

**AGENDA
FINANCE COMMITTEE
NOVEMBER 6, 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:**

Request for a new contract with Hay Group, Inc. for actuarial services for the term commencing January 1, 2014 and terminating December 31, 2016.
 - 3) **Request from the Civil Service Office:**

Request for a Contingent Fund transfer in the amount of \$5,523 for Novatime contract maintenance costs that were not included in the 2013 Budget.
 - 4) **Referral from the Community College Committee:**
 - A) Request to authorize a resolution of intent to support the SUNY Adirondack Capital Improvement Plan for 2013 in the amount of \$1,831,105 with the source of funding to be 50% State funding and the remaining 50% from accumulated chargebacks.
 - B) Request for a letter of support for the NSTEM Initiative.
 - 5) **Referral from the County Facilities Committee:**

Airport -

 - A) Request to close Capital Project No. H244.9550 280, *Airport Obstruction Removal*, and return the remaining balance of approximately \$15,000 to the County Budget.
 - B) Request to amend the County Budget to increase estimated revenues and appropriations in the amount of \$15,000 to allocate funds remaining in the aforementioned Capital Project No. H244.9550 280, *Airport Obstruction Removal*.
 - C) Request to increase Capital Project No. H335.9550 280, *Runway 1 End Obstruction Removal*, in the amount of \$1,150,000 with the source of funding to be 90% FAA grant funding (\$1,035,000), 5% State funding (\$57,500) and 5% Local (\$57,500). The 5% Local Share is to be funded from Budget Codes A.892.00, *Reserve, Airport Repair and Projects*, (\$42,500) and A.9950 910, *Transfers, Capital Projects, Interfund Transfers*, (\$15,000).
 - D) Request to establish Capital Project No. H346.9550 280, *Environmental Assessment Off Airport Obstruction Removal and Miscellaneous Airport Improvements*, in the amount of \$231,794, with the source of funding to be 90% FAA grant funding (\$208,615), 5% State funding (\$11,590) and 5% Local (\$11,590). The 5% Local Share is to be funded from Budget Code A892.00, *Reserve, Airport Repair & Projects*.
 - 6) **Referral from the Criminal Justice Committee:**

District Attorney -

Request to renew contract with Robert Lanthrop for the "Alive at 25" program for the term commencing January 1, 2014 and terminating December 31, 2014 at no cost to Warren County.
 - 7) **Referrals from the Health Services Committee:**

Westmount Health Facility -

 - A) Request to amend the County Budget to increase estimated revenues and appropriations in the amount of \$67,800 to reflect increases in Medicare Therapy revenues.
 - B) Request to amend the County Budget to increase estimated revenues and appropriations in the amount of \$57,000 to reflect increases in Medicare Part A revenues.

*FINANCE COMMITTEE AGENDA
NOVEMBER 6, 2013*

8) **Request from the Office of Community Services:**
Mental Health -

Request to amend the County Budget to increase estimated revenues and appropriations in the amount of \$18,579 to reflect the receipt of State Aid funding.

9) **Referral from the Park O&M Committee:**

Request to amend the County Budget to increase estimated revenues and appropriations in the amount of \$4,201.60 to appropriate funds from parking fees to reimburse the Village of Lake George for maintenance costs and parking services provided for 2013 events.

10) **Referrals from the Public Works Committee:**

DPW -

A) Request for a Contingent Fund transfer in the amount of \$12,399 for the purchase of a new plotter and software for the DPW Sign Shop in order to coordinate with the new computer equipment.

B) Request to decrease Capital Project No. H260.9550 280, *Alder Brook Rd Bridge*, in the amount of \$44,600.

Parks, Recreation & Railroad -

C) Request to amend the County Budget to increase estimated revenues and appropriations in the amount of \$2,730 in order to pay for GIS services acquired in connection with the updating of maps for the Railroad's Vegetative Management Plan.

11) **Referrals from the Support Services Committee:**

Board of Elections -

A) Request to rescind Resolution No. 195 of 1967 which established a petty cash fund for the Board of Elections.

Weights & Measures -

B) Request to increase the petty cash fund for the Weights & Measures Department from \$50.00 to \$100.00. This petty cash fund is used to purchase fuel samples for the Petroleum Sampling Program and has not been increased since 2004, regardless of the fact that fuel prices have risen significantly since that time. The State of New York provides reimbursements for expenditures associated with the Petroleum Sampling Program.

12) **Requests from the County Administrator:**

A) Request to appropriate funds totaling \$2,700 from the Computer Reserve Fund to the County Administrator and Civil Service departmental budgets for the purchase of computers and related equipment/software.

B) Request for a Contingent Fund transfer totaling \$8,200 to the District Attorney's Budget in order to appropriate funds for travel associated with the extradition of an inmate.

13) Finance Committee action is required on the following items as approved by the Personnel Committee: Item Nos. 2B-E.

IV. **Items for Discussion**

Mr. Merlino to address Committee with regard to present and future financial implications for budgets of small tax base towns in Warren County based on increasing expenses and diminishing revenues.

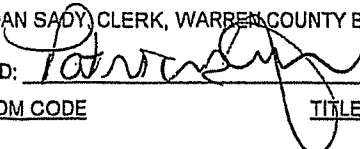
V. **Pending Items**

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

SIGNED: 

DATE: 10/25/13

	<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
1.	A.4010.110	Health Services- Full Time Salary Salaries-Regular	A.4010.120	Health Services- Overtime Salary Salaries-Overtime	\$5,000.00

Total Transfers **\$5,000.00**

1. To transfer funds to cover overtime salaries to year end.

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

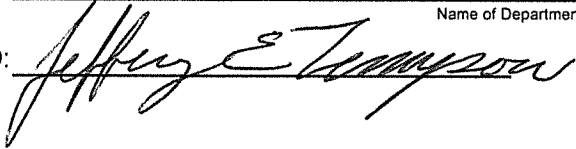
Please file original request with Clerk of the Board and retain copy for your records

REQUEST FOR TRANSFER OF FUNDS

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

FROM: PUBLIC WORKS

Name of Department

SIGNED:  DATE: 10/22/2013

FROM CODE	TITLE	TO CODE	TITLE	AMOUNT
A.7111 130	Up Yonda Farms Salaries -Part Time	A.7111 120	UpYonda Farm Salaries, Overtime	\$ 15.75

Please state reason for transfers requested:

To transfer Part Time salaries in Up Yonda Farms to Overtime salaries due to changes in staff.

CONTINGENT FUND TRANSFER REQUESTS

FROM CODE	TITLE	TO CODE	TITLE	AMOUNT
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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

22

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

FROM: PUBLIC WORKS
Name of Department

SIGNED: _____ DATE: 10/22/2013

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
D.5148 110	County Road\$ Services to other Governments Salaries- <i>Regular</i>	D.5148 120	County Road\$, Services to Other Governments, <i>Salaries-</i> Overtime	\$ 6,000.00
D.5148 110	County Road\$ Services to other Governments Salaries- <i>Regular</i>	D.5148 130	County Road\$, Services to Other Governments, <i>Salaries-</i> Part Time	\$ 300.00

Please state reason for transfers requested:

To reallocate salaries in Services to Other Governments.

DPW did not budget Overtime or Part time Salaries In Services to Other Governments. We did pay some overtime during the year and we did use some of our Part Time Employees paving for the towns, which has caused negative balances in these accounts. This will transfer some of the Regular Salary Budget to Over Time Salary and Part Time Salary Budgets to offset the negative balances. Note: These salaries are billed to the Towns.

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
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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: Office for the Aging

SIGNED:

DATE: 10.24.13

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A6789 470	EISEP ^{Hamilton} Ham-Cty. Contract	A6987 470	Title VII Elder Abuse Prev, Contract	\$ 1,347

Sample: A.4018.0020 110 Preventive Program – Family Health – Salaries – Regular \$xxx.xx

Please state reason for transfers requested: Adjustment to correct funding for Title VII/Ombudsmanager mandatory reporting system

*Please note: All amounts must be in whole dollars – no cents.

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.

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: 11/6/2013

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1680 110	Information ^{Technology} Tech -Salaries- <i>Regular</i>	A.1680 120	Information ^{Technology, Salaries} Tech Overtime	1,000.00
A.1680 110	Information ^{Technology} Tech -Salaries- <i>Regular</i>	A.1680 470	Information ^{Technology} Tech -Contract	6,000.00

Please state reason for transfers requested: To appropriate funds to overtime and contract to extend contract with Web developer.

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:

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

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

FROM: Nathan H. York Sheriff
Name of Department

SIGNED: DATE: December 10, 2012

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.3020 210	911 Center, Furniture	A.3110 250	L.E. Tech. Equip	\$4,000.00
A.3110 415	L.E. Electricity	A.3150 435	Correction-Medical Fees	\$65,000.00

Please state reason for transfers requested: *Sheriff's* *furnishings* *Sheriff's Law Enforcement, Technical Equipment*
Adjusting codes in the black. *Sheriff's Law Enforcement, Sheriff's Correction Division*

*Please note: All amounts must be in whole dollars – no cents. !! FORMTEXT ¶ 1

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: Keep code in black at end of year

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 25, 2013

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
EF.60200.300 110	Westmount, Nursing-Nurses' Stations, RN, Salaries - Regular <i>Registered Nurse Wages,</i>	EF.60200.300 120	Westmount, Nursing-Nurses' Stations, RN, Salaries - Over Time <i>Registered Nurse Wages,</i>	6,000.00
EF.72600.100 110	Westmount, Activities Program, Management & Supervision, Salaries - Regular	EF.72600.100 130	Westmount, Activities Program, Management & Supervisor, Salaries - Part Time	5,000.00

Please state reason for transfers requested: Budget adjustments.

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

RESOLUTION REQUEST FORM NO. 3

Request for New Contract

DEPARTMENT NAME: Treasurer

DATE: October 31, 2013

- (a) Is this a Result of a Bid or Request for Proposal? RFP - WC 59-13

- (b) Purpose of Contract: Actuarial Services

- (c) Name of Contractor: Hay Group, Inc.

- (d) Address of Contractor: 2310 Plaza Five, Jersey City, NJ 07311

- (e) Contractor's Contact Person and Telephone Number: Sanjit Puri - 703-841-3179

- (f) Has or will the Contract be provided, if so, please attach: Will be provided

- (g) Commencement Date of Contract: January 1, 2014

- (h) Termination Date of Contract: 12/31/2016 (we have 3 year renewal option to 12/31/2019)

- (i) Payment Provisions:
 - i) lump sum amount \$5,500 - 2014 actuarial analysis
\$0 - 2015 actuarial update
\$5,900 - 2016 actuarial analysis
3 year renewal \$0 - 2017 actuarial update
\$6,300 - 2018 actuarial analysis
\$0 - 2019 actuarial update
 - ii) hourly rate amount
 - iii) total amount not to exceed
 - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc. Upon completion

- (j) Where are the Funds for this Contract? List Budget Code, Object Code, Full Title* and Amount: **OR** Capital Project **OR** Capital Reserve Project Number, Title, and Amount: A.1325 470 Treasurer - Contract \$5,500

**WARREN COUNTY
TABULATION SHEET**

	NAME & ADDRESS	NAME & ADDRESS	NAME & ADDRESS
NO: WC 59-13 ITEM(S): RFP FOR ACTUARIAL SERVICES DATE: OCTOBER 17, 2013 TIME: 3:00 P.M.	Hay Group, Inc. Harborside Financial Center Attn: Sanjit Puri 2310 Plaza Five Jersey City, NJ 07311 Ph: 703-841-3179 Fax: 703-841-3108	Danziger & Markhoff Attn: Robert Danziger 123 Main St., 9 th Floor White Plains, NY 10601 Ph: 914-948-1556 Fax: 914-948-1706	Harbridge Consulting Group, LLC Attn: Steven Chase One Lincoln Center 12 th Floor Syracuse, NY 13202 Ph: 315-703-8986 Fax: 315-703-8989
DESCRIPTION OF ITEM	PRICE	PRICE	PRICE
INITIAL 3 YEAR CONTRACT:			
2014 Actuarial Services	\$5,500.00	\$5,900.00	\$10,000.00
2015 Actuarial Services	\$0 - C	\$1,500.00	\$2,100.00
2016 Actuarial Services	\$5,900.00	\$6,000.00	\$10,600.00
3 YEAR EXTENSION CONTRACT:			
2017 Actuarial Services	\$0 - C	\$1,500.00	\$2,200.00
2018 Actuarial Services	\$6,300.00	\$6,100.00	\$11,200.00
2019 Actuarial Services	\$0 - C	\$1,600.00	\$2,300.00
OTHER EXPENSES/FEES:			
Additional Services Hourly Fees by Staff Level			\$250.00/hour blended rate
AWARDED TO:	C = Corrected Price		
✓			

TERM: Commencing January 1, 2014 and terminating December 31, 2016

RESOLUTION NO.

JULIE A. PACYNA, PURCHASING AGENT

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

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

DEPARTMENT NAME: Personnel

SIGNED: *Kathleen Hannu*

DATE: 10/31/13

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
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Please state reason for transfers requested: Contract for Novatime maintenance was not budgeted for.

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
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A.1990 469	Contingent Account- Other Payments/Contributions	A.1430 470	Contract <i>Civil Service</i>	\$5,523
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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. 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:

DATE:

- (a) Purpose of Request: Resolution of intent to support the SUNY Adirondack Capital Improvement Plan for 2013 in the amount of \$1,831,105

- (b) Details: Includes campus wide health/safety improvements in the classroom, critical/deferred maintenance, program enhancements and energy improvements in the classroom and

- (c) Previous Resolution Number: N/A

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

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

* as listed in budget and LOGOS

**ADIRONDACK COMMUNITY COLLEGE
CAPITAL REQUEST RESOLUTION**

WHEREAS, the need for improvements to the College's facilities is necessary to provide an improved learning environment, necessary repairs to old equipment, upgrades to existing facilities which have deteriorated; and

WHEREAS, the following capital needs are required for the Campus:

Capital Expenditure	Building/Area	Category	Estimated Cost
Health / Safety	Campus Wide	Classroom	\$ 854,355
Critical / Deferred Maintenance	Campus Wide	Campus Enhancement	\$ 267,300
Upgrade	Campus Wide	Program Enhancement	\$ 475,450
Energy	Campus Wide	Classroom	\$ 234,000

and

WHEREAS, the total cost of the above capital needs projects is One Million Eight Hundred Thirty-One Thousand One Hundred and Five Dollars and no/100 (\$1,831,105.00), of which fifty percent (50%) will be funded by the State of New York and the remaining fifty percent (50%) is funded by the Sponsors; and


WHEREAS, the Sponsor share in the amount of Nine Hundred Fifteen Thousand Five Hundred Fifty-Two and 50/100 (\$915,552.50) Dollars shall be borne by the capital chargebacks collected by the College and held in Trust with Washington County and/or other resources;

RESOLVED, that the Board of Trustees of Adirondack Community College authorizes the above capital projects; and be it further

RESOLVED, that the Sponsor's share of the cost of the project of \$915,552.50 shall be paid from the accumulated capital chargeback funds and/or other resources.

Adopted at the October 24, 2013 Regular Meeting of the Board of Trustees of SUNY Adirondack.

Signed: _____



Mark Bulmer, Chair

RESOLUTION REQUEST FORM NO. 20

MISCELLANEOUS

①

**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 - Airport

DATE: 10/25/2013

- (a) Purpose of Request: To close airport capital project H244.9550 280 Airport Obstruction Removal (formerly H.9550.8622 280 – Airport Obstruction Removal). The balance shown below is the estimated projected balance at the time of closure, actual balance to be determined by the treasurers department.

- (b) Details: This project was created in 2004 and has a balance of \$15,030.46. Recent efforts to remove obstructions have included applying for and receiving FAA grants. The treasurers office has determined that all the remaining funds originated in the General A.200.01 fund. A separate budget amendment request will be submitted to move the remaining cash balance into H355.9550 280, Runway 1 Obstruction Removal.

- (c) Previous Resolution Number: 762 of 2004

RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

2

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

DEPARTMENT NAME: DPW - Airport

DATE: 10/25/2013

- (a) Purpose of Amendment: To allocate remaining funds from the inactive airport capital project ~~H244~~ Airport Obstruction Removal.
H244. 9950 880
- (b) Appropriation Code (with title), Object Code (with title) and Amount:
A.9950 910, Interfund Transfers increase \$15,000
Transfers-Capital Projects,
- (c) Revenue Code (with title), and Amount: A.1325 5031, Interfund Transfers increase \$15,000
County Treasurers

RESOLUTION REQUEST FORM NO. 9

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

3

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

DEPARTMENT NAME: DPW - Airport

DATE: 10/25/2013

- (a) Exact Title and Number of Project*: H335.9550 280 Runway 1 Obstruction Removal
- (b) Is this a Capital Project? Yes
- (c) Is this a Capital Reserve Project? No
- (d) Amount of Increase (if applicable): \$1,150,000
- (e) Amount of Decrease (if applicable): N/A
- (f) Source of Funding (if Increase) (including name & title of codes, etc.): FAA 90% - \$1,035,000; State 5% - \$57,500; Local - \$57,500 to be paid from A 892.00 (Reserve, Airport Repair and Projects - \$42,500) and A.9950 910 (Interfund Transfers - \$15,000)
Transfers, Capital Projects,
- (g) Changes in Funding (if Amendment): Click here to enter text.
- (h) Purpose of Increase or Decrease or Amendment: This is the final construction phase of this project. The FAA has made a Grant Offer for construction and support services to remove and mitigate tree obstructions in the approach to runway 1.

RESOLUTION REQUEST FORM NO. 8

6

*Request to Establish 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 - Airport

DATE: 10/25/2013

- (a) Exact Title and Number of Project (**must be obtained from Treasurer's Office**):
H346.9550 280 Environmental Assessment Off Airport Obstruction Removal and
Miscellaneous Airport Improvements.
- (b) Is this a Capital Project? Yes
- (c) Is this a Capital Reserve Project? No
- (d) Amount of Project: \$231,794
- (e) Source of Funding (including name & title of codes, etc.): 90% FAA \$208,615; 5%
State \$11,590; 5% Local \$11,590 Code A892.00 Reserve, Airport Repair & Projects
- (f) Purpose of Establishment: To conduct the necessary Environmental Assessment (EA)
for both land and aviation easement acquisitions and their related obstruction
removal and mitigation for off airport property within the approach to runway's 12, 19
and 30. The EA will include some miscellaneous on airport improvements too.

RESOLUTION REQUEST FORM NO. 4

Request for Extending, Rescinding or Amending Existing Contract

DEPARTMENT NAME: District Attorney

DATE: 10-29-13

- (a) Purpose of Contract Change: To renew contract with Robert Lanthrop for the "Alive at 25" Program.
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: 213 of 2009 and Resolution 60 of 2011
- (c) Name of Contractor: Robert Lanthrop.
- (d) Address of Contractor: 2 Flower Court, Malta, New York 12020.
- (e) Contractor's Contact Person and Telephone Number: Robert Lanthrop
- (f) Commencement Date of Extension: 1-1-2014
- (g) Termination Date of Extension: 12-31-2014
- (h) Payment Provisions:
 - i) lump sum amount No cost to County
 - ii) hourly rate amount
 - iii) total amount not to exceed
 - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc.
- (i) Where are the Funds for this Contract? List Budget Code, Object Code, Full Title* and Amount: OR Capital Project OR Capital Reserve Project Number, and Title, and Amount: NO COST TO COUNTY

**Sample: A.1010 470 Legislative Board – Contract \$xx.xx
Capital Project No. H289.9550 480 – Old Jail Renovations \$xx.xx**

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: WESTMOUNT HEALTH FACILITY

DATE: October 25, 2013

- (a) Purpose of Amendment: To Amend budget codes to reflect increases in Medicare Therapy Revenue and the expenditures associated with.
- (b) Appropriation Code, Object Code, Full Title and Amount:
Westmount
EF.73300.6802.470 Physical Therapy, Contracted Services, Contract - \$25,800.00
EF.73400.6802 470 Occupational Therapy, Contracted Serv, Contract-\$32,000.00
EF.73500.6802 470 Speech Therapy, Contracted Services, Contract - \$10,000.00
and hearing
- (c) Revenue Code (with title), and Amount:
Westmount
EF.302008 3020 Private Pay Therapy Revenue, \$47,800.00
EF.302003 3026 Medicaid Therapy Revenue, \$20,000.00
Private Pay Revenue
Daily Rate

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: WESTMOUNT HEALTH FACILITY

DATE: October 25, 2013

(a) Purpose of Amendment: To Amend budget codes to reflect increases in Medicare Part A Revenue and the expenditures associated with.

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

EF.60200.6802.470^{Westmount} Nursing-Nurses' Stations, Contracted Services, - \$40,700.00
EF.72700.4400 435^{Contract} Pharmacy, Prescription Drugs, Medical Fees - \$16,300.00

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

EF.302001 3022₁ Medicare Part A Care Revenue, Medicare Revenue \$57,000.00

Westmount

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: Mental Health / Office of Community Services

DATE: For Board of Supervisors Meeting 11/15/13

- (a) Purpose of Amendment: To increase the 2013 budget appropriation for the Warren - Washington Association for Mental Health, Inc. by \$18579.00, (100% State Aid).

- (b) Appropriation Code (with title), Object Code (with title) and Amount: A.4320.0120.470 (Mental Health Programs;Mental Health Association,Contract) to increase by \$18579.00.

- (c) Revenue Code (with title), and Amount: A.4320.0120.3490 (Mental Health Programs;Mental Health Association;Mental Health) to increase by \$18579.00

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: PARK O & M

DATE: OCTOBER 21, 2013

(a) Purpose of Amendment: To increase estimated revenues and appropriations in the amount of \$4201.60 to appropriate funds from parking fees to reimburse the Village of Lake George for maintenance costs on the south parcel of Charles R. Wood Park and for parking services for 2013 events.

(b) Appropriation Code, Object Code, Full Title and Amount: A.1625 439 Gaslight Village Property - Misc. Fees & Expenses ~~\$4201.60~~ \$2665.42

A.1625 413 - Gaslight Repairs & Maint \$ 1536.18

Sample: A.1010 470 Legislative Board – Contract

(c) Revenue Code (with title), and Amount: A.1625.2566 Gaslight Village Property-Parking Fees \$4201.60

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

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

23

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 Traffic

SIGNED:

DATE:

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
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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	D.3310 220	County Road, Traffic Control, Office Equipment - Reserve	\$12,399.00

Please state reason for transfer request: New Plotter and Software needed for Traffic in conjunction with new Computer System.

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

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: 10/24/13

(a) Exact Title and Number of Project*: Alder Brook Rd Bridge - H260.9550 280

(b) Is this a Capital Project? Yes

(c) Is this a Capital Reserve Project? No

(d) Amount of Increase (if applicable):

(e) Amount of Decrease (if applicable): -\$44,600.00

\$ 0.00 Federal Share
\$ 108,655.00 State Marchiselli Share
- \$ 153,255.00 Local Match

- \$ 44,600.00 Total

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

(g) Changes in Funding (if Amendment):

Decreasing Capital Project and moving funds to debt service

(h) Purpose of Increase or Decrease or Amendment: Amend grant for final project costs and obligation of State Marchiselli share

2

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: Department of Public Works, Parks, Recreation and Railroad

- (a) Purpose of Amendment: To amend the County budget for increase Railroad Contract Expense and Railroad Revenues to pay for Railroad GIS Services in the amount of \$2,730, and were used to update maps in the Railroad's Vegetative Management Plan. Please note that the Revenue account was budgeted at \$40992 and the contract Revenue from Saratoga North Creek Railroad is for \$81958 plus 6% of Revenues over that amount.

- (b) Appropriation Code, Object Code, Full Title and Amount: A.7113 470 Railroad, Contract\$. \$2730.

- (c) Revenue Code (with title), and Amount: A.7113 1789, Railroad, Revenue, Railroad \$2730.

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: BOARD OF ELECTIONS

DATE: OCTOBER 30, 2013

- (a) Purpose of Request: To rescind Resolution No. 195 of 1967, which established a petty cash fund for the Board of Elections.

- (b) Details: Fund is no longer necessary for postage needs.

- (c) Previous Resolution Number: Res. 195 of 1967

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

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

* as listed in budget and LOGOS

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: A6610 Weights & Measures

DATE: October 8, 2013

- (a) Purpose of Request: Increase Petty Cash from \$50.00 to \$100.00

- (b) Details: Petty Cash is used to purchase Fuel samples for Petroleum Sampling program and has not been increased since before 2004 (while the per gallon price of fuel has risen significantly). NYS contract reimburses costs of samples to general fund.

- (c) Previous Resolution Number: N?A

- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title* and Amount: A6610 442, Automotive - Gas & Oil
Weights + Measures,
Sample: A.8021 470 Planning & Community Development – Contract

* as listed in budget and LOGOS

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: 11/6/2013

- (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 \$2,700.00 from the Computer Reserve (A.895.00) to codes: Admin Fiscal Services, ^{Equipment -}
A.1011 220.1 ~~Office of the County Administrator~~ Office Equip Reserve \$900.00
A.1430 220.1 Civil Service Office Equip Reserve ^{Equipment -} \$1,800.00
- (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.~~
^{Reserve, Computers}

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: 11/6/2013

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
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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-	A.1165 444	<i>District Attorney</i> DA-Travel Education/Conference	3,200.00
	Other Payments/Contributions	A.1165 440	DA- Legal Fees	5,000.00

Please state reason for transfer request: To appropriate funds for travel for extradition of inmate.

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

AGENDA
PERSONNEL COMMITTEE
NOVEMBER 6, 2013

- I. Committee meeting called to order by Chairman.
- II. Motion to approve minutes of the prior Committee meeting.
- III. Action Agenda
 - 1) **Requests from the Civil Service/Personnel Office:**

Request for a transfer of funds in the amount of \$5,523 from the contingent account to fund maintenance costs for the Novatime system which were not included in the 2013 County Budget.
 - 2) **Referrals from the Health Services Committee:**

Public Health -
 - A) Request to delete the position of Supervising Public Health Nurse #3 and amend the Departmental Table of Organization accordingly.**Westmount Health Facility -**
 - B) Request to amend the Departmental Table of Organization to create and fill the new position of Admission Screener, *Annual Salary of \$46,072*, and delete the position of Clinical Coordinator, *Annual Salary of \$53,207*, effective November 18, 2013.
 - C) Request to amend the Departmental Table of Organization to create and fill the new position of Building Superintendent, *Annual Salary of \$58,195*, and delete the positions of Executive Housekeeper, *Annual Salary of \$45,077*, and Senior Building Maintenance Mechanic, *Annual Salary of \$48,195* effective December 1, 2013.
 - D) Request to amend the Departmental Table of Organization to create and fill the new position of Laundry Worker/P#4, *Grade 2, Annual Base Salary \$23,706 pro-rated to \$12,090 based on less than part-time status*, effective December 1, 2013.
 - E) Request to amend the Departmental Table of Organization to create and fill 16 new positions entitled CNA/P#45 - #60, *Grade 4, Annual Base Salary of \$25,344 pro-rated to an amount commensurate with the part-time status which is not to exceed 48 hours per pay period*, and delete the full time positions of CNA#2, CNA#5, CNA#21, CNA#31, and CNA#34 effective November 18, 2013.
 - 3) **Item to be discussed by the County Administrator:**
 - A) Amendment to Resolution No. 569 of 2013 to clarify health insurance rates and terms.
 - B) Update on Human Resources Manager position and introduction of local law necessary to create Department.
- IV. **Pending Items:**
 - 1) Committee approved preparation of RFP's for codification of all County laws/rules/policies and for consultant services relating to salary and wage studies. (06.13.13)