

SUPPORT SERVICES COMMITTEE
CLERK OF THE BOARD
AGENDA
DECEMBER 2, 2015

Committee Members: Supervisors Vanselow, McDevitt, Taylor, Frasier, Wood, Brock and Seeber

- I. Committee called to order by Supervisor Vanselow
- II. Motion to approve the minutes of the prior meeting - *October 23, 2015*
- III. Action Agenda Items:
 1. Request for transfer of funds totaling \$1,926 to purchase new chairs for staff, as well as to purchase a new electronic time stamp. Staff have been complaining that chairs are uncomfortable and deteriorating; our electronic time stamp, which provides accurate, official and indisputable record, is beyond repair.
- IV. Referrals/Pending Items:
 1. Clerk's Office authorized to complete abbreviated Committee meeting minutes on a trial basis - Committee to determine whether to continue abbreviated minutes or return to full version in order to identify whether vacant position in the Clerk's Office should be filled on a full or part-time basis. (10.02.15)
- V. Discussion Items:

None.
- VI. Privilege of the Floor to discuss any additional items to come before the Committee
- VII. Motion to adjourn

Attachments:

1. *Request for transfer of funds and supporting documentation.*

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: AMANDA ALLEN, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

DEPARTMENT NAME: Clerk-Legislative Board

SIGNED: 

DATE: 12.02.15

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1040 110	Clerk-Legislative Board, Salaries-Regular	A.1040 210	Clerk-Legislative Board, Furniture/Furnishings	\$1,284.00
A.1040 110	Clerk-Legislative Board, Salaries-Regular	A.1040 220	Clerk-Legislative Board, Office Equipment	\$642.00

Please state reason for transfers requested:
For the purchase of new chairs for staff and an electronic time stamp

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.

CHARLIE'S OFFICE FURNITURE, INC.

5 HIGHLAND AVE.
QUEENSBURY, NY 12804

Phone: 518-793-2435 alyce@charliesofficefurniture.com
Fax: 518-793-2529 charliesofficefurniture.com

Quote

QUO 3324
11/20/2015

Page: 1

Prepared for: WARRENCOPU

WARREN COUNTY MUNICIPAL CENTER
1340 STATE ROUTE 9
LAKE GEORGE, NY 12845

Due Date:

Job:

TAG: CLERK OF THE BOARD

Other Info:

Contact: SAMANTHA HOGAN

Phone: 518-761-6535 **Fax:** 518-000-0000 **Cell:**

Email: hogans@warrencountyny.gov

Req. By:

Ship Via: UPS

Terms: NET 30

Qty	UM	Item	Description	Price	Total
			STATE CONTRACT PRICING ISSUE PURCHASE ORDER TO :		
			RAYNOR MARKETING 525 HEMPSTEAD TURNPIKE WEST HEMPSTEAD, NY 11552 PC # 66320		
			C/O CHARLIE'S OFFICE FURNITURE		
4	EA	EUROTECH	MFHB9SL - BLACK - MULTI FUNCTION WITH RATCHET BACK, SEAT DEPTH ADJUSTMENT . HIGH BACK TASK CHAIR	267.50	1070.00
1			INSIDE DELIVERY AND ASSEMBLY	214.00	214.00

Thank you for the opportunity to earn your business.
Special order items cannot be cancelled or returned.
Pricing is based on quantities quoted.
Prices quoted are valid for 30 Days.

Subtotal: \$1,284.00

S&H: \$0.00

Tax: \$0.00

Total: \$1,284.00



Time Masters

1-800-960-3735

Quote

Date	Quote #
11/18/2015	ES15111801

3235 San Fernando Rd. #1D
 Los Angeles, CA 90065

Name / Address
Samantha Hogan Warren County Board of Supervisors 1340 State Rt 9 Lake George, Ny 12845

Rep	Project
LA	

Item	Description	Qty	U/M	Cost	Total
RP-Arl-e	Rapidprint Arl-e (Automatic time and date with digital clock)	1		575.00	575.00T
RP-ENG3LA	Engraving 3 Lines (Upper Plate) text is always centered RECEIVED WARREN COUNTY BOARD OF SUPERVISORS	1		39.00	39.00T
Shipping	Shipping Charge (UPS Ground) estimate Please note that Engraved Plates are custom made, and take two weeks to make. Therefore, you must allow three weeks, more or less for delivery. Out-of-state sale, exempt from sales tax	1		28.00	28.00
				0.00%	0.00
			Total		\$642.00

RESOLUTION REQUEST FORM NO. 13

Request to Increase or Decrease Salary of Non-Union Position

DEPARTMENT NAME: Clerk-Legislative Board

DATE: December 2, 2015

- (a) Employee Name, Title and Employee No.: **Secretary to the Clerk of the Board (vacant)**
- (b) Current Annual **Base** Salary (and Grade if Applicable): **\$34,000**
- (c) Former Annual **Base** Salary (and Grade if Applicable): **\$37,000**
- (d) Effective Date for Salary Change:* **December 21, 2015**
*Please do not backdate request unless the purpose is to correct an error.
- (e) If This is a Request for a Salary Increase, Where are Funds in the Budget for this Position? List Budget Code (with title), Object Code (with title), and Amount:
- (f) Justification of Request:
Position is vacant, seeking to reduce compensation to starting salary amount which is currently \$34,000 before filling.

RESOLUTION REQUEST FORM NO. 12

Schedule "A"

NOTICE OF INTENT TO FILL VACANT POSITION

This notice of intent is filed whenever a department head plans to fill an *existing* funded position in their budget that is vacated due to a retirement, resignation, termination or promotion. This notice may not be used for requests to create a *new* position. For complete instructions on the procedure to be followed, see the reverse of this form.

DEPARTMENT HEAD COMPLETES THIS SECTION

Department: **Clerk-Legislative Board**

Payroll Dept. No: **3.00**

Title of Position: **Secretary to the Clerk of the Board** Base Salary of Position: **\$34,000** Grade: **n/a**

Filling at Step # (If Known): Request to Backfill Due to Promotion: Yes No

Budget code and title: **A.1040 110, Clerk-Legislative Board, Salaries-Regular** Union Non-Union

This position is vacated due to: Retirement Resignation Termination Promotion Other

Employee No.: **12431** Is this position mandated? Yes No Is the position reimbursable? Yes No

Source of reimbursement: Federal % State % Other %

CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

Competitive-active eligible list Competitive-no list (*hiring would be provisional*) Non-Competitive Other _____

Actual Impact to Budget Report will be provided monthly by Human Resources Director.

Candidate's qualifications must be approved by Personnel Officer prior to hiring.

Human Resources Director has approved this form when initialed. _____

COUNTY ADMINISTRATOR COMPLETES THIS SECTION

The Administrator has no objection to the filling of the vacancy.

The Administrator objects to the filling of the vacancy.

Administrator Signature _____ Date _____

BUDGET OFFICER COMPLETES THIS SECTION

The Budget Officer has no objection to the filling of the vacancy.

The Budget Officer objects to the filling of the vacancy.

Budget Officer Signature _____ Date _____

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee _____

The committee has no objection to the filling of the vacancy.

The committee objects to the filling of the vacancy.

In the case of an emergency, Committee Chair has no objection to the filling of the vacancy.

In the case of an emergency, Committee Chair objects to the filling of the vacancy.

Ranking Committee Member Signature _____ Date _____