

AGENDA
FINANCE COMMITTEE
MAY 7, 2014

- 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) **Requests from the Treasurer's Office:** None.
 - 3) **Request from the Human Resources/Civil Service Office:**
 - A) Request for a transfer of funds in the amount of \$9,179.88 from the Contingent Fund to support the costs of a full-time temporary HR/Civil Service Assistant. This position will be used for a three month term commencing May 19, 2014.
 - B) Request for a transfer of funds in the amount of \$560 from the Contingent Fund to cover the costs of the travel for Patricia Nenninger, Personnel Officer, to attend the New York State Association of Personnel and Civil Service Officers Annual Training Conference in Corning, NY on June 8-11, 2014.
 - 4) **Referrals from the County Facilities Committee:**

Buildings & Grounds -

 - A) Request for a transfer of funds in the amount of \$1,000 to Budget Code A.1610 418 to cover the increase in insurance costs associated with the transfer of vehicles from the Health Services Fleet to the County Fleet. Funding is not available within the Buildings & Grounds Division budget to cover this expense; Finance Committee to determine a source of funding.

Airport -

 - B) The County Facilities Committee has recommended that the first \$5,000 in parking revenues collected during the 2014 Adirondack Balloon Festival be allocated to the Adirondack Balloon Festival Committee to help offset the costs associated with operation of the Festival.
 - 5) **Referrals from the Economic Growth & Development Committee:**

Planning & Community Development -

 - A) Request to amend the County Budget in the amount of \$71,000 to move funds within the existing budget and correct a budgeting error.
 - B) Request to amend the County Budget to include unanticipated revenues and expenditures in the amount of \$4,050 to reflect the receipt of grant funding to cover the costs of overtime for the Planning Department's Office Specialist position.
 - 6) **Referrals from the Public Safety Committee:**

Office of Emergency Services -

 - A) Request for a transfer of funds in the amount of \$2,500 to fund the purchase of office furniture for Brian LaFlure, Fire Coordinator/Director of the Office of Emergency Services, as a result of the study conducted by Needham Risk Management. Funding is not available within the Office of Emergency Services budget to cover this expense; Finance Committee to determine a source of funding.

Sheriff & Communications -

 - B) Request to amend the County Budget to include unanticipated revenues and expenditures in the amount of \$600 to reflect the receipt of funding from the Warren-Washington County Impact Panel.
 - C) Request to amend the County Budget to include unanticipated revenues and expenditures in the amount of \$425,000 to transfer unused Interoperable Communications Grant funds from the 2013 Budget.
 - D) Request to amend the County Budget to include unanticipated revenues and expenditures in the amount of \$4,602 to reflect the receipt of funds donated to the Sheriff's K-9 Unit in support of Canine Officer Ozzy.

7) **Referral from the Public Works Committee:**

Department of Public Works

Request to increase Capital Project No. H342.9550 280, *Blair Road over Mill Brook*, in the amount of \$11,540 to cover the Federal share of right-of-way incidental services.

8) **Referral from the Support Services Committee:**

Information Technology -

Request for a transfer of funds in an amount not to exceed \$700 for the purchase of equipment to video record Committee meetings. Funding is not available within the Information Technology budget to cover this expense; Finance Committee to determine a source of funding.

9) **Requests/Items to be discussed by the County Administrator:** None.

10) Finance Committee action is required on the following items as approved by the Personnel Committee: Item No. 3.

IV. 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

DEPARTMENT NAME: Legislative Board

SIGNED:

DATE: 05.07.14

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1010 860	Legislative Board, Hospitalization	A.1340 860	Budget Officer, Hospitalization	\$5,077.00
A.1010 865	Legislative Board, Dental Ins.	A.1340 865	Budget Officer, Dental Ins.	103.00

Please state reason for transfers requested: To cover 2014 health and dental insurance costs for the Budget Officer.

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.

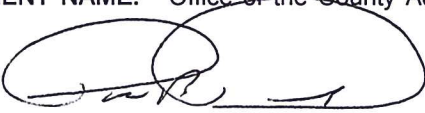
RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

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

DEPARTMENT NAME: ~~Office of the County Administrator~~

SIGNED:



DATE: 4/30/2014

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1011 439	Co. Admin-Misc Fees	A.1011 120	Co. Admin-Overtime	300.00
A.1011 444	Co. Admin-Travel	A.1011 865	Co. Admin-Dental Ins.	288.00
A.1325 865	Treasurer-Dental Ins.	A.1011 865	Treasurer-Dental Ins.	18.00

Please state reason for transfers requested: To allocate funds for overtime expenses and Dental Insurance.

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: Information Technology

SIGNED:



County Administrator for Dist.

DATE: 4/30/2014

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1680 110	Info Tech Regular Salaries	A.1680 130	Info Tech Part Time Salaries	2,902.00

Please state reason for transfers requested: To amend budget to extend temporary help to 150 days.

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 Emergency Services

SIGNED:

DATE: April 28, 2014

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.3645.4004 423	FY12 State Homeland Security Program - Telephone	A.3645.4004 250	FY12 State Homeland Security Program - Technical Equipment	\$3,950

Please state reason for transfers requested: Transfer needed to purchase equipment

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

Name of Department

SIGNED: *[Signature]* DATE: 4/22/2014

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
D.5110 860	County Roads Road Maintenance Hospitalization	D.5142 860	County Roads, Services Snow and Ice Hospitalization	\$13,000
D.5110 865	County Roads Road Maintenance Dental	D.5142 865	County Roads, Services Snow and Ice Dental	\$ 200.00

Please state reason for transfers requested:

To reallocate Hospitalization and Dental from County Road Maintenance to County Roads Snow and Ice.

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: WESTMOUNT HEALTH FACILITY
Name of Department

SIGNED: _____

DATE: April 25, 2014

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
EF.73800.200 110	Westmount, Social Services, Social Worker Wages, Salaries - Regular	EF.83110.600 110	Westmount, Fiscal Services Office, Clerical & Other Wages, Salaries – Regular	2,300.00
EF.73800.200 110	Westmount, Social Services, Social Worker Wages, Salaries - Regular	EF.83110.600 120	Westmount, Fiscal Services Office, Clerical & Other Wages, Salaries – Over time	4,000.00
EF.73800.200 110	Westmount, Social Services, Social Worker Wages, Salaries – Regular	EF.73800.200 130	Westmount, Social Services, Social Worker Wages, Salaries – Part Time	15,000.00
EF.73800.200 110	Westmount, Social Services, Social Worker Wages, Salaries - Regular	EF.82400.700 120	Westmount, Housekeeping Serv, Housekeeping, Salaries – Over time	3,000.00
EF.73800.200 110	Westmount, Social Services, Social Worker Wages, Salaries - Regular	EF.82500.700 120	Westmount, Laundry & Linen Serv, L&L, Salaries – Over time	1,500.00
EF.60200.400 850	Westmount, Nursing-Nurses' Station, LPN, Unemployment	EF.60200.400 120	Westmount, Nursing-Nurses' Station LPN, Salaries – Over time	30,000.00

Please state reason for transfers requested: position re-class, over time budgets

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

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

DEPARTMENT NAME: Human Resources & Civil Service

SIGNED:

DATE: 5/6/2014

<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	A.1430 130	Human Recourses/Civil Service - Salaries – Part Time	\$7,750.00
		A.1430 810	Human Resources/Civil Service - Retirement	\$837.00
		A.1430 830	Human Resources/Civil Service - Social Security	\$480.50
		A.1430 831	Human Resources/Civil Service - Medicare	\$112.38

Please state reason for transfer request: Hire temporary FT HR/Civil Service Assistant for a period of 90 days

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: Human Resources & Civil Service

SIGNED:

DATE: 5/6/2014

<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	A.1430 444	Human Recourses/Civil Service - Travel/Education/Conference	\$560.00

Please state reason for transfer request: Costs for Patricia Nenninger to attend Annual Training Conference

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

SCHEDULE "A"
AUTHORIZATION TO ATTEND MEETING OR CONVENTION

Check one:

- In-State (needs Supervisory Committee authorization)
- Out-Of State (needs Board resolution)

The Support Services hereby authorizes Patricia Nenninger
(Supervisory Committee) (Employee Name)

to attend Personnel & Civil Service Officers Annual Training Conference _____
(Name of meeting or organization)

at The Radisson, Corning, NY _____
(Address)

on 6/8 - 6/11/14. Mode of transportation to be used County Vehicle
(Dates) (County Vehicle or Mass Transportation)

If the mode of transportation is **not** a county vehicle or mass transportation, please explain:

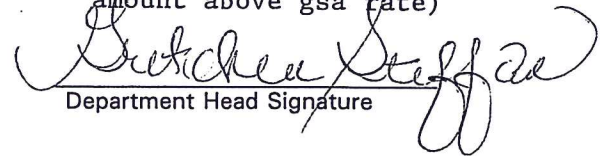
Proper documentation must be attached when submitting for approval.
(Please check documents attached)

- Notice of meeting or convention including cost. (\$150 fee)

For Overnight Travel

Room rate \$ 624.00 (& meals) GSA* Rate \$ 249.00
 Meal costs - GSA*per diem rate \$ 161.00 (Trish Nenninger will pay amount above gsa rate)
*www.gsa.gov

Date: _____


Department Head Signature

Date: _____

Committee Chairman Signature

Please refer to the Warren County Travel Policy and County Vehicle Use Regulations for general policy guidelines.

Please check to request a fleet vehicle.

REQUEST FOR USE OF FLEET VEHICLE

Filing Instructions:

1. Original with voucher to Auditor.
2. Copy to Frank Morehouse if fleet vehicle is needed.
3. Copy to Clerk of the Board with Resolution Request form if out-of-state travel.
4. Copy to Purchasing with Purchase Order, if required.
5. Copy to the County Administrator if credit card will be used.

**NEW YORK STATE ASSOCIATION
OF
PERSONNEL AND CIVIL SERVICE OFFICERS**

ANNUAL TRAINING CONFERENCE

THE RADISSON
CORNING, NY
(JUNE 8 – 11, 2014)

Name: Patricia Nenninger Title: Personnel Officer
Department: Human Resource & Civil Serv Address: 1340 State Rt. 9
Municipality: Warren County Lake George, NY 12845
Phone: 518-761-6440 Zip Code: 12845

Arrival Date: 6/8/2014 Departure Date: 6/11/2014

COMMUTERS:

_____ Check here if your jurisdiction does not plan to stay overnight (please provide the name of the representative from your jurisdiction and other information requested above.) Instead of arrival/departure date, please indicate below the days your jurisdiction will be attending and the number of individuals from your jurisdiction who plan to attend the following meals (prices below):

Sunday, June 8: Dinner # _____
Monday, June 9: Breakfast # _____ Lunch # _____ Dinner # _____
Tuesday, June 10: Breakfast # _____ Lunch # _____ Reception # _____ Dinner # _____
Wednesday, June 11: Breakfast # _____

The daily meal ticket prices are as follows and **need to be paid with the Registration Fee:**

- Breakfast Only = \$17
- Morning and Afternoon Break = \$11.50
- Lunch Only = \$24
- Dinner (Sunday) = \$39 ; Dinner (Tuesday) = \$42
- Tuesday, June 10 Cocktail Reception Only = \$24

REGISTRATION FEE:

Member \$ 50 per Official (\$200 Maximum Charge per Jurisdiction)
Non-Member \$150 per Official (Subject to Availability)

Overnight Registration for each official includes participation at program workshops, meals, breaks, and receptions. Non-overnight Registration does not include any meals.

REGISTRATION POLICY:

Registration fee for each official must accompany his/her registration form by check or voucher payable to N.Y.S. Association of Personnel & Civil Service Officers by **May 7, 2014.**

Please complete one form for each overnight person who will be attending the training conference (for jurisdictions planning to commute for the day, please complete only one form).

Send to: Kathy Corona, Treasurer
Seneca County Office Building
1 DiPronio Drive
Waterloo, NY 13165

NOTE: DO NOT SEND THIS FORM TO THE HOTEL

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

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

DEPARTMENT NAME: Fleet

SIGNED:

DATE: 4/29/14

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
to be determined		A.1610.418	Ins. - General Liability	\$1,000.00

Please state reason for transfers requested: Cars added to Fleet after budget adoption

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. 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 May 2014

(a) Purpose of Amendment:

Request to amend Warren County Budget to allow for correct revenue codes in 8021

(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 \$71,000, A.8021 3095 (\$71,000)

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

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

budget transfer of \$71,000 from A.8021 3905 to A.8021 1289

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 April 2014

(a) Purpose of Amendment:
Increase salary and fringe amounts to reflect overtime for Office Specialist.

(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 \$4,050

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	\$3,200
A8021 810 Retirement	\$600
A8021 830 Social security	\$200
A8021 831 Medicare	\$50

In an effort to get back on track with all of our State reimbursements I would like to ask the Committee for approximately 100 hours of overtime for the Office Specialist. The extra time will allow us to load the current Department of State Grant awards into an electronic system so that we can keep better track of 29 separate projects in the various grants. With some of the reimbursement packages involving nearly a hundred pages of backup and reports it is a complex process that we need to streamline internally in order to provide timely reimbursements. The overtime will be reimbursed from the administrative funds in the grant awards.

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

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

DEPARTMENT NAME: Office of Emergency Services

SIGNED:

DATE: April 28, 2014

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
To be determined		A.3410 210	Fire Prevention & Control - Furniture/Furnishings	\$2,500

Please state reason for transfers requested: To purchase office furniture for Brian LaFlure, Director/Fire Coordinator as a result of a study conducted by Needham Risk Management.

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. 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: Sheriff

DATE: April 4, 2014

- (a) **Purpose of Amendment:** Amend the County Budget to increase revenue to reflect monies received from the Warren-Washington County Impact Panel.
- (b) **Appropriation Code, Object Code, Full Title and Amount:**
A.3110 120 Law Enforcement Overtime \$600.00
- (c) **Revenue Code (with title), and Amount:**
A.3110 1589 Law Enforcement Public Safety-other \$600.00

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

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: Sheriff

DATE: April 4, 2014

- (a) **Purpose of Amendment:** Amend the County Budget to increase revenue to reflect monies transferred from 2013 budget for Interoperable Communications Grant.
- (b) **Appropriation Code, Object Code, Full Title and Amount:**
A.3020 4025 250 911 Center Technical Equipment \$425,000.00
- (c) **Revenue Code (with title), and Amount:**
A.3020 3384 Sheriff's Other State Aid \$425,000.00

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

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: Sheriff

DATE: April 28, 2014

- (a) **Purpose of Amendment:** Amend the County Budget to increase revenue to reflect donations to K-9 Ozzy
- (b) **Appropriation Code, Object Code, Full Title and Amount:**
A.3110 410 Supplies \$4,602.00
- (c) **Revenue Code (with title), and Amount:**
A.3110 2711 Misc. Gifts K-9 Donations \$4,602.00

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

RESOLUTION REQUEST FORM NO. 9

17

***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: 4/23/14

(a) Exact Title and Number of Project*: Blair Road over Mill Brook (H342.9550
280)

(b) Is this a Capital Project? Yes

(c) Is this a Capital Reserve Project? No

(d) Amount of Increase (if applicable): \$11,540.00

(e) Amount of Decrease (if applicable):

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

\$ 11,540.00 Federal Share

\$ 0.00 State Marchiselli Share

\$ 0.00 Local Match (no funds needed at this time)

(g) Changes in Funding (if Amendment):

(h) Purpose of Increase or Decrease or Amendment: To cover the federal share of
right of way incidentals services.

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

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

DEPARTMENT NAME: IT

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	A.1680 220	Information Technology, Office Equipment	Not to exceed \$700

Please state reason for transfer request: Purchase of equipment to video record Committee meetings

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: IT

DATE: 4/30/2014

- (a) Purpose of Request: Purchase of the following equipment to video record Committee meetings and make the contents available on the internet: Camera, Ceiling mounted microphone, an AMP for the microphones, a DVR(s) for the audio/video recordings, a switch, and any other related equipment that may be necessary.

- (b) Details: Purchase of the following equipment to video record Committee meetings and make the contents available on the internet: Camera, Ceiling mounted microphone, an AMP for the microphones, a DVR(s) for the audio/video recordings, a switch, and any other related equipment that may be necessary.

- (c) Previous Resolution Number: N/A

- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title* and Amount: an amount not to exceed \$700, A.1680 220 Information Technology, Office Equipment (transfer request from contingency to be presented to the Finance Committee)

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

* as listed in budget and LOGOS

AGENDA
PERSONNEL COMMITTEE
MAY 7, 2014

- 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 Human Resources/Civil Service/Personnel Office:**

Human Resources -

- A) Request for a transfer of funds in the amount of \$9,179.88 from the Contingent Fund to support the costs of a full-time temporary HR/Civil Service Assistant. This position will be used for a three month term commencing May 19, 2014.

Civil Service/Personnel -

- B) Request to authorize travel for Patricia Nenninger, Personnel Officer, to attend the New York State Association of Personnel and Civil Service Officers Annual Training Conference in Corning, NY on June 8-11, 2014.
- C) Request for a transfer of funds in the amount of \$560 from the Contingent Fund to cover the costs of the travel outlined in Item 1B.

2) **Request from the Clerk of the Board:**

Amend Resolution No. 519 of 2013, *Amending Resolution No. 97 of 2013; Approving Standard Work Day and Time Reporting Resolution for all Elected and Appointed Officials for Retirement Purposes*, to update retirement reporting information.

3) **Referral from the Health Services Committee:**

Westmount Health Facility -

Request to create and fill the new position of Health Facility Keyboard Specialist, *Grade 5, Annual Base Salary of \$26,897*, contingent upon Union approval, and delete the position of Keyboard Specialist, *Grade 3, Annual Base Salary of \$24,215 - Budgeted Salary of \$24,954*, effective June 1, 2014, and amend the Departmental Table of Organization accordingly.

4) **Referrals from the Public Safety Committee:**

Sheriff & Communications -

- A) Request to fill the vacant position of Senior Communications Officer #2, *Annual Base Salary of \$47,648 - Budgeted Salary of \$51,696*, due to retirement. This is a non-mandated, Union position which does not receive any reimbursements, the filling of which will result in a budgetary savings of \$4,048 due to a decrease in longevity pay.
- B) Request to fill the vacant position of Communications Officer #1, *Annual Base Salary of \$35,766 - Budgeted Salary of \$47,648*, due to resignation. This is a non-mandated, Union position which does not receive any reimbursements, the filling of which will result in a budgetary savings of approximately \$12,000 due to a decrease in longevity pay.
- C) Request to fill the vacant position of Communications Officer #15, *Annual Base Salary of \$35,766 - Budgeted Salary of \$45,272*, due to promotion. This is a non-mandated, Union position which does not receive any reimbursements, the filling of which will result in a budgetary savings of \$9,506 due to a decrease in longevity pay.
- D) Discussion regarding additional Corrections Officer staff.

5) **Referrals from the Social Services Committee:**

Department of Social Services -

- A) Request to fill the vacant position of First Social Services Attorney, *Annual Salary to be determined - Budgeted Salary of \$66,940*, due to resignation. This is a mandated position which receives 39% Federal and 38% State reimbursements.
- B) Request to fill the vacant position of Resource Clerk #1, *Grade 4, Base Annual Salary of \$25,851 - Budgeted Salary of \$32,773*, due to retirement, as well as any vacancies resulting from promotion. This is a mandated, Union position which receives 39% Federal and 38% State reimbursements, the filling of which will result in a budgetary savings of \$6,922 due to a decrease in longevity pay.

6) **Requests/Items to be discussed by the County Administrator:**

Authorizing re-employment of Jason Michael Baker as a temporary part-time Computer Help Desk Aide for an additional thirty (30) days (30 hours per week to be paid at a rate of \$12.18 per hour). Funding is available within the existing budget to support this expense.

IV. **Pending Items -**

- 1) County Administrator to prepare a proposal for streamlining the process for filling vacant positions. (03.12.14)