

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 Emily Kladis } REP  
(Supervisory Committee) Mary Beth Casey (Employee Name)

to attend ECA Summer Conference  
(Name of meeting or organization)

at Georgian Resort - Lake George NY 12845  
(Address)

on 7-29-8-1-14 Mode of transportation to be used Personal Vehicle  
(Dates) (County Vehicle or Mass Transportation)

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

local event

Proper documentation must be attached when submitting for approval.

(Please check documents attached)

Notice of meeting or convention including cost.

\$ 30.00 @ Conference fee

For Overnight Travel

Room rate \$ \_\_\_\_\_ GSA\* Rate \$ \_\_\_\_\_

Meal costs - GSA\* per diem rate \$ 66.00 @ day per person  
\*www.gsa.gov

\$ 66.00 @ per day meals

Date: 5-28-14

Mary Beth Casey  
Department Head Signature

Date: 5-30-14

[Signature]  
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 County Administrator if credit card will be used.

**SCHEDULE "A"**  
**AUTHORIZATION TO ATTEND MEETING OR CONVENTION**

Check one:

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

The 6th PORT SERVICES hereby authorizes Elizabeth McLaughlin  
 (Supervisory Committee) William H. Montfort  
 (Employee Name)

to attend ELECTION COMMISSIONERS ASSO. OF NY  
 (Name of meeting or organization)

at GEORGIAN 384 CANADA ST. LAKE GEORGE NY 12845  
 (Address)

on 7/29/14-8/1/14 Mode of transportation to be used OWN VEHICLE  
 (Dates) (County Vehicle or Mass Transportation)

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

LOCAL EVENT

\$ 30.00 @ Conference fee  
 \$ 66.00 @ per day meals gsa

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

- Notice of meeting or convention including cost.

**For Overnight Travel**

- Room rate \$ \_\_\_\_\_ GSA\* Rate \$ \_\_\_\_\_
- Meal costs - GSA\* per diem rate \$ 66.00 @ day per person

\*www.gsa.gov

Date: 5/28/2014

William H. Montfort  
 Department Head Signature

Date: 5-30-14

[Signature]  
 Committee Chairman Signature

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

\*\*\*\*\*

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**REQUEST FOR USE OF FLEET VEHICLE**

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U.S. General Services Administration

Search

Home > Policy & Regulations > Travel and Relocation Policy > Per Diem > Per Diem Rates >

# FY 2014 Per Diem Rates for ZIP 12845

(October 2013 - September 2014)

SEARCH BY CITY, STATE OR ZIP CODE

Enter your city  OR Enter your ZIP Code

**FIND PER DIEM RATES**

[Per Diem Map >](#)

**ADDITIONAL PER DIEM TOPICS**

- Meals & Incidental Expenses Breakdown (M&IE) FAQs
- State Tax Exemption Forms
- Factors Influencing Lodging Rates
- FY 2014 Per Diem Highlights
- Fire Safe Hotels
- Have a Per diem Question?
- Downloadable Per Diem Files

Cities not appearing below may be located within a county for which rates are listed. To determine what county a city is located in, visit the [National Association of Counties \(NACO\) website \(a non-federal website\)](#).

The following rates apply for 12845

Primary Destination* (1)	County (2, 3)	Max lodging by Month (excluding taxes)												Meals & Inc. Exp.**	
		2013			2014										
		Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep		
Glens Falls	Warren	99	99	99	99	99	99	99	99	99	99	154	154	99	66

\* NOTE: Traveler reimbursement is based on the location of the work activities and not the accommodations, unless lodging is not available at the work activity, then the agency may authorize the rate where lodging is obtained.

\*\* Meals and Incidental Expenses, see [Breakdown of M&IE Expenses](#) for important information on first and last days of travel.

**CONTACTS**

- Additional Contacts for
- Travel Management Policy

Last Reviewed 2014-02-12

**NEED MORE INFORMATION?**

- Rates for Alaska, Hawaii, U.S. Territories and Possessions (set by DoD)
- Rates in Foreign Countries (Set by State Dept.)
- Federal Travel Regulations (FTR)

**RELATED TOPICS**

- Travel Resources
- E-Gov Travel
- FedRooms
- POV Mileage Reimbursement Rates

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# Conference Registration Form

Election Commissioners' Association of New York State

Summer Conference – July 29 – August 1, 2014

Fax or Email to Tom Ferrarese, ECA Secretary/Treasurer by June 30<sup>th</sup>

Fax: (585)753-1531 / Email: 2014ECASC@NYSECA.COM

County Board/Company Name: \_\_\_\_\_  
(Please complete a form for each person attending except guest of Conference attendees)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Sharing Room with: \_\_\_\_\_

**Please check, which applies to you: For Hotel Packages -**

**Tuesday arrival begins with dinner and Wednesday arrival begins with lunch.**

*(We are asking that you let us know your plans as completed with the hotel's Official Housing Form. We have always attempted to follow up with the hotel to make sure all reservations are completed as requested. By providing the information below we will continue to do that. Also please note all meal choices including options for Thursday's night sit down dinner are to be completed on the hotel's Official Housing Form including those for people who will not be staying at the hotel.)*

- A.  3 night accommodations Tuesday through Friday with meals  
B.  2 night accommodations Tuesday through Thursday with meals  
C.  2 night accommodations Wednesday through Friday with meals  
D.  I plan on attending the conference but have made other arrangements or will commute daily.

**Please note all meal choices need to be made on the hotel's Official Housing Form**

**Conference Registration Fee:** \$30.00 registration fee will be paid by anyone attending any event or meeting. This will be paid at the ECA registration table by cash, check or county voucher. It is a conference fee and separate from hotel/meal registration. This includes all spouses, guests or vendors over the age of 21. Also anyone who has not paid their membership dues for this year may pay them at the conference registration table.

**Please mail, fax or email this conference registration form by June 30, 2014 to**

**Tom Ferrarese, ECA Secretary/Treasurer,**

**Monroe County Board of Elections**

**39 W. Main St. Rm 106, Rochester, NY 14614**

**Fax Number – (585)753-1531**

**Email – 2014ECASC@NYSECA.COM**

**\*\*\* Don't forget to Email or Fax the hotel's Official Housing Form  
to the Georgian Lakeside Resort**

**Fax: (518) 708-6901, Email: registration@georgianresort.com by June 30th\*\*\***

**\*\*\*Please don't forget to bring your identification pouch  
provided at the previous conferences – if you are new and one is needed, you  
must notify me at the above listed fax number\*\*\***

**Warren County**  
**SUPPORT SERVICES COMMITTEE**  
**(INSURANCE)**

May 30, 2014 @ 9:30am

Information Submitted By: Amy Clute, Insurance Administrator

Committee Members: Chairman, Supervisor Taylor  
Supervisor McDevitt  
Supervisor Frasier  
Supervisor Vanselow  
Supervisor Wood  
Supervisor Brock  
Supervisor Seeber

**I. Action agenda – matters requesting Resolutions of the Board and / or Committee approval:**

1. Resolution requested approving Insurance Administrator to serve as Treasurer of NYSASIC for a 2 year term beginning 1/1/15.
2. Resolution requested authorizing a change to Local Law No. 4 of 2013. Upon review of the current formula used to allocate Plan costs to the Plan Participants the Self-Insurance Administrator proposes updating the formula indicated in Section C. of Local Law No. 4 of 2013 as follows:

**C. APPORTIONMENT OF COSTS AND PAYMENTS**

*1. Each participant shall be liable to pay its proportionate share of the cost of participation in the Plan, including administrative costs and expenses as determined using the following experience based formula:*

*Administrative Expenses will be allocated among the Plan Participants in the following way.*

- *Volunteer Ambulance Squads (for Volunteers) collectively will be charged 7% of the total Administrative Expenses. This cost will be allocated based upon the actual number of runs during the last full year.*
- *Volunteer Fire Departments (for Volunteers) collectively will be charged 11% of the total Administrative Expenses. This cost will be allocated based upon the actual number of runs during the last full year.*
- *All Participants with payroll will share the balance of the Administrative Expenses based upon actual gross payroll for the last full year.*

*Claims Expenses will be allocated among all Plan Participants based upon actual claims paid for the 8 full calendar years prior to the last January 1<sup>st</sup>. Each individual claim with a total paid for the sum of 8 years exceeding \$50,000 will be charged \$50,000.*

# **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: Self-Insurance**

**DATE: 5/30/14**

- (a) Purpose of Request: **Authorizing Administrator of Self-Insurance Department to Serve as Treasurer of the New York State Association of Self-Insured Counties.**
- (b) Details: **Term 1/1/15-12/13/17**
- (c) Previous Resolution Number: **Similar to R484 of 2012**
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title\* and Amount: **N/A**

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

\* as listed in budget and LOGOS

# Warren County Board of Supervisors

## RESOLUTION NO. 484 OF 2012

Resolution introduced by Supervisors Taylor, Strainer, Loeb, McDevitt, Frasier, Mason and Vanselow

### AUTHORIZING ADMINISTRATOR OF SELF-INSURANCE DEPARTMENT TO SERVE AS A DIRECTOR OF THE NEW YORK STATE ASSOCIATION OF SELF INSURED COUNTIES

WHEREAS, it has been recommended that County Department Heads who participate in various non-County organizations, associations, boards, committees or other similar activities obtain authorization for said participation if such participation is considered part of the Department Head's job function, now, therefore, be it

RESOLVED, that the Warren County Board of Supervisors hereby authorizes the Administrator of the Self-Insurance Department, Amy Clute, to serve as a Director of the New York State Association of Self Insured Counties, and be it further

RESOLVED, that the Warren County Board of Supervisors further authorizes the Administrator of the Self-Insurance Department, Amy Clute, to take out-of-State and in-State trips on behalf of the New York State Association of Self-Insured Counties as long as said trips do not conflict and/or interfere with her duties as Administrator of the Self-Insurance Department, during her tenure as a Director of the Association, which shall terminate December 31, 2014.

# **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: Self-Insurance**

**DATE: 5/30/14**

- (a) Purpose of Request: INTRODUCING PROPOSED LOCAL LAW NO. \_\_\_ OF 2014 AND AUTHORIZING PUBLIC HEARING THERON
  
- (b) Details: THE PURPOSE OF THIS LOCAL LAW AMENDING (Section C 1), LOCAL LAW NO. 4 OF 2013 ENTITLED RULES AND REGULATIONS FOR THE ADMINISTRATION OF THE WARREN COUNTY SELF-INSURANCE PLAN.
  
- (c) Previous Resolution Number: R57/2013
  
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title\* and Amount: n/a

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

\* as listed in budget and LOGOS

C. APPORTIONMENT OF COSTS AND PAYMENTS

1. Each participant shall be liable to pay its proportionate share of the cost of participation in the Plan, including administrative costs and expenses as determined using the following experience based formula:

Administrative Expenses will be allocated among the Plan Participants in the following way.

- Volunteer Ambulance Squads (for Volunteers) collectively will be charged 7% of the total Administrative Expenses. This cost will be allocated based upon the actual number of runs during the last full year.
- Volunteer Fire Departments (for Volunteers) collectively will be charged 11% of the total Administrative Expenses. This cost will be allocated based upon the actual number of runs during the last full year.
- All Participants with payroll will share the balance of the Administrative Expenses based upon actual gross payroll for the last full year.

Claims Expenses will be allocated among all Plan Participants based upon actual claims paid for the 8 full calendar years prior to the last January 1<sup>st</sup>. Each individual claim with a total paid for the sum of 8 years exceeding \$50,000 will be charged \$50,000.

# Warren County Board of Supervisors

## RESOLUTION NO. 57 OF 2013

**Resolution introduced by Supervisors Taylor, Strainer, Loeb, McDevitt, Frasier, Mason and Vanselow**

### TO ENACT LOCAL LAW NO. 4 OF 2013

WHEREAS, a proposed Local Law was duly presented to the Board of Supervisors and considered by them, said proposed Local Law being entitled, "A Local Law Amending, Superceding and Consolidating Local Law No. 4 of 1981 - Rules and Regulations for the Administration of the Warren County Self-Insurance Plan and as subsequently amended", and

WHEREAS, the Board of Supervisors adopted Resolution No. 777 of 2012 on December 21, 2012, authorizing a public hearing to be held by the Board of Supervisors on the 18<sup>th</sup> day of January, 2013, at 10:00 a.m. in the Supervisors' Room in the Warren County Municipal Center on the matter of the proposed Local Law, and notice of such public hearing having been duly published and posted as required by law, and said public hearing having been held and all persons appearing at said public hearing desiring to be heard, having been heard, now, therefore, be it

RESOLVED, the Board of Supervisors of the County of Warren, New York, on this 18<sup>th</sup> day of January, 2013, does hereby enact and adopt Local Law No. 4 of 2013 as set forth in Schedule "A" annexed hereto, and be it further

RESOLVED, that the Chairman of the Board of Supervisors, Clerk of the Board of Supervisors, County Administrator and County Attorney are hereby authorized to make such minor modifications to the Local Law as deemed necessary, and are authorized to execute, file and publish the Local Law and take all necessary actions for the promulgation thereof.

*RESOLUTION No. 57 OF 2013*

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SCHEDULE 'A'

COUNTY OF WARREN

LOCAL LAW NO. 4 OF 2013

A LOCAL LAW AMENDING, SUPERCEDING AND CONSOLIDATING  
LOCAL LAW NO. 4 OF 1981 - RULES AND  
REGULATIONS FOR THE ADMINISTRATION OF THE WARREN  
COUNTY SELF-INSURANCE PLAN AND AS SUBSEQUENTLY  
AMENDED

**BE IT ENACTED**, by the Board of Supervisors of the County of Warren, New York as follows:

SECTION 1. Title. This Local Law shall be entitled "A Local Law Amending, Superceding and Consolidating Local Law No. 4 of 1981 - Rules and Regulations for the Administration of the Warren County Self-Insurance Plan and as subsequently amended"

SECTION 2. Purpose. Pursuant to authority in Article 5 of the Workers' Compensation Law, and specifically Section 65 "Rules and regulations" thereof, the purpose of this Local Law is to establish rules and regulations for the fair and equitable administration and operation of the Warren County Self-Insurance Plan ("Plan"). Local Law No. 4 of 1981 has been amended multiple times. The further purpose of this Local Law is to consolidate Local Law No. 4 of 1981 and as amended into a single document.

SECTION 3. Rules and Regulations of the Plan. The following constitute the rules and regulations for the administration of the Plan:

A. PARTICIPATION

1. In addition to the County, participation in the Plan shall be available to the city, towns, villages and fire districts in the County of Warren, the Warren County Soil & Water Conservation district, SUNY Adirondack and all volunteer fire companies and volunteer ambulance workers having their principal office in Warren County, and organized and operating in a town in Warren County currently participating in the Warren County Self-Insurance Plan; and all school districts organized and existing within Warren County and Cornell Cooperative Extension of Warren County and any public library improvement district existing within Warren County and Civil Defense Volunteers of the Radio Amateur Civil Emergency Service and Municipal Housing Authorities which are located in Warren County and created pursuant to the public housing laws of New York State. Any of the foregoing are eligible to become a "participant" in the Plan.

B. PLAN ENTRY AND WITHDRAWAL - PAYMENT OF OUTSTANDING

LIABILITIES

Any municipality or public entity eligible to participate in the Plan as set forth in paragraph "A" herein and electing to become a participant shall file a certified copy of the resolution of its governing body electing to become a participant. Membership of a participant in the Plan shall be effective upon approval of the Warren County Self-Insurance Plan Insurance Administrator ("Administrator"). Any participant may withdraw from the Plan effective January 1<sup>st</sup> by filing a written notice with the Administrator by the preceding July 1<sup>st</sup>. The notice of withdrawal from the Plan must be in the form of a certified copy of a resolution of the governing body of the participant electing to withdraw. As a condition of withdrawal from the Plan, the participant must enter into a withdrawal agreement with Warren County and must agree to pay in a lump sum or installments, an equitable share of the outstanding liabilities of the Plan as of the date of withdrawal. If payment of the equitable share of the outstanding liabilities of the Plan is to be made in installments, an installment payment plan and other necessary terms and conditions shall be set forth in the withdrawal agreement. For purposes of this paragraph, the phrase "equitable share of outstanding liabilities of the Plan" shall mean all of those current and open compensation cases originating from the participant and included in the Plan on or before the effective January 1<sup>st</sup> of the participants withdrawal from the Plan and all those compensation cases originating from the participant which are closed as of the date of withdrawal but, which in the judgment of the Administrator are likely to be re-opened after the January 1<sup>st</sup> withdrawal date. In the alternative, as a requirement of withdrawal from the Plan, the participant may agree to transfer all existing claims to another workers' compensation administrator as approved by the New York State Workers' Compensation Board and through written agreement with Warren County. In accordance with the provisions of Workers' Compensation Law §63, in the event the withdrawing participant is a town, city or village and there is a volunteer fire department(s) or volunteer ambulance workers organized and operating within the withdrawing town, city or village who is also a participant in the Plan, the volunteer fire department(s) or volunteer ambulance workers must also withdraw from the Plan at the same time as the town, city or village withdraws from the Plan.

Upon receipt of a notice of withdrawal from a participating town, city or village as provided for herein, the Administrator shall within thirty (30) days of receipt of such notice provide written notification to each participating volunteer fire department(s) or volunteer ambulance workers operating within the town, city or village that it must withdraw from the Plan and the requirements and obligations of withdrawal as set forth herein. Payment by lump sum or in installments of the equitable share of the outstanding liability of such volunteer fire department(s) or volunteer ambulance workers organized and

RESOLUTION No. 57 OF 2013

PAGE 4 OF 5

operating within the withdrawing town, city or village must be made in accordance with the provision set forth herein above. All withdrawal agreements shall be subject to the approval of the Warren County Board of Supervisors.

C. APPORTIONMENT OF COSTS AND PAYMENTS

1. Each participant shall be liable to pay its proportionate share of the cost of participation in the Plan, including administrative costs and expenses as determined using the following experience based formula:

- The greater of (prior year plan administrative costs/number of participants) + ((total revenue – prior year plan administrative cost) x (participant claims total for the preceding 6½ years/total plan claims for 6½ years))

OR

- .35% of actual payroll for the year prior to the year assessments are being calculated.

D. RESERVE

1. There is hereby established for the Plan a Reserve Fund in an amount not to exceed Four Million Dollars (\$4,000,000.00). Such amount shall be accumulated by including in the annual estimate of expenses a sum not to exceed Fifty Thousand Dollars (\$50,000.00) and such additional amounts as the Warren County Board of Supervisors shall determine.

2. When the amount of the reserve is at the maximum, any amount expended therefrom shall be restored by including in the subsequent annual estimates a sum not to exceed Fifty Thousand Dollars (\$50,000.00).

3. The Administrator may at any time at their discretion expend monies in such reserve to pay any liability of the Plan.

E. EXCESS INSURANCE

The Administrator, upon authorization by the governing committee of the Warren County Board of Supervisors, may purchase excess or catastrophe insurance in such limits as deemed appropriate, the cost thereof to be paid from the funds of the Plan.

F. SAFETY PROGRAMS

Each participant shall develop and enforce a safety program or programs designed for the reasonable and adequate protection of the lives, health and safety of employees; and shall provide for use by employees of appliances and devices designed to minimize the possibility of injury or impairment of health.

*RESOLUTION No. 57 OF 2013*

*PAGE 5 OF 5*

G. COOPERATION OF PARTICIPANTS

Participants in the Plan shall cooperate with the Administrator by filing all required reports, by aiding in the investigation of claims, and by developing and enforcing safety programs and by furnishing any additional aid or information that may be required to carry out the provisions of the intent of the New York State Workers' Compensation Law.

H. PENALTIES

The Warren County Board of Supervisors may by Resolution expel a participant for failure to observe the rules and regulations adopted, or for any violation of the provisions of the Workers' Compensation Law; provided, however, that a participant shall be notified in writing, at least thirty (30) days prior to the effective date of expulsion; and further provided, that expulsion shall not relieve a participant from paying its share of the outstanding liabilities of the Plan at the date of expulsion.

SECTION 4. Binding Effect. Upon the effective date of this Local Law the rules and regulations for the administration of the Plan shall be applicable to and binding upon all then existing participants in the Plan and to all future participants upon admission to the Plan.

SECTION 5. Repealer. This Local Law shall repeal, supercede or, as appropriate, consolidate into this Local Law all prior Local Laws of Warren County concerning the rules and regulations for the administration of the Plan, including Local Law No. 4 of 1981, Local Law No. 2 of 1982, Local Law No. 3 of 1982, Local Law No. 4 of 1982, Local Law No. 1 of 1989, Local Law No. 2 of 1990, Local Law No. 5 of 1992, Local Law No. 3 of 1994, Local Law No. 4 of 1994, Local Law No. 3 of 1996, Local Law No. 5 of 1996, Local Law No. 4 of 1999, Local Law No. 3 of 2000, Local Law No. 8 of 2001, Local Law No. 3 of 2009, Local Law No. 6 of 2010, and Local Law No. 7 of 2010. This Local Law shall not amend, repeal or supercede Warren County Local Law No. 3 of 1981 or any Local Laws amending Warren County Local Law No. 3 of 1981.

SECTION 6. Severability. If any clause, sentence, paragraph, subdivision, section or part of this Local Law or the application thereof to any person, individual, corporation, firm, partnership, entity or circumstance shall be adjudged by any court of competent jurisdiction to be invalid or unconstitutional, such order or judgment shall not affect, impair or invalidate the remainder thereof, but shall be confined in its operation to the clause, sentence, paragraph, subdivision, section or part of this Local Law or in its application to the person, individual, corporation, firm, partnership entity or circumstance directly involved in the controversy in which order or judgment shall be rendered.

SECTION 7. Effective Date. This Local Law shall take effect immediately upon filing with the Secretary of State.

**SUPPORT SERVICES COMMITTEE AGENDA – INFORMATION TECHNOLOGY**

**May 30, 2014**

**Action Agenda/New Business**

1. Resolution to transfer \$3,000 from 1680.110 Salaries-Regular to 1680.470 Contract to cover remaining WEB development cost and future transition questions.
2. Resolution to amend contract with Jacob Hume to increase maximum by \$3,000 and extend date to 12/31/2014.  
Final May bill estimated between \$2,000 and \$2,300  
Remaining funds used as needed for consultation.

**RESOLUTION REQUEST FORM NO. 10**

**Request for Transfer of Funds**

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

**DEPARTMENT NAME:**Information Technology

**SIGNED:**

**DATE:** May 30, 2014

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
1680.110	Salaries Regular	1680.470	Contract	\$3,000.00

**Please state reason for transfers requested:** Cover last month of contracted WEB development and consulation for remainder of 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	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. 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: Information Technology**

**DATE: May 30, 2014**

- (a) Purpose of Request: **Amend contract with Jacob Hume**
- (b) Details: **Increase maximum by \$3,000 and extend authorization to 12/31/2014**
- (c) Previous Resolution Number: **186 of 2014**
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title\* and Amount: **1680.470 Contract**

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

\* as listed in budget and LOGOS