Social Services Committee
Warren County Department of Social Services
AGENDA
November 30, 2015

Committee Members: Supervisors Simpson, Wood, Sokol, Frasier, Strough, Vanselow and Seeber.

I. Committee meeting called to order by Chairman

II. Motion to approve minutes of prior Committee meeting

III. Action Agenda/New Business

1. **Resolution Request**:
   Request to renew the contract with agencies listed in Schedule "A" for Special Delinquency Prevention Programs.
   -Catholic Charities of Albany-Home Based Parent Education $3,393
   -Catholic Charities of Saratoga, Warren Washington Counties – Youth & Family Counseling $5,311
   Please see Attachment #1
   Rationale: The DSS collaborates with these agencies which provide essential community services.

2. **Resolution Request:**
   Request to renew contract with the Council for Prevention of Alcohol & Substance Abuse, Inc. for a Youth Court Program, $68,820.
   Please see Attachment #2
   Rationale: This agency provides services and programs for youth.

IV. Pending Item
   There are no pending items.

V. Information for Discussion/Review
   1. Countryside Adult Home Agenda – Deanna Park, Director
   2. Monthly Revenue & Expenditures and Overtime Report – Julie Montero, Fiscal Manager
      Please see Attachment #3

VI. Privilege of the Floor to discuss any additional items to come before the Committee

VII. Motion to Adjourn

Attachments:
1. Request to renew contracts with Agencies listed in Schedule "A"
2. Request to renew contract with Council For Prevention for Youth Court Program
3. Monthly Revenue & Expenditures and Overtime Reports

RESOLUTION REQUEST FORM NO. 4

Request for Extending, Rescinding or Amending Existing Contract

DEPARTMENT NAME: SOCIAL SERVICES

DATE: 11/30/15

(a) Purpose of Contract Change: Authorizing continuation of contractual relationships with agencies listed in Schedule "A" for Special Delinquency Prevention Programs.

(b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: 399 of 2013; 174 of 2015

(c) Name of Contractor: Catholic Charities of the Diocese of Albany; Catholic Charities of the Diocese of Albany, dba Catholic Charities of Saratoga, Warren and Washington Counties.

(d) Address of Contractor: See Schedule A

(e) Contractor's Contact Person and Telephone Number:

(f) Commencement Date of Extension: January 1, 2016

(g) Termination Date of Extension: December 31, 2016

(h) Payment Provisions:
- i) lump sum amount See Schedule A
- 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:

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

*as listed in budget and LOGOS

SCHEDULE A

COMMUNITY/AGENCY SUBMCONTRACTS
2016 SPECIAL DELINQUENCY PREVENTION RPOGRAMS (A.7312.470)

Sponsoring Agency Name/Address	Program Title	Amount
Catholic Charities of the Diocese of Albany 27 No. Main St. Albany, NY 12203	Homebased Parent Education	$3,393.00
Catholic Charities of the Diocese Of Albany dba Catholic Charities of Saratoga, Warren and Washington Counties 142 Regent St. Saratoga Springs, NY 12866	Youth & Family Counseling	$5,311.00

Expiration date for all contracts is **December 31, 2015**
All contracts are reimbursed 100% by NYS Office of Children & Family Services

RESOLUTION REQUEST FORM NO. 4

Request for Extending, Rescinding or Amending Existing Contract

DEPARTMENT NAME: SOCIAL SERVICES

DATE: 11/30/15

(a) Purpose of Contract Change: Authorizing extension of contractual relationship with Council for Prevention of Alcohol & Substance Abuse, Inc. for a Youth Court Program: $17,282 reimbursed by NYS Office of Children & Family Services (OCFS), and an additional $31,954 reimbursed by Supervision & Treatment Services for Juveniles Program (STSJP) funds, leaving $19,584 Local Share.

(b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: 131 of 2014, 173 of 2015

(c) Name of Contractor: Council for Prevention - Alcohol & Substance Abuse

(d) Address of Contractor: 10 LaCross St, Hudson Falls, NY 12839

(e) Contractor's Contact Person and Telephone Number:

(f) Commencement Date of Extension: January 1, 2016

(g) Termination Date of Extension: December 31, 2016

(h) Payment Provisions:
- i) lump sum amount $68,820.00
- 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:

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

*as listed in budget and LOGOS

BUDGET ANALYSIS

REVENUE AND EXPENDITURES FOR OCTOBER 2015

FUND(S): A

CODE(S): 6010, 6030, 6050, 6055, 6070, 6100, 6109, 6119, 6140, 6141, 6142, 7311, 7312, 7313

EXPENSES	2015 BUDGETED	OCT 2015 EXP	OCT 2014 EXP	2015 YTD ACTUAL	2014 Prior Year Totals
110 Salaries - Regular	$5,676,292.00	$406,501.06	$391,202.26	$4,271,844.34	$5,182,997.77
120 Salaries - Overtime	$85,222.00	$4,928.99	$5,720.98	$49,568.11	$71,676.63
130 Salaries - Part Time	$190,020.00	$18,110.91	$13,532.91	$161,616.94	$220,535.21
100's PERSONAL SERVICES Total	**$5,951,534.00**	**$429,540.96**	**$410,456.15**	**$4,483,029.39**	**$5,475,209.61**
200's EQUIPMENT	$39,018.24	$12,985.13	$1,352.90	$44,364.63	$15,611.11
400's CONTRACTUAL	$23,516,499.00	$1,638,474.32	$1,793,839.02	$16,987,439.59	$23,937,879.65
800's EMPLOYEE BENEFITS	$3,944,725.00	$286,736.39	$247,682.87	$3,028,996.80	$3,726,485.58
TOTALS	**$33,451,776.24**	**$2,367,736.80**	**$2,453,330.94**	**$24,543,830.41**	**$33,155,185.95**

REVENUES	2015 BUDGETED	OCT 2015 REVENUE	OCT 2014 REVENUE	2015 YTD ACTUAL	2014 Prior Year Totals
	$16,151,956.00	$580,250.87	$163,011.81	$12,341,511.11	$15,777,219.98

Warren County, NY

Expense Budget Performance Report

Fiscal Year to Date 10/31/15

Include Rollup Account and Rollup to Account

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year Total
Fund	**A - General**									
Department	**6010 - Social Services**									
	EXPENSE									
Personal Services										
110	Salaries - Regular	5,027,233.00	(60,000.00)	4,967,233.00	358,459.43	.00	3,758,473.69	1,208,759.31	76	4,560,141.07
120	Salaries - Overtime	49,222.00	.00	49,222.00	2,864.02	.00	33,155.00	16,067.00	67	50,891.73
130	Salaries - Part Time	26,361.00	60,000.00	86,361.00	4,934.80	.00	45,713.42	40,647.58	53	65,913.34
	Personal Services Totals	$5,102,816.00	$0.00	$5,102,816.00	$366,258.25	$0.00	$3,837,342.11	$1,265,473.89	75%	$4,676,946.14
Equipment										
210	Furniture/Furnishings	1,000.00	472.64	1,472.64	736.32	.00	736.32	736.32	50	.00
220	Office Equipment	5,000.00	40,715.60	45,715.60	12,248.81	.00	39,001.49	6,714.11	85	3,333.26
230	Automotive Equipment	.00	230.00	230.00	.00	.00	229.98	.02	100	.00
	Equipment Totals	$6,000.00	$41,418.24	$47,418.24	$12,985.13	$0.00	$39,967.79	$7,450.45	84%	$3,333.26
Contractual Expense										
410	Supplies	55,000.00	.00	55,000.00	1,947.76	2,181.67	36,056.82	16,761.51	70	59,367.34
411	Rent-Building/Property	564,547.00	.00	564,547.00	47,045.56	.00	517,501.16	47,045.84	92	564,546.94
418	Ins-General Liability	45,547.00	.00	45,547.00	.00	.00	37,640.48	7,906.52	83	42,311.11
422	Repair/Maint-Equipment	3,000.00	(186.85)	2,813.15	.00	.00	.00	2,813.15	0	170.00
423	Telephone	20,000.00	.00	20,000.00	1,598.08	.00	14,846.57	5,153.43	74	18,994.36
424	Postage	25,000.00	7,000.00	32,000.00	2,836.42	.00	25,972.41	6,027.59	81	33,446.97
426	Subscriptions	1,200.00	.00	1,200.00	.00	.00	406.64	793.36	34	299.00
427	Memberships & Dues	5,000.00	.00	5,000.00	(10.00)	.00	4,498.00	502.00	90	4,168.00
428	Data Processing & Internet Fees	3,600.00	186.85	3,786.85	314.00	942.00	2,844.85	.00	100	3,576.00
432	Special Project Supply	95,000.00	.00	95,000.00	339.00	.00	8,218.00	86,782.00	9	95,000.00
435	Medical Fees	2,000.00	.00	2,000.00	(278.54)	.00	(1,730.36)	3,730.36	-87	(427.84)
436	Advertising Fees	1,500.00	.00	1,500.00	.00	.00	223.80	1,276.20	15	1,335.07
437	Consulting Fees	3,000.00	(3,000.00)	.00	.00	.00	.00	.00	+++	.00
439	Misc Fees & Expenses	3,000.00	3,000.00	6,000.00	119.00	.00	3,793.96	2,206.04	63	3,951.77
440	Legal/Transcript Fees	7,000.00	.00	7,000.00	.00	.00	.00	7,000.00	0	9,080.08
441	Auto-Supplies & Repair	15,215.00	.00	15,215.00	1,100.28	.00	3,761.87	11,453.13	25	2,338.82
442	Automotive - Gas & Oil	15,000.00	(7,000.00)	8,000.00	537.14	.00	5,150.72	2,849.28	64	10,374.91
444	Travel/Education/Conference	18,000.00	.00	18,000.00	382.40	510.00	5,677.75	11,812.25	34	10,527.71
469	Other Payments/Contributions	5,000.00	.00	5,000.00	.00	200.00	800.00	4,000.00	20	3,675.00
470	Contract	380,800.00	(20,000.00)	360,800.00	40,507.05	22,675.02	190,074.53	148,050.45	59	322,007.45
	Contractual Expense Totals	$1,268,409.00	($20,000.00)	$1,248,409.00	$96,438.15	$26,508.69	$855,737.20	$366,163.11	71%	$1,184,742.69
Employee Benefits										
810	Retirement	869,315.00	.00	869,315.00	59,373.83	.00	668,951.05	200,363.95	77	879,436.31
830	Social Security	316,378.00	.00	316,378.00	21,266.68	.00	224,081.90	92,296.10	71	274,498.66
831	Medicare Contribution	73,989.00	.00	73,989.00	4,973.68	.00	52,406.19	21,582.81	71	64,197.35
860	Hospitalization	1,541,543.00	.00	1,541,543.00	122,862.53	.00	1,226,688.03	314,854.97	80	1,445,337.98
865	Dental Insurance	22,680.00	.00	22,680.00	1,792.00	.00	17,816.00	4,864.00	79	21,452.00

Expense Budget Performance Report

Fiscal Year to Date 10/31/15

Include Rollup Account and Rollup to Account

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year Total
Fund	**A - General**									
Department	**6010 - Social Services**									
	EXPENSE									
	Employee Benefits Totals	$2,823,905.00	$0.00	$2,823,905.00	$210,268.72	$0.00	$2,189,943.17	$633,961.83	78%	$2,684,922.30
Other Benefits										
840	Workmen's Compensation	57,479.00	.00	57,479.00	.00	.00	57,478.01	.99	100	43,057.70
850	Unemployment Insurance	37,000.00	.00	37,000.00	903.20	.00	2,079.20	34,920.80	6	23,298.20
855	Disability	6,000.00	.00	6,000.00	.00	.00	4,059.54	1,940.46	68	5,371.25
861	Retirees Hospitalization	424,160.00	.00	424,160.00	31,565.89	.00	319,563.99	104,596.01	75	394,714.99
862	EPO Co-Pay	.00	.00	.00	.00	.00	.00	.00	+++	1,140.00
	Other Benefits Totals	$524,639.00	$0.00	$524,639.00	$32,469.09	$0.00	$383,180.74	$141,458.26	73%	$467,582.14
	EXPENSE TOTALS	$9,725,769.00	$21,418.24	$9,747,187.24	$718,419.34	$26,508.69	$7,306,171.01	$2,414,507.54	75%	$9,017,526.53
	Department **6010 - Social Services** Totals	($9,725,769.00)	($21,418.24)	($9,747,187.24)	($718,419.34)	($26,508.69)	($7,306,171.01)	($2,414,507.54)	75%	($9,017,526.53)
Department	**6030 - Countryside Adult Home**									
	EXPENSE									
Personal Services										
110	Salaries - Regular	649,059.00	.00	649,059.00	48,041.63	.00	513,370.65	135,688.35	79	622,856.70
120	Salaries - Overtime	36,000.00	.00	36,000.00	2,064.97	.00	16,413.11	19,586.89	46	20,784.90
130	Salaries - Part Time	163,659.00	.00	163,659.00	13,176.11	.00	115,903.52	47,755.48	71	154,621.87
	Personal Services Totals	$848,718.00	$0.00	$848,718.00	$63,282.71	$0.00	$645,687.28	$203,030.72	76%	$798,263.47
Equipment										
210	Furniture/Furnishings	6,000.00	413.00	6,413.00	.00	3,049.40	3,246.79	116.81	98	10,132.00
220	Office Equipment	.00	.00	.00	.00	.00	.00	.00	+++	348.00
260	Other Equipment	400.00	777.00	1,177.00	.00	.00	1,150.05	26.95	98	1,797.85
270	Lawn & Landscaping	200.00	(200.00)	.00	.00	.00	.00	.00	+++	.00
	Equipment Totals	$6,600.00	$990.00	$7,590.00	$0.00	$3,049.40	$4,396.84	$143.76	98%	$12,277.85
Contractual Expense										
410	Supplies	35,000.00	(1,006.00)	33,994.00	1,350.54	12,233.99	17,521.14	4,238.87	88	28,296.35
413	Repair & Maint.-Bldg/Property	40,000.00	.00	40,000.00	982.18	7,387.86	12,585.97	20,026.17	50	30,352.21
415	Electricity	35,000.00	(400.00)	34,600.00	4,606.10	.00	19,715.18	14,884.82	57	24,753.46
416	Oil & Gas-Heating	50,000.00	.00	50,000.00	1,557.08	698.27	22,626.93	26,674.80	47	44,745.77
418	Ins-General Liability	8,500.00	138.00	8,638.00	.00	.00	8,637.87	.13	100	7,879.69
422	Repair/Maint-Equipment	1,500.00	.00	1,500.00	.00	.00	1,315.46	184.54	88	21.62
423	Telephone	3,500.00	.00	3,500.00	193.46	232.16	1,987.83	1,280.01	63	2,282.63
424	Postage	440.00	.00	440.00	7.83	.00	156.18	283.82	35	672.76
426	Subscriptions	250.00	16.00	266.00	.00	.00	265.20	.80	100	242.97
428	Data Processing & Internet Fees	1,250.00	.00	1,250.00	94.96	190.40	949.60	110.00	91	1,069.52
432	Special Project Supply	2,000.00	.00	2,000.00	.00	.00	224.00	1,776.00	11	409.50
434	Allowances	25,800.00	.00	25,800.00	1,550.00	.00	13,300.00	12,500.00	52	17,850.00
435	Medical Fees	3,200.00	.00	3,200.00	561.00	.00	1,506.00	1,694.00	47	3,147.67
436	Advertising Fees	1,000.00	.00	1,000.00	.00	.00	.00	1,000.00	0	.00

Warren County, NY

Expense Budget Performance Report

Fiscal Year to Date 10/31/15
Include Rollup Account and Rollup to Account

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year Total
Fund A - General										
Department	**6030 - Countryside Adult Home**									
	EXPENSE									
Contractual Expense										
437	Consulting Fees	17,500.00	.00	17,500.00	1,285.04	2,370.08	13,558.01	1,571.91	91	11,868.99
439	Misc Fees & Expenses	4,750.00	.00	4,750.00	160.00	.00	634.10	4,115.90	13	465.00
440	Legal/Transcript Fees	2,000.00	.00	2,000.00	.00	.00	.00	2,000.00	0	1,000.00
441	Auto-Supplies & Repair	3,000.00	.00	3,000.00	316.51	.00	1,785.66	1,214.34	60	2,117.07
442	Automotive - Gas & Oil	3,600.00	.00	3,600.00	66.08	.00	1,113.94	2,486.06	31	2,366.14
444	Travel/Education/Conference	1,500.00	400.00	1,900.00	240.00	.00	1,666.39	233.61	88	789.00
445	Foods	122,000.00	(138.00)	121,862.00	9,921.72	28,305.11	80,300.78	13,256.11	89	111,572.74
451	Medical Supply Expense	6,000.00	.00	6,000.00	32.23	2,992.18	1,602.78	1,405.04	77	4,430.89
453	Uniforms & Clothing	100.00	.00	100.00	.00	.00	.00	100.00	0	.00
470	Contract	35,000.00	.00	35,000.00	1,641.20	6,980.50	25,211.40	2,808.10	92	30,978.65
	Contractual Expense Totals	$402,890.00	($990.00)	$401,900.00	$24,565.93	$61,390.55	$226,664.42	$113,845.03	72%	$327,312.63
Employee Benefits										
810	Retirement	121,724.00	.00	121,724.00	9,251.29	.00	103,384.04	18,339.96	85	140,534.03
830	Social Security	52,617.00	.00	52,617.00	3,681.67	.00	37,652.27	14,964.73	72	46,703.58
831	Medicare Contribution	12,305.00	.00	12,305.00	860.99	.00	8,805.73	3,499.27	72	10,922.57
860	Hospitalization	276,899.00	.00	276,899.00	21,023.88	.00	208,877.72	68,021.28	75	254,020.39
865	Dental Insurance.	4,440.00	.00	4,440.00	332.00	.00	3,348.00	1,092.00	75	4,240.00
	Employee Benefits Totals	$467,985.00	$0.00	$467,985.00	$35,149.83	$0.00	$362,067.76	$105,917.24	77%	$456,420.57
Other Benefits										
840	Workmen's Compensation	5,041.00	.00	5,041.00	.00	.00	5,040.64	.36	100	3,601.14
850	Unemployment Insurance	6,000.00	.00	6,000.00	.00	.00	.00	6,000.00	0	4,002.40
855	Disability	3,606.00	.00	3,606.00	.00	.00	143.70	3,462.30	4	2,450.57
861	Retirees Hospitalization	95,577.00	.00	95,577.00	7,737.85	.00	77,511.79	18,065.21	81	91,328.44
	Other Benefits Totals	$110,224.00	$0.00	$110,224.00	$7,737.85	$0.00	$82,696.13	$27,527.87	75%	$101,382.55
	EXPENSE TOTALS	$1,836,417.00	$0.00	$1,836,417.00	$130,736.32	$64,439.95	$1,321,512.43	$450,464.62	75%	$1,695,657.07
Department	**6030 - Countryside Adult Home** Totals	($1,836,417.00)	$0.00	($1,836,417.00)	($130,736.32)	($64,439.95)	($1,321,512.43)	($450,464.62)	75%	($1,695,657.07)
Department	**6050 - Public Facil. For Children**									
	EXPENSE									
Contractual Expense										
469	Other Payments/Contributions	.00	.00	.00	.00	.00	.00	.00	+++	30,086.02
470	Contract	25,000.00	.00	25,000.00	.00	.00	.00	25,000.00	0	.00
	Contractual Expense Totals	$25,000.00	$0.00	$25,000.00	$0.00	$0.00	$0.00	$25,000.00	0%	$30,086.02
	EXPENSE TOTALS	$25,000.00	$0.00	$25,000.00	$0.00	$0.00	$0.00	$25,000.00	0%	$30,086.02
Department	**6050 - Public Facil. For Children** Totals	($25,000.00)	$0.00	($25,000.00)	$0.00	$0.00	$0.00	($25,000.00)	0%	($30,086.02)

Expense Budget Performance Report

Fiscal Year to Date 10/31/15
Include Rollup Account and Rollup to Account

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year Total
Fund	**A - General**									
Department	**6055 - Daycare**									
	EXPENSE									
Contractual Expense										
470	Contract	1,515,000.00	.00	1,515,000.00	113,137.42	.00	971,611.30	543,388.70	64	1,315,413.09
	Contractual Expense Totals	$1,515,000.00	$0.00	$1,515,000.00	$113,137.42	$0.00	$971,611.30	$543,388.70	64%	$1,315,413.09
	EXPENSE TOTALS	$1,515,000.00	$0.00	$1,515,000.00	$113,137.42	$0.00	$971,611.30	$543,388.70	64%	$1,315,413.09
	Department **6055 - Daycare** Totals	($1,515,000.00)	$0.00	($1,515,000.00)	($113,137.42)	$0.00	($971,611.30)	($543,388.70)	64%	($1,315,413.09)
Department	**6070 - Services for Recipients**									
	EXPENSE									
Contractual Expense										
470	Contract	315,000.00	.00	315,000.00	43,692.08	.00	225,118.28	89,881.72	71	323,415.12
	Contractual Expense Totals	$315,000.00	$0.00	$315,000.00	$43,692.08	$0.00	$225,118.28	$89,881.72	71%	$323,415.12
	EXPENSE TOTALS	$315,000.00	$0.00	$315,000.00	$43,692.08	$0.00	$225,118.28	$89,881.72	71%	$323,415.12
	Department **6070 - Services for Recipients** Totals	($315,000.00)	$0.00	($315,000.00)	($43,692.08)	$0.00	($225,118.28)	($89,881.72)	71%	($323,415.12)
Department	**6100 - Medicaid**									
	EXPENSE									
Contractual Expense										
470	Contract	13,001,536.00	.00	13,001,536.00	910,168.00	.00	9,739,522.00	3,262,014.00	75	13,989,058.50
	Contractual Expense Totals	$13,001,536.00	$0.00	$13,001,536.00	$910,168.00	$0.00	$9,739,522.00	$3,262,014.00	75%	$13,989,058.50
	EXPENSE TOTALS	$13,001,536.00	$0.00	$13,001,536.00	$910,168.00	$0.00	$9,739,522.00	$3,262,014.00	75%	$13,989,058.50
	Department **6100 - Medicaid** Totals	($13,001,536.00)	$0.00	($13,001,536.00)	($910,168.00)	$0.00	($9,739,522.00)	($3,262,014.00)	75%	($13,989,058.50)
Department	**6101 - Medical Assistance**									
	EXPENSE									
Contractual Expense										
470	Contract	100,000.00	(25,000.00)	75,000.00	580.81	.00	3,427.76	71,572.24	5	30,382.48
	Contractual Expense Totals	$100,000.00	($25,000.00)	$75,000.00	$580.81	$0.00	$3,427.76	$71,572.24	5%	$30,382.48
	EXPENSE TOTALS	$100,000.00	($25,000.00)	$75,000.00	$580.81	$0.00	$3,427.76	$71,572.24	5%	$30,382.48
	Department **6101 - Medical Assistance** Totals	($100,000.00)	$25,000.00	($75,000.00)	($580.81)	$0.00	($3,427.76)	($71,572.24)	5%	($30,382.48)
Department	**6109 - Aid To Dependent Children**									
	EXPENSE									
Contractual Expense										
470	Contract	2,050,000.00	.00	2,050,000.00	144,858.66	.00	1,553,204.38	496,795.62	76	2,155,461.84
	Contractual Expense Totals	$2,050,000.00	$0.00	$2,050,000.00	$144,858.66	$0.00	$1,553,204.38	$496,795.62	76%	$2,155,461.84
	EXPENSE TOTALS	$2,050,000.00	$0.00	$2,050,000.00	$144,858.66	$0.00	$1,553,204.38	$496,795.62	76%	$2,155,461.84
	Department **6109 - Aid To Dependent Children** Totals	($2,050,000.00)	$0.00	($2,050,000.00)	($144,858.66)	$0.00	($1,553,204.38)	($496,795.62)	76%	($2,155,461.84)

Expense Budget Performance Report

Fiscal Year to Date 10/31/15

Include Rollup Account and Rollup to Account

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year Total
Fund	**A - General**									
Department	**6119 - Child Care**									
	EXPENSE									
Contractual Expense										
470	Contract	3,600,000.00	.00	3,600,000.00	228,736.80	.00	2,413,564.50	1,186,435.50	67	3,410,682.38
	Contractual Expense Totals	$3,600,000.00	$0.00	$3,600,000.00	$228,736.80	$0.00	$2,413,564.50	$1,186,435.50	67%	$3,410,682.38
	EXPENSE TOTALS	$3,600,000.00	$0.00	$3,600,000.00	$228,736.80	$0.00	$2,413,564.50	$1,186,435.50	67%	$3,410,682.38
	Department **6119 - Child Care** Totals	($3,600,000.00)	$0.00	($3,600,000.00)	($228,736.80)	$0.00	($2,413,564.50)	($1,186,435.50)	67%	($3,410,682.38)
Department	**6140 - Home Relief**									
	EXPENSE									
Contractual Expense										
470	Contract	1,100,000.00	.00	1,100,000.00	75,778.65	.00	910,402.88	189,597.12	83	1,010,674.46
	Contractual Expense Totals	$1,100,000.00	$0.00	$1,100,000.00	$75,778.65	$0.00	$910,402.88	$189,597.12	83%	$1,010,674.46
	EXPENSE TOTALS	$1,100,000.00	$0.00	$1,100,000.00	$75,778.65	$0.00	$910,402.88	$189,597.12	83%	$1,010,674.46
	Department **6140 - Home Relief** Totals	($1,100,000.00)	$0.00	($1,100,000.00)	($75,778.65)	$0.00	($910,402.88)	($189,597.12)	83%	($1,010,674.46)
Department	**6141 - Fuel Crisis Assistance**									
	EXPENSE									
Contractual Expense										
470	Contract	30,000.00	.00	30,000.00	(20.09)	.00	(946.10)	30,946.10	-3	31,068.44
	Contractual Expense Totals	$30,000.00	$0.00	$30,000.00	($20.09)	$0.00	($946.10)	$30,946.10	-3%	$31,068.44
	EXPENSE TOTALS	$30,000.00	$0.00	$30,000.00	($20.09)	$0.00	($946.10)	$30,946.10	-3%	$31,068.44
	Department **6141 - Fuel Crisis Assistance** Totals	($30,000.00)	$0.00	($30,000.00)	$20.09	$0.00	$946.10	($30,946.10)	-3%	($31,068.44)
Department	**6142 - Emergency Aid For Adults**									
	EXPENSE									
Contractual Expense										
470	Contract	15,000.00	30,000.00	45,000.00	200.00	.00	42,075.15	2,924.85	94	21,171.80
	Contractual Expense Totals	$15,000.00	$30,000.00	$45,000.00	$200.00	$0.00	$42,075.15	$2,924.85	94%	$21,171.80
	EXPENSE TOTALS	$15,000.00	$30,000.00	$45,000.00	$200.00	$0.00	$42,075.15	$2,924.85	94%	$21,171.80
	Department **6142 - Emergency Aid For Adults** Totals	($15,000.00)	($30,000.00)	($45,000.00)	($200.00)	$0.00	($42,075.15)	($2,924.85)	94%	($21,171.80)
Department	**7310 - Youth Program 4-H Camp**									
	EXPENSE									
Contractual Expense										
470	Contract	25,000.00	.00	25,000.00	.00	12,500.00	12,500.00	.00	100	25,000.00
	Contractual Expense Totals	$25,000.00	$0.00	$25,000.00	$0.00	$12,500.00	$12,500.00	$0.00	100%	$25,000.00
	EXPENSE TOTALS	$25,000.00	$0.00	$25,000.00	$0.00	$12,500.00	$12,500.00	$0.00	100%	$25,000.00
	Department **7310 - Youth Program 4-H Camp** Totals	($25,000.00)	$0.00	($25,000.00)	$0.00	($12,500.00)	($12,500.00)	$0.00	100%	($25,000.00)
Department	**7311 - Youth Bureau**									
	EXPENSE									
Contractual Expense										
410	Supplies	100.00	.00	100.00	.00	.00	14.73	85.27	15	254.17

Warren County, NY

Expense Budget Performance Report

Fiscal Year to Date 10/31/15

Include Rollup Account and Rollup to Account

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year Total
Fund	**A - General**									
Department	**7311 - Youth Bureau**									
	EXPENSE									
Contractual Expense										
423	Telephone	200.00	.00	200.00	.00	.00	.00	200.00	0	.00
424	Postage	300.00	.00	300.00	14.82	.00	136.39	163.61	45	188.33
427	Memberships & Dues	.00	.00	.00	.00	.00	.00	.00	+++	50.00
444	Travel/Education/Conference	151.00	.00	151.00	.00	.00	.00	151.00	0	56.00
470	Contract	5,520.00	.00	5,520.00	322.00	3,496.00	2,024.00	.00	100	4,002.00
	Contractual Expense Totals	$6,271.00	$0.00	$6,271.00	$336.82	$3,496.00	$2,175.12	$599.88	90%	$4,550.50
Other Benefits										
861	Retirees Hospitalization	17,972.00	.00	17,972.00	1,110.90	.00	11,109.00	6,863.00	62	16,178.02
	Other Benefits Totals	$17,972.00	$0.00	$17,972.00	$1,110.90	$0.00	$11,109.00	$6,863.00	62%	$16,178.02
	EXPENSE TOTALS	$24,243.00	$0.00	$24,243.00	$1,447.72	$3,496.00	$13,284.12	$7,462.88	69%	$20,728.52
	Department **7311 - Youth Bureau** Totals	($24,243.00)	$0.00	($24,243.00)	($1,447.72)	($3,496.00)	($13,284.12)	($7,462.88)	69%	($20,728.52)
Department	**7312 - Special Delinquency Prev.**									
	EXPENSE									
Contractual Expense										
410	Supplies	128.00	64.00	192.00	.00	.00	.00	192.00	0	88.04
424	Postage	100.00	.00	100.00	1.09	.00	4.34	95.66	4	23.67
427	Memberships & Dues	200.00	26.00	226.00	.00	.00	226.00	.00	100	176.00
428	Data Processing & Internet Fees	90.00	(90.00)	.00	.00	.00	.00	.00	+++	.00
470	Contract	11,000.00	17,885.00	28,885.00	.00	27,950.00	.00	935.00	97	27,697.00
	Contractual Expense Totals	$11,518.00	$17,885.00	$29,403.00	$1.09	$27,950.00	$230.34	$1,222.66	96%	$27,984.71
	EXPENSE TOTALS	$11,518.00	$17,885.00	$29,403.00	$1.09	$27,950.00	$230.34	$1,222.66	96%	$27,984.71
	Department **7312 - Special Delinquency Prev.** Totals	($11,518.00)	($17,885.00)	($29,403.00)	($1.09)	($27,950.00)	($230.34)	($1,222.66)	96%	($27,984.71)
Department	**7313 - Youth Court**									
	EXPENSE									
Contractual Expense										
470	Contract	50,875.00	.00	50,875.00	.00	18,722.64	32,152.36	.00	100	50,874.99
	Contractual Expense Totals	$50,875.00	$0.00	$50,875.00	$0.00	$18,722.64	$32,152.36	$0.00	100%	$50,874.99
	EXPENSE TOTALS	$50,875.00	$0.00	$50,875.00	$0.00	$18,722.64	$32,152.36	$0.00	100%	$50,874.99
	Department **7313 - Youth Court** Totals	($50,875.00)	$0.00	($50,875.00)	$0.00	($18,722.64)	($32,152.36)	$0.00	100%	($50,874.99)
	Fund **A - General** Totals	$33,425,358.00	$44,303.24	$33,469,661.24	$2,367,736.80	$153,617.28	$24,543,830.41	$8,772,213.55		$33,155,185.95
	Grand Totals	$33,425,358.00	$44,303.24	$33,469,661.24	$2,367,736.80	$153,617.28	$24,543,830.41	$8,772,213.55		$33,155,185.95

Warren County, NY

Detail General Ledger Report

G/L Date Range 10/01/15 - 10/31/15
Exclude Sub Ledger Detail
Exclude Accounts with No Activity

G/L Date	Journal	Journal Type	Sub Ledger	Description/Project	Source	Reference	Debit Amount	Credit Amount	Actual Balance
G/L Account Number	**A 400.00 State&Federal,Social Services**								
								Balance To Date:	$1,986,919.40
10/27/2015	2015-00004891	JE	RA	Revenue Collection Payment Post	Collections			116,815.00	1,870,104.40
10/27/2015	2015-00004891	JE	RA	Revenue Collection Payment Post	Collections			1,613.00	1,868,491.40
10/27/2015	2015-00004891	JE	RA	Revenue Collection Payment Post	Collections			112,164.00	1,756,327.40
10/30/2015	2015-00004921	JE	GL	1-3/15 Treasury Offset Prog Cycles 1452-1511; BA016707	JE		326.00		1,756,653.40
10/30/2015	2015-00004921	JE	GL	4-6/15 Treasury Offset Prog Cycles 1512-1525; BA016707	JE		1,038.00		1,757,691.40
10/30/2015	2015-00004921	JE	GL	October 2015 FCBG payment; BA016707	JE		85,748.00		1,843,439.40
10/30/2015	2015-00004921	JE	GL	1-3/15 Lottery Intercept Program Payment; BA016707	JE		282.00		1,843,721.40
10/30/2015	2015-00004921	JE	GL	4-6/15 Local Share ASFA Chargeback; BA016707	JE			339.00	1,843,382.40
10/30/2015	2015-00004921	JE	GL	9/15 Social Services claims	JE		789,365.00		2,632,747.40
10/30/2015	2015-00004921	JE	GL	7/15 Social Services claims RF2 Supplemental 2	JE		79.00		2,632,826.40
10/30/2015	2015-00004921	JE	GL	8/15 Social Services claims RF2 Supplemental 1	JE			88.00	2,632,738.40
10/30/2015	2015-00004921	JE	GL	8/15 Social Services claims RF2 Supplemental 2	JE		69.00		2,632,807.40
10/30/2015	2015-00004921	JE	GL	9/15 Social Services claims RF2 Supplemental 1	JE		77.00		2,632,884.40
10/30/2015	2015-00005084	JE	RA	Revenue Collection Payment Post	Collections			251,161.00	2,381,723.40
					Month	**October 2015** Totals	$876,984.00	$482,180.00	$2,381,723.40
					Account	**State&Federal,Social Services** Totals	$876,984.00	$482,180.00	$2,381,723.40
G/L Account Number	**A.6010 1810 Administration**								
								Balance To Date:	($23,544.93)
10/14/2015	2015-00004629	JE	RA	Revenue Collection Payment Post	Collections			420.57	(23,965.50)
10/14/2015	2015-00004629	JE	RA	Revenue Collection Payment Post	Collections			197.50	(24,163.00)
					Month	**October 2015** Totals	$0.00	$618.07	($24,163.00)
					Account	**Administration** Totals	$0.00	$618.07	($24,163.00)
					Department	**Social Services** Totals	$0.00	$618.07	
G/L Account Number	**A.6030 1830 Repay - Adult Care, Pub Inst**								
								Balance To Date:	($477,264.58)
10/16/2015	2015-00004813	JE	AP	A/P Invoice Entry	Accounts Payable		570.00		(476,694.58)
10/21/2015	2015-00004769	JE	AP	A/P Invoice Entry	Accounts Payable		3,417.92		(473,276.66)
10/30/2015	2015-00005003	JE	RA	Revenue Collection Payment Post	Collections			18,349.05	(491,625.71)

Detail General Ledger Report

G/L Date Range 10/01/15 - 10/31/15
Exclude Sub Ledger Detail
Exclude Accounts with No Activity

G/L Date	Journal	Journal Type	Sub Ledger	Description/Project	Source	Reference	Debit Amount	Credit Amount	Actual Balance
G/L Account Number	**A.6030 1830 Repay - Adult Care, Pub Inst**							Balance To Date:	($477,264.58)
10/30/2015	2015-00005003	JE	RA	Revenue Collection Payment Post	Collections			22,987.90	(514,613.61)
					Month	**October 2015** Totals	$3,987.92	$41,336.95	($514,613.61)
					Account	**Repay - Adult Care, Pub Inst** Totals	$3,987.92	$41,336.95	($514,613.61)
					Department	**Countryside Adult Home** Totals	$3,987.92	$41,336.95	
G/L Account Number	**A.6055 1855 Repayments of Day Care**							Balance To Date:	($5,764.40)
10/30/2015	2015-00005003	JE	RA	Revenue Collection Payment Post	Collections			370.00	(6,134.40)
10/31/2015	2015-00005081	JE	GL	10/15 DSS Adjustments; s/b A.6109 1809 not A.6055 1855	Journal Entries		370.00		(5,764.40)
					Month	**October 2015** Totals	$370.00	$370.00	($5,764.40)
					Account	**Repayments of Day Care** Totals	$370.00	$370.00	($5,764.40)
					Department	**Daycare** Totals	$370.00	$370.00	
G/L Account Number	**A.6101 1801 Repay of Medical Assist**							Balance To Date:	($39,356.66)
10/14/2015	2015-00004629	JE	RA	Revenue Collection Payment Post	Collections			8,153.41	(47,510.07)
10/30/2015	2015-00004921	JE	GL	9/15 RF2 & RF2A; Medical Assistance	JE		21,550.00		(25,960.07)
10/30/2015	2015-00004921	JE	GL	9/15 RF2 & RF2A; Medical Assistance	JE		19,128.00		(6,832.07)
10/30/2015	2015-00004921	JE	GL	8/15 RF2 S1; Medical Assistance	JE			68.00	(6,900.07)
10/30/2015	2015-00005003	JE	RA	Revenue Collection Payment Post	Collections			14,350.97	(21,251.04)
					Month	**October 2015** Totals	$40,678.00	$22,572.38	($21,251.04)
					Account	**Repay of Medical Assist** Totals	$40,678.00	$22,572.38	($21,251.04)
					Department	**Medical Assistance** Totals	$40,678.00	$22,572.38	
G/L Account Number	**A.6109 1809 Repay of Aid to A.D.C.**							Balance To Date:	($210,465.09)
10/14/2015	2015-00004629	JE	RA	Revenue Collection Payment Post	Collections			13,084.75	(223,549.84)
10/14/2015	2015-00004629	JE	RA	Revenue Collection Payment Post	Collections			112.00	(223,661.84)
10/14/2015	2015-00004629	JE	RA	Revenue Collection Payment Post	Collections			823.74	(224,485.58)
10/30/2015	2015-00005003	JE	RA	Revenue Collection Payment Post	Collections			1,888.25	(226,373.83)
10/31/2015	2015-00005081	JE	GL	10/15 DSS Adjustments; s/b A.6109 1809 not A.6055 1855	Journal Entries			370.00	(226,743.83)

Detail General Ledger Report

G/L Date Range 10/01/15 - 10/31/15
Exclude Sub Ledger Detail
Exclude Accounts with No Activity

G/L Date	Journal	Journal Type	Sub Ledger	Description/Project	Source	Reference	Debit Amount	Credit Amount	Actual Balance
					Month	**October 2015** Totals	$0.00	$16,278.74	($226,743.83)
					Account	**Repay of Aid to A.D.C.** Totals	$0.00	$16,278.74	($226,743.83)
					Department	**Aid To Dependent Children** Totals	$0.00	$16,278.74	
G/L Account Number	**A.6119 1819 Repay of Child Care**							Balance To Date:	($210,299.14)
10/14/2015	2015-00004629	JE	RA	Revenue Collection Payment Post	Collections			3,528.24	(213,827.38)
10/30/2015	2015-00005003	JE	RA	Revenue Collection Payment Post	Collections			980.90	(214,808.28)
10/30/2015	2015-00005003	JE	RA	Revenue Collection Payment Post	Collections			126.00	(214,934.28)
					Month	**October 2015** Totals	$0.00	$4,635.14	($214,934.28)
					Account	**Repay of Child Care** Totals	$0.00	$4,635.14	($214,934.28)
					Department	**Child Care** Totals	$0.00	$4,635.14	
G/L Account Number	**A.6140 1840 Repay of Home Relief**							Balance To Date:	($155,086.91)
10/08/2015	2015-00004541	JE	RA	Revenue Collection Payment Post	Collections			5,454.00	(160,540.91)
10/14/2015	2015-00004629	JE	RA	Revenue Collection Payment Post	Collections			876.94	(161,417.85)
10/20/2015	2015-00004730	JE	RA	Revenue Collection Payment Post	Collections			138.00	(161,555.85)
10/30/2015	2015-00004921	JE	GL	1-3/15 Lottery Intercept Program Payment; BA016707	JE			282.00	(161,837.85)
10/30/2015	2015-00005003	JE	RA	Revenue Collection Payment Post	Collections			3,488.81	(165,326.66)
					Month	**October 2015** Totals	$0.00	$10,239.75	($165,326.66)
					Account	**Repay of Home Relief** Totals	$0.00	$10,239.75	($165,326.66)
					Department	**Home Relief** Totals	$0.00	$10,239.75	
G/L Account Number	**A.6141 1841 Repay of Home Energy Asst**							Balance To Date:	($58,977.96)
10/30/2015	2015-00005003	JE	RA	Revenue Collection Payment Post	Collections			2,019.84	(60,997.80)
					Month	**October 2015** Totals	$0.00	$2,019.84	($60,997.80)
					Account	**Repay of Home Energy Asst** Totals	$0.00	$2,019.84	($60,997.80)
					Department	**Fuel Crisis Assistance** Totals	$0.00	$2,019.84	
					Fund	**General** Totals	$922,019.92	$580,250.87	
						Grand Totals	$922,019.92	$580,250.87	

Social Services - Overtime Report - Comparison 2014/2015

Week End	2014 OT	2015 OT	Reason	CPS (After Hrs/OnCall)	Foster Care	APS/ CASA	Preventive	Medicaid	Chronic Care	TA/ Employ	FS/ HEAP	Training	CPS	Res Acctg	Fraud	Admin/ Yth Ct
01/11/15	86.79	57.00	CPS-HV,NR, safety assessment/FC-Meeting/CC - backlog	47.55	0.50				7.00				1.95			
01/25/15	126.92	32.98	CPS - HV, safety assessments	29.90									3.08			
02/08/15	142.87	67.93	CPS-HV,NR, abuse invest,court/MED-backlog/FC-HV,court	45.88	2.50			5.00					14.55			
02/22/15	73.55	47.28	CPS-NR,HV/FC-Prison visit/Training - Chronic Care workers	26.43	11.00							7.10	2.75			
03/08/15	96.82	78.99	CPS- NR,HV,Removal/FC-Backlog/Prev-Respite/TA Training	34.17	11.40		2.42					25.90	5.10			
03/22/15	72.44	105.28	CPS-NR,HV/FC-Prison visit,Backlog/Training - TA	27.18	56.10							18.40	3.60			
04/05/15	79.86	49.89	CPS-NR,Removal,SA/FC-Backlog/TA-w/Client	22.09	20.60					0.50			6.70			
04/19/15	54.42	47.75	CPS-NR,SA,HV/FC-Court,Home Study, Backlog/Prev-Emerg Placem	31.98	9.40		1.92						4.45			
05/03/15	57.53	42.37	CPS-NR,Safety Assessment/FC-2 staff - court ordered prison visit	29.17	10.90								2.30			
05/17/15	56.91	57.67	CPS--NR,HV,Notes,closing investigations	34.57									23.10			
05/31/15	69.25	66.32	CPS-HV,Court/FC-Prison Visit,Mtg/Training-New Fraud Investigator	46.72	8.50							9.50	1.70			
06/14/15	92.39	59.68	CPS - Backlog, notes	47.68									12.00			
06/28/15	55.40	48.45	CPS-Backlog,notes/FC-child to Albany Med	35.50	2.20								10.75			
07/12/15	31.09	28.04	CPS-NR,Ssafety Assessment, Coverage/FC-Court	23.94	1.00								3.10			
07/26/15	65.14	33.81	CPS- Safety Assessment/FC- Home Study/Preventive-Investigation	27.28	4.20		0.33						2.00			
08/09/15	46.72	49.68	CPS-NR,HV,Assessment/Preventive - Court	44.01			0.37					2.50	2.80			
08/23/15	33.22	30.34	FC-Court,Child appt,phone calls/Preventive- emergency	27.14	2.20		1.00									
09/06/15	90.95	43.40	CPS - NR, Safety Assessment, Removal	41.40									2.00			
09/20/15	97.05	31.70	CPS- Safety assessment, FC- Emergency, drug testing	26.42	1.48							3.10	0.70			
10/04/15	83.85	50.92	CPS - NR, Safety Assessment, Removal/FC-Case management	28.97	2.60								19.35			
10/18/15	52.27	37.82	CPS-NR,Assessment, Notes/FC-Court, Case management	27.82	4.3								5.70			
11/01/15	42.58	21.90	CPS-NR,Assessment, Notes, HV/FC-Court, Transport/Coverage	14.85	1.87								5.18			
11/15/15	43.56	75.57	CPS-HV,Safety Assess,Court,FC-Home Study,Foster Parent Training	39.12	20.30								16.15			
12/06/15	21.17															
12/13/15	54.85															
12/27/15	36.16															
Totals	1763.76	1164.77		759.77	171.05	0.00	6.04	5.00	7.00	0.50	0.00	66.50	149.01	0.00	0.00	0.00

SOCIAL SERVICES COMMITTEE
COUNTRYSIDE ADULT HOME
AGENDA
11/30/15

Committee Members: Simpson, Wood, Sokol, Frasier, Strough, Vanselow, Seeber

I. Committee meeting called to order by Chairman
II. Motion to approve minutes of prior Committee meeting
III. Action Agenda/New Business
   1. **Request to:** Enter into contract with Mahoney Notify Inc, to install door holders on all resident room doors and tie into existing system, at a cost of $9,972.00.
      Rationale: This is a safety measure that DOH encouraged us to do. It will ensure that the resident bedroom doors automatically shut when the fire alarm system is activated to help prevent the spread of fire/smoke.
IV. Referral/Pending Items
V. Information for Discussion/Review
   1. Overtime Report for 2015
VI. Privilege of the Floor to discuss any additional items to come before the Committee
VI. Motion to adjourn

Attachments
Overtime Report for 2015

(List attachments by number relating to the above cited regular items)

Date:11/30/15 Countryside Adult Home Dept. 42.00

ID#	NAME	1st shift	2nd shift	3rd shift	1st O.T.	2nd O.T.	3rd O.T.	Time Used
10976	CONNIE ANDERSON	62	3.5					
12081	MARYTENE BARRETT		15					
9614	JERRI BELANGER	80			8			11/19-11/24 20V
12026	SHIRLEY COLLINS	80			4.5			11/27 8P
10033	WENDY DECKER	24	56			8		
5657	LORI DURKIN	80						
10430	BRANDI FRENCH	50	28	2	3	3		11/17 8S; 11/21 8V; 11/27 8FH; 11/28 8V
12730	DERICK GOODNESS	80			3	3		11/20 1P
7448	TRACY GRAVES	80						11/24-11/28 32V
7276	JUDITH HALL	80			8			11/19-11/20 16V
12634	LAURIE HESS	45						
12177	CHERIE HOLCOMB	0						
12842	CARY KITCHEN	47	11.3	16				
8428	AMY MCBYRNE	80						
12392	HELEN MINER		16					
7700	TAMMY MOON			80			8	11/22-11/29 40V
9766	TAMMY MOREHOUSE	80			5.5			
8261	SHARON MORRISON	70		10	1		1	
8280	WANDA OLDEN	70		10	5.5		1	11/23 8P; 11/29 8V
10676	DEANNA PARK	80						11/16-11/20 40V; 11/27 8V
12554	BRIANA PERRY			70			8	
4891	FAYE PERRY	24						
12419	LYNN POTASH	40	8	24				
10662	JENNIFER QUARTERS	66	17	5				
12447	EMMA SHAMBO			80				
10216	JAMIE SMITH		70			8		
12186	MARGARET STEVENS	53						
10188	SHELLIE THOMPSON							11/29 8V
	TOTALS	**1209**	**206.3**	**297**	**38.5**	**22**	**18**	
	SHIRLEY COLLINS WORKED OOT AS A COOK: 11/21/15 & 11/28/15(10:30-6:30PM)							
	DERRICK GOODNESS WORKED OOT AS A COOK: 11/23/15, 11/27/15, & 11/29/15 (10:30-6:30PM)							

Pay Period:11/16/15-11/29/15

Mahoney Notify-Plus Inc.

P.O. Box 767 Glens Falls NY 12801
518-793-7788 fax 518-793-0602
www.mahoneynotify-plus.com

COUNTRYSIDE ADULT HOME
353 SCHROON RIVER ROAD
WARRENSBURGH, NY 12885

518/793-3436
DEANNA PARK
parkd@warrencountyny.gov

INSTALLATION OF THE FOLLOWING DOOR HOLDERS IN 30 ROOMS WITH IDENTICAL LAYOUT

30-INTERLOGIX ES-DHS1224C SURFACE MOUNT 12/24V DOOR HOLDERS
4- ALTRONIX 300 ULX POWER SUPPLIES

PURCHASED & INSTALLED AT $9,137.00*

OPTIONAL ADDITION OF TWO DOOR HOLDERS

2- ES-DHS1224C INTERLOGIX SURFACE 12/24V MOUNT DOOR HOLDERS
AT THE TWO ACTIVITY DOORS NEAR THE NURSES STATION

PURCHASED & INSTALLED AT $835.00

*PROPOSAL IS CALCULATED AT NYS PREVAILING WAGE RATES

THIS PROPOSAL INCLUDES OUR EXTENDED ONE YEAR PARTS AND LABOR WARRANTY

THIS QUOTATION DOES NOT INCLUDE SALES TAX IF APPLICABLE. THE ACCOMPANYING TERMS AND CONDITIONS ARE MADE A PART OF THE QUOTATION.

CUSTOMER WILL PROVIDE DEDICATED OUTLET FOR ALARM SYSTEM . ANY ALTERATIONS OR ADDITIONS MADE TO THE ABOVE QUOTED SYSTEM WILL BE INVOICED AT AN ADDITIONAL FEE. OWNER IS RESPONSIBLE FOR NOTIFICATION OF PLENUM CEILING

AGREED AND ACCEPTED: _____ DATE:_____
PROPOSAL DATE:11/30/15

BY: TIM SOKOL, SALES CONSULTANT
MAHONEY NOTIFY-PLUS INC.

TERMS AND CONDITIONS

The Alarm Company assumes no liability for interruption of services due to strikes, riots, floods, fires, interruptions in telephone service,, internet, acts of God, or any causes beyond the control of the Alarm Company, and the Alarm Company is not required to supply service, to the Subscriber while such interruptions exist.

The Subscriber agrees that all repair service to the Alarm System caused by improper use of the Alarm System, misuse, abuse, vandalism, lightning, or any other act of God are billable regardless of the repair options chosen by the Subscriber. The Alarm Company, upon receipt of an alarm signal from the Subscriber's premises shall make every reasonable effort to notify the police or fire department having jurisdiction, unless there is just cause to assume that an emergency condition does not exist; and the Alarm Company shall make a reasonable effort to notify the Subscriber or his designated representative by telephone. The Subscriber will review and update contact names and numbers regularly.

Upon the Subscriber's failure to pay any sums due the Alarm Company under this Agreement, or upon premature cancellation of service by the Subscriber the Alarm Company reserve the right to terminate its obligations under this Agreement and remove any of the Alarm Company owned equipment, wiring and apparatus from the Subscriber's premises upon written notice to the Subscriber. The Alarm Company will have no obligation to repair or redecorate any portion of the Subscriber'

Mahoney Notify-Plus Inc.
P.O. Box 767 Glens Falls NY 12801
518-793-7788 fax 518-793-0602
www.mahoneynotify-plus.com

premises due to removal of the Alarm Company's system upon termination. At such time, all charges incurred under the terms of this Agreement, up to the cancellation date, shall immediately become due and payable. In addition, the parties agree that it would be very difficult, if not impossible, to ascertain actual damages for any breach of this Agreement by the Subscriber, and the parties agree that the Subscriber shall immediately pay to the Alarm Company, upon any breach, or upon premature cancellation of service by the Subscriber, as and for liquidated damages, the sum of seventy-five percent (75%) of any charges remaining to be paid under the terms and life of this contract. The parties further agree that the Subscriber shall pay all court costs, collection fees and reasonable attorney's fees of one hundred percent (100%) of all monies remaining to be paid under this Agreement, should the Alarm Company have to place this contract in the hands of any attorney for collection.

The Subscriber will not permit any person or persons, unauthorized by the Alarm Company, to alter, remove, or tamper with any system equipment and will safeguard said equipment against loss and damage during the term of this Agreement. The Subscriber shall not permit any device. contrivance or apparatus to be attached to the lines, wires, Instruments or equipment at such System, except by the authorized agents of the Alarm Company, without the written permission of the Alarm Company.

Limitation of liability. It is understood and agreed that the Alarm Company or Its agents, assigns, employees, or independent contractors providing portions of the service, for the Subscriber (Including, but not limited to. signal carriers, telephone companies, municipal agencies. answering service, etc.) all hereinafter referred to as "Other are not an Insurer; that insurance. if any, shall be obtained by the Subscriber; that the payments provided for herein are based solely on the value of the service as set forth herein and are unrelated to the value of the Subscriber's property or the property of others located on the Subscriber's premises: that the Alarm Company and Others make no guarantee or warranty, including any Implied warranty of merchantability or fitness that the equipment or services supplied will avert or prevent occurrences or the consequences there from which the system or services is designed to detect or avert. The Subscriber acknowledges that it is impractical and extremely difficult to fix the actual damages, if any, which may approximately result from the Alarm Company or Others' active or passive negligence, or from a failure to perform any of the obligations herein, or the failure of the system to properly operate with resulting loss to the Subscriber because of, among other things:

(a) The uncertain amount or value of the Subscriber's property or the property of others kept on the premises which may be lost, stolen, destroyed, damaged or otherwise affected by occurrences which the System or service is designed to detect or avert;

(b) The uncertainty of the response time of any police or fire department, should the police or fire department be dispatched as a result of a signal being received or an audible device sounding;

(c) The inability to ascertain what portion, if any, of any loss which would be approximately caused by the Alarm Company or Others' failure to perform or by failure of its equipment to operate;

(d) The nature of the service to be performed by the Alarm Company and Others.

The Subscriber understands and agrees that if the Alarm Company or Others should be found liable for personal injury or property loss or damage due from a failure of the Alarm Company or Others to perform any of the obligations herein, including but not limited to installation, repair service, monitoring or service or the failure of the System or equipment in any respect whatsoever, the Alarm Company or Others' liability shall be limited to a sum equal to the total of six (6) monthly payments or Two Hundred Fifty ($250.00) Dollars, whichever is greater, and this liability shall be exclusive; and that the provision of this Section shall apply if loss or damage, irrespective of cause or origin, results directly or indirectly to persons or property, from performance or non-performance of the obligations imposed by this contract, or from negligence, active or otherwise, of the Alarm Company or Others. No suit or action shall be brought against the Alarm Company more than one (1) year after the accrual of the cause of action therefore.

In the event that the Subscriber wishes the Alarm Company or Others to assume greater liability, the Subscriber may, as a matter of right, obtain from the Alarm Company a higher limit by paying an additional amount proportioned to the increase in damages, but such additional obligation shall in no way be interpreted to hold the Alarm Company or Others as insurers. This limitation of liability covers all of the Alarm Company equipment and services at all Subscriber locations.

INDEMNIFICATION When the Subscriber ordinarily has the property of others in his custody, or the System extends to protect the other persons or the property of others, the Subscriber agrees to and shall indemnify, save, defend and hold harmless the Alarm Company and Others for and against all claims brought by parties other than the parties to this Agreement. This provision shall apply to all Claims regardless of cause. Including the Alarm Company or Others' performance or failure to perform and including defects in product design, installation, repair service, monitoring, operation or non-operation of the System, whether based upon negligence, active or passive, express or implied contract or warranty, contribution or Indemnification or strict or product liability, on the part of the Alarm Company or Others; but this provision shall not apply to claims for loss or damage solely and directly caused by an employee of the Alarm Company or Others while on the Subscribers premises. The Subscriber agrees to indemnify the Alarm Company against, defend and hold the Alarm Company harmless from any action for subrogation which may be brought against the Alarm Company by any insurer or insurance company or its agents or assigns including the payment of all damages, expenses, costs and attorney's fees.

All verbal or written communication between the parties which occurred prior to the date of this Agreement are merged into the terms of this Agreement and the entire Agreement of the parties is expressed herein above, and no verbal understanding or agreement shall altar change or modify the terms and provisions of this Agreement The Subscriber is not relying on any advice or advertisement of the Alarm Company. In the event that any provision of this Agreement is found to be unenforceable, all other terms shall remain in full force and affect. It is understood and agreed that if there is any conflict between this Agreement and the Subscribers' purchase order, or any other document, this Agreement will govern whether such purchase order or other document is executed prior or subsequent to this Agreement The Alarm Company may assign this Agreement without prior notice or consent of the Subscriber. However, the Subscriber may not assign this Agreement unless such assignment shall be consented to in writing by the Alarm Company.

The parties agree that this contract is executed and becomes in full force and effect only upon an officer of the Alarm Company signing a copy of the Agreement and that the contract is executed In Warren County, New York. The parties further agree that venue shall be proper in Warren County, New York should any portion of this contract have to be legally enforced.

It the Subscriber moves its residence or place of business, then the Subscriber is entitled to alarm service at this new location upon the payment of reasonable costs incurred transferring the Alarm System to the new location. In addition, the Subscriber agrees to be liable for any increase in monthly charges occasioned by such a move. The remaining terms of the Agreement will remain in full force and affect and the Subscriber will continue to be liable for the remaining period under the terms of this Service Agreement.