no cents.

(b) Appropriation codes:

A8021 110 Salaries	\$18,227
A8021 810 Retirement	\$5,403
A8021 830 Social security	\$3,060
A8021 831 Medicare	\$713
A8021 860 Hospitalization	\$5,861
A8021 865 Dental	\$110

RESOLUTION No. 22 OF 2013

PAGE 2 OF 2

TOURISM

Create Position:

A.6417.130 Dept. No. 53.03

TITLE:

Clerk (Part-Time)

EFFECTIVE DATE

January 2, 2013

BASE
SALARY

\$11,853
(Grade 2)

**PLANNING &
COMMUNITY
DEVELOPMENT**

Increasing Hours From:

A.8021.110 Dept. No. 62.00

TITLE:

Construction Cost Coordinator
32 hours per week

EFFECTIVE DATE

January 7, 2013

BASE
SALARY

\$37,642

**PLANNING &
COMMUNITY
DEVELOPMENT**

Increasing Hours To:

A.8021.110 Dept. No. 62.00

TITLE:

Construction Cost Coordinator
40 hours per week

EFFECTIVE DATE

January 7, 2013

BASE
SALARY

\$47,053

and be it further resolved, that the actions taken by the Personnel Committee with regard to filling the DPW Laborer #47 and #48 positions and the Tourism Clerk (Part-Time) position prior to creation, are hereby ratified.

RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

**If this is the result of a grant award, also complete and submit Form No. 5 or 6*

DEPARTMENT NAME: Employment and Training

DATE: October 3, 2013

(a) Purpose of Amendment: add federal funds to county budget to reimburse training for 12 dislocated workers through the Trade Adjustment Act

(b) Appropriation Code (with title), Object Code (with title) and Amount:
40.6293.0305 433 - WIA Dislocated Worker (Training-Client) \$4,420.

*Workforce Investment Act. WIA. Workforce Invest~~ment~~ - Dislocated Worker
Training Client*

(c) Revenue Code (with title), and Amount: 40.6293.0305 4791- WIA Dislocated Worker - \$4,420.

*Workforce Invest Act. WIA. Workforce Invest - Dislocat Worker
Workforce Invest - STDA*

RESOLUTION REQUEST FORM NO. 9

Request to Increase or Decrease or Amend Existing Capital Project or Capital Reserve Project*

**If this is the result of a grant award, also complete and submit Form No. 5 or 6*

DEPARTMENT NAME: DPW

DATE: 10/1/13

(a) Exact Title and Number of Project*: H250 9550 280 Highway Equipment Storage Building Roof

(b) Is this a Capital Project? Yes

(c) Is this a Capital Reserve Project? No

(d) Amount of Increase (if applicable): \$236.41

(e) Amount of Decrease (if applicable): NA

(f) Source of Funding (if Increase) (including name & title of codes, etc.):

~~D.5110.413 - Repair and Maintenance of building property~~
D.9950 910 - County Road, Transfers - Capital Projects, Interfund Transfer.

(g) Changes in Funding (if Amendment):

(h) Purpose of Increase or Decrease or Amendment: Make project whole to close the project.

6

RESOLUTION REQUEST FORM NO. 20

MISCELLANEOUS

**Please List All Other Requests Not Covered by Previous Resolution Request Forms Here.
Please attach any backup information available and be as detailed as possible.*

DEPARTMENT NAME: DPW

DATE: 10-1-13

- (a) Purpose of Request: To authorize the closure of the following Capital Project H250 Highway Equipment Storage Building Roof

- (b) Details: Funds in the amount of \$236.41 will need to be transferred into Project to make the project whole. Funds will be transferred into the project from D 5110.413 Repair and Maintenance of building property (Estimated - Final Numbers to be verified by Treasurer)

- (c) Previous Resolution Number:

RESOLUTION REQUEST FORM NO. 20

MISCELLANEOUS

****Please List All Other Requests Not Covered by Previous Resolution Request Forms Here.
Please attach any backup information available and be as detailed as possible.***

DEPARTMENT NAME: Office of the County Administrator

DATE: 10/9/2013

(a) Purpose of Request: Request for additional appropriations for Sheriff's budget for overtime line to be transferred from General Fund Surplus in the amount of \$92,425.

(b) Details: To transfer from General Fund Surplus the amount equal to SEA contract increases and retro to codes:

A.3150 120 Sheriff Corrections Overtime	\$49,333
A.3150 810 Sheriff Corrections Retirement	\$30,240
A.3150 830 Sheriff Corrections Social Security	\$10,416
A.3150 831 Sheriff Corrections Medicare	\$ 2,436

(c) Previous Resolution Number: N?A

(d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title* and Amount: General Fund Surplus

Sample: A.8021 470 Planning & Community Development – Contract

* as listed in budget and LOGOS

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

DEPARTMENT NAME: Office of the County Administrator

SIGNED: 

DATE: 10/9/2013

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
------------------	--------------	----------------	--------------	---------------

Please state reason for transfers requested:

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Account- Other Payments/Contributions	A.3150 120	Corrections Overtime Sheriff's Correction Division, Salaries - Overtime	118,667.00

Please state reason for transfer request: Sheriff's budget additional appropriations for overtime line \$118,667 to be transferred from contingency plus \$92,425.00 from General Fund Surplus (Amount equal to SEA contract increases and retro).

RESOLUTION REQUEST FORM NO. 5

Request to Apply for a Grant Application and Grant Agreement

DEPARTMENT NAME: Office of the County Administrator

DATE: 10/9/2013

- (a) Purpose of Grant: To improve the quality of services and reduce caseload for attorneys.

- (b) Name of Grantor: NYS Office of Indigent Legal Services

- (c) Address of Contractor: State Capitol Room 128, Albany, NY

- (d) Grantor's Contact Person and Telephone Number: Karen Jackuback, Grants Manager (518)486-5747

- (e) Has or Will the Grant Application or Grant Agreement be provided, if so, Please Attach? No

- (f) Effective Date of Grant: February 1, 2014

- (g) Termination Date of Grant: January 31, 2017

- (h) Total Dollar Amount Involved (not to exceed): \$300,000

- (i) Deadline to Submit Grant Application and/or Grant Agreement: October 18, 2013

- (j) Is a Budget amendment required? Yes, will be submitted at a later date. If yes, also complete and submit Form No. 7.

- (k) Are the funds to go into a Capital Project or Capital Reserve Project? No If yes, also complete and submit Form No. 8 or Form No. 9, as applicable.

- (i) Is a Local Share Required? No. If Yes, Where are the Funds? List Budget Code, Object Code, Full Title* and Amount **OR** Capital Project **OR** Capital Reserve Project Number and Title and Amount:

Sample: A.1010 470 Legislative Board – Contract \$xx.xx

Capital Project No. H289.9550 480 – Old Jail Renovations \$xx.xx

RESOLUTION REQUEST FORM NO. 20

MISCELLANEOUS

****Please List All Other Requests Not Covered by Previous Resolution Request Forms Here.
Please attach any backup information available and be as detailed as possible.***

DEPARTMENT NAME: Office of the County Administrator

DATE: 10/9/2013

- (a) Purpose of Request: To appropriate funds from the Computer Reserve Fund to departmental budgets to purchase computers and related equipment and software.
- (b) Details: To appropriate funds in the amount of \$1,068.00 from the Computer Reserve (A.895.00) to codes:
A.4010 220.1 Health Services Office Equipment Reserve \$1,068.00
- (c) Previous Resolution Number: N/A
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title* and Amount: A.895.00 Computer Reserve Fund.

Sample: A.8021 470 Planning & Community Development – Contract

* as listed in budget and LOGOS