

**Public Safety Committee
Sheriff's Committee Agenda
01-25-2016**

Committee Members: Wood, Dickinson, Girard, Frasier, Brock, Seeber, Simpson, Vanselow, Montesi, Braymer, MacDonald

I. Committee meeting called to order by Chairman

II. Motion to approve minutes of prior committee meeting

III. Action Agenda

- A. Request resolution to move \$2,154.00 from fiscal year 2015 to 2016 in A.3110 410. This money amounts to donation from the public specifically made to K-9 care and equipment.
- B. Request resolution to move \$20,000.00 from the 2014 SLETPP Grant from fiscal year 2015 to 2016, in A.3110.4028 260 Law Enforcement Other Equipment.
- C. Request resolution to move \$293,952.13 from H360.95550 5031 Interfund Transfers (Radio System Capital Project)
- D. Request resolution to transfer \$756.00 from Contingency Funds to a.3110 455 to purchase equipment, supplies to comply with Safety Exposure Plan.
- E. Request resolution to Reclassify Position, eliminate Civil Law Enforcement Officer #1 and create Patrol Officer position. Increase in the budget by \$4,016.00
- F. Request permission to send Communication Officer Priest and Communication Officer Harrington to Emergency Medical Dispatch Training Ft. Edward. Cost is \$790.00
- G. Request permission to send Patrol Officer Lopez and Patrol Officer Geisler to Human Factors in Traffic Crash Reconstruction, in Albany NY. Cost is \$1,650.00
- H. Request permission to send Patrol Officer Glenn and Patrol Officer C. Howse to Property and Evidence Room Management Training, in Rochester NY. Cost is \$460.56
- I. Request permission to send Major LaFarr, Patrol Officer J. Howse and Senior Account Clerk J. Smith to Phase 1 and Phase 2 Basic Civil School, in Albany NY. Cost is \$1,200.00

IV. Referral / Pending Items

V. Topics for Discussion

- A. Filling of a Patrol Officer position due to a promotion. Savings to the budget is \$14,623.00
- B. Filling of a Patrol Sergeant position due to a promotion. Impact is budget neutral.
- C. Filling of an Investigator position due to a resignation. Increase in the budget by \$4,587.00
- D. Filling of a Civil Sergeant position due to a retirement. Impact is budget neutral.
- E. Filling of a Senior Account Clerk position due to a retirement. Savings to the budget is \$7,946.91
- F. Filling of (5) Correction Officer positions due to (3) resignations and (2) promotions. Savings to the budget is \$49,692.30
- G. Filling of (2) Correction Sergeant positions due (1) new staffing position and (1) resignation. Impact is budget neutral.
- H. Glens Falls Police Consolidation

VI. Motion to adjourn

Attachments:

- #1. Resolution form #7 / Request for Transfer of Funds (K-9)
- #2. Resolution form #7 / Request for Transfer of Funds (2014 SLETPP)
- #3. Resolution form #7 / Request for Transfer of Funds (Radio Upgrade Capital Project)
- #4. Resolution form #10 / Request for Transfer of Funds (Safety Exposure Plan)
- #5. Resolution form #14 / Request to Reclassify Position (Patrol Officer / Civil LE Officer)
- #6. Authorization to Attend Meeting (EMD Training)
- #7. Authorization to Attend Meeting (Human Factors Accident Reconstruction)
- #8. Authorization to Attend Meeting (Property and Evidence Room Management)
- #9. Authorization to Attend Meeting (Basic Civil School Phase 1 & 2)

RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

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

DEPARTMENT NAME: Sheriff

DATE: January 25, 2016

- (a) **Purpose of Amendment:** Amend the County Budget to increase revenue to reflect monies being transferred from K-9 Gifts / Donations 2015 Budget.

- (b) **Appropriation Code, Object Code, Full Title and Amount:**
A.3110 410 \$2,154.00

- (c) **Revenue Code (with title), and Amount:**
A.3110 2711 \$2,154.00

*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: January 25, 2016

(a) **Purpose of Amendment:** Amend the County Budget to increase revenue to reflect monies being transferred from 2014 SLETPP grant.

(b) **Appropriation Code, Object Code, Full Title and Amount:**
A.3110.4028 260 Law Enforcement Other Equipment \$20,000.00

(c) **Revenue Code (with title), and Amount:**
A.3110.4028 4381 NY State Terrorism Prevention Program \$20,000.00

*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: January 25, 2016

- (a) **Purpose of Amendment:** Amend the County Budget to increase revenue to reflect monies being transferred from Communications Radio Upgrade Capital Project.

- (b) **Appropriation Code, Object Code, Full Title and Amount:**
H360.9550 5031 Interfund Transfers \$293,952.13

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

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

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

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

DEPARTMENT NAME: Sheriff's Office

SIGNED:



UNDERSHERIFF

DATE: 01/11/2016

<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.3110 455	Sheriff Law Enforcement Safety Equipment	\$756.00

Please state reason for transfer request: Purchase safety equipment for Law Enforcement to comply with Safety Exposure Plan

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

RESOLUTION REQUEST FORM NO. 14

Request to Reclassify Position

DEPARTMENT NAME: Warren County Sheriff's Office

DATE: 01-25-2016

- (a) Title of Reclassified Position: **Patrol Officer**

- (b) Annual Salary of Reclassified Position (and Grade if Applicable):*
*(This should be the Base Salary for the position if it is being filled by a **new** employee, or the salary, including longevities, for any **existing** employee who is filling the position. **\$66,001.00**)

- (c) Title and Employee Number of Position to be Deleted: **Civil Law Enforcement Officer #1**

- (d) Annual Salary of Position to be Deleted (and Grade if Applicable):*
*(This should be the Base Salary for the position if it is being filled by a **new** employee, or the salary, including longevities, for any **existing** employee who is filling the position. **\$61,983.00**)

- (e) Effective Date:* **February 22, 2016**
*Please do not backdate unless the purpose is to correct an error.

- (f) Where are the Funds in the Budget for this Position? List Budget Code, Object Code, Full Title and Amount: **A.3110 110**

- (g) Has Personnel Officer Reviewed and Approved of the New Position Title?:*
*This is necessary **BEFORE** bringing the request to committees. **Yes**

Authorization To Attend Meeting or Convention

Check One:

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

The Public Safety Committee hereby authorizes Communication Officer Priest and Communication Officer Harrington
(committee) (name)

To attend Emergency Medical Dispatch training
(name of meeting or organization)

At Ft. Edward, NY
(address)

On 12/08/2015 - 12/10/2015. Mode of Transportation to be used Sheriff's Office 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.

For Overnight Travel

- Room rate \$ _____ GSA Rate \$ _____
 Meal costs – GSA per diem rate \$ _____
(see www.gsa.gov)

Date: 12/3/15 Signature [Signature]
(department head)

Date: 1/26/16 Signature [Signature]
(Committee Chairman)

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 A Fleet Vehicle

Filing Instructions:

1. Original with voucher to Auditor
2. Copy to Frank Morehouse if fleet vehicle is requested
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 commissioner of Administrative and Fiscal Services if credit card will be used.

Course Registration

Registration Information

Host Agency	Non-Host Agency	No Agency Affiliation
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Course Summary

Course Number	11805	Host	Washington County - Office of Emergency Medicine
Course Name	Host Adv EMD	Location	Washington County Department of Public Safety
Course Fee	\$395 per attendee.	Address	383 Broadway - Building B Fort Edward, NY 12828
Refresher Fee	\$99 per attendee.		
Day 1	12/8/2015	Time	08:00 AM - 05:00 PM
Day 2	12/9/2015	Time	08:00 AM - 05:00 PM
Day 3	12/10/2015	Time	08:00 AM - 05:00 PM

Agency Information

* Required Field

* Agency Name

Agency Id (if known)

* Contact

* Email

* Office Phone EXT

* Address

Address Line 2

* City

* State or Province

* Postal Code

* Country

Attendee Personal Information

* Required Field

Add

* First Name	Middle Name	* Last Name	* Email	Prior PDC Training	IAED Member Number	Refresher Course	Refresher Date (s)
<input type="text"/>							

Your registration is missing some required information.

Refresher Information

Courses HomeLegalTerms Of UsePrivacy PolicyTrademarksSite Map

© 2015 Priority Dispatch Corp.

Date: 12/22/2015



INVOICE

Attn: Accounting Department
110 South Regent Street, Suite 500
Salt Lake City, UT 84111
(801) 363-9127 * (801) 363-9144 fax
(800) 363-9127 toll-free

No. 123387

Customer Id: 1302

Bill To: Warren County Sheriff's Office
1400 State Route 9
Lake George, NY 12845

For: Warren County Sheriff's Office
1400 State Route 9
Lake George, NY 12845

Phone: Fax: 518-743-2509

Sales Contact:
Payment Method: Purchase Order

Base license: 00000A08BD
Payment Terms: Net 30 Days

Course No.11805 : Fort Edward, NY Advanced EMD Certification 12.2 (12/8/2015 - 12/10/2015)

Qty	Description	Unit Price	Extended Price
1	Certification Course Registrant (Medical - Standard - North American English) Materials, tuition and certification Warren County Sheriff's Dept. / Priest, Justin	\$395.00	\$395.00
1	Certification Course Registrant (Medical - Standard - North American English) Materials, tuition and certification Warren County Sheriff's Dept. / Harrington, Eric	\$395.00	\$395.00
		Sub-Total:	\$790.00
		Tax:	\$0.00
		Shipping & Handling:	\$0.00
		Total:	\$790.00
		Amount due this invoice:	\$790.00

Please pay this invoice in US Dollars. Make checks payable to Priority Dispatch Corporation.

"To lead the creation of meaningful change in public safety and health."

Authorization To Attend Meeting or Convention

Check One:

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

The Public Safety Committee hereby authorizes PO Lopez and PO Geisler
(committee) (name)

To attend Human Factors in Traffic Crash Reconstruction
(name of meeting or organization)

At NYSP Academy, Albany NY
(address)

On 01-11-2016 - 01-15-2016. Mode of Transportation to be used Sheriff's Office 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.

For Overnight Travel

- Room rate \$ _____ GSA Rate \$ _____
 Meal costs – GSA per diem rate \$ _____
(see www.gsa.gov)

Date: 12/24/15 Signature [Signature]
(department head)

Date: 1/16/16 Signature [Signature]
(Committee Chairman)

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 A Fleet Vehicle

Filing Instructions:

1. Original with voucher to Auditor
2. Copy to Frank Morehouse if fleet vehicle is requested
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4. Copy to Purchasing with Purchase Order, if required.
5. Copy to commissioner of Administrative and Fiscal Services if credit card will be used.



Human Factors in Traffic Crash Reconstruction

(40 Hours)

While many crash investigation courses focus on the interpretation of physical evidence to determine "how" a collision occurred, this course will examine a variety of human factors to determine "why" a collision occurred.

This course utilizes lectures, discussions, in-class demonstrations and outside field exercises to give you an appreciation for the importance of human factors in explaining collision causation. You will gain an understanding of how frail human evidence is and why the ability to interpret and analyze physical evidence is critical to the success of any collision investigator.

In addition to the driver, vehicle and roadway characteristics that must be considered in an investigation, this course also addresses the nature of perception and reaction, the factors affecting the investigator's choice of perception-reaction values as well as eyewitness reliability.

Topics include:

- The nature of the driving task
- Factors affecting driving performance, such as age, alcohol/drug use, fatigue, divided attention, driver distraction, and many others
- Human vision/perception and how we see anything in the driving environment
- The nature of driver perception and reaction and how to assign times
- Day vs. night
- Computerized perception-reaction time estimation
- Driver looking behavior
- The value and reliability of eyewitness evidence
- Eyewitness evidence versus physical evidence
- Important vehicle and roadway factors that should be considered

Prerequisite: You must have completed, at a minimum, IPTM's *At-Scene Traffic Crash/Traffic Homicide Investigation* course or its equivalent.

Audience: Law enforcement and private traffic crash investigators, claims adjusters, engineers, attorneys, safety officers, military investigative personnel, animators and graphic designers

Course Fee: \$825

REGISTRATION AND FEES

Effective January 15, 2015, full payment must accompany all registrations. You may register online at www.iptm.org and pay with your Visa, MasterCard, Discover or American Express credit card, or you may download a registration form and mail it to IPTM with a check.

CANCELLATION/REFUND POLICY

Complete the Cancellation Request Form and return it to IPTM. No telephone cancellations will be accepted. A 20% administrative fee will be assessed to all refunds if the cancellation request is received within 7 days of the course start date. In lieu of a refund, student substitutions can be made or a credit can be issued for a future course. No refunds will be given for no-shows.

**To register for this course online,
please visit our website at:
www.iptm.org**

COURSE CONFIRMATIONS

A minimum number of registrations must be received for a class to run as scheduled. When the minimum criterion has been met, written confirmation will be mailed, faxed, or emailed to you.

Please do not make airline reservations until you receive written notification confirming that the course will run as scheduled.

TRANSPORTATION AND LODGING

Most locations are served by several major airlines. Ground transportation, food and lodging are the responsibility of the student. However, hotels in the listed areas offer a special rate to IPTM program participants. For more information, please visit our website at www.iptm.org or call us at (904) 620-IPTM.

CONTINUING EDUCATION UNITS



This *Human Factors in Traffic Crash Reconstruction* course is eligible for 40 ACTAR CEUs. IPTM Continuing Education Units (CEUs) are also available. Please call us at (904) 620-IPTM for details.



Institute of Police Technology and Management

University of North Florida

Registration Form

CONTACT INFORMATION

First Name Joshua Day Phone 518-743-2500
Middle Initial M. Student Fax Number 518-743-2519
Last Name Lopez Student Email josuha.lopez@sheriff.co.warren.ny.us
Address Warren County Sheriff's Office 1400 State Route 9
Address 2 _____
Zip Code 12845
City Lake George
State New York

Americans with Disabilities Act Program Accessibility:
Individuals who require reasonable accommodation in order to participate must notify the registrar at (904) 620-IPTM at least five working days prior to the class.

PERSONAL INFORMATION

Occupation (Rank) Patrol Officer
Employer (Agency Name) Warren County Sheriff's Office

COURSE INFORMATION

Course Title: Human Factors in Traffic Crash Reconstruction
Course Dates: 01-11-2016 - 01-15-2016
Course Location: New York State Police Academy - Building #24
Course Fee*: \$825.00

** Effective January 15, 2015*

Full payment must accompany all registrations!

Please enclose a check and return it with your registration.

**Make checks payable to
Institute of Police Technology and Management**

Please do not make airline reservations until you receive written notification confirming that the course will run as scheduled.

CANCELLATION/REFUND POLICY:

Complete the Cancellation Request Form found at www.iptm.org and return it to IPTM. No telephone cancellations will be accepted. A 20% administrative fee will be assessed to all refunds if the cancellation request is received within 7 days of the course start date. In lieu of a refund, student substitutions can be made or a credit can be issued for a future course. No refunds will be given for no-shows.

REGISTERING PERSON'S INFORMATION (If different than student)

Registering Person's Name C. Shawn Lamouree
Phone Number: 518-743-2515
Registering Person's Email shawn.lamouree@sheriff.co.warren.ny.us
Registering Person's Title Undersheriff

Return to: Institute of Police Technology and Management/University of North Florida
12000 Alumni Drive • Jacksonville, Florida 32224-2678
Phone: (904) 620-IPTM • Fax: (904) 620-2453 • E-mail: info@iptm.org



Institute of Police Technology and Management

University of North Florida

Registration Form

CONTACT INFORMATION

First Name Charles Day Phone 518-743-2500
Middle Initial B. Student Fax Number 518-743-2519
Last Name Geisler Student Email charles.geisler@sheriff.co.warren.ny.us
Address Warren County Sheriff's Office 1400 State Route 9
Address 2 _____
Zip Code 12845
City Lake George
State New York

Americans with Disabilities Act Program Accessibility:
Individuals who require reasonable accommodation in order to participate must notify the registrar at (904) 620-IPTM at least five working days prior to the class.

PERSONAL INFORMATION

Occupation (Rank) Patrol Officer
Employer (Agency Name) Warren County Sheriff's Office

COURSE INFORMATION

Course Title: Human Factors in Traffic Crash Reconstruction
Course Dates: 01-11-2016 - 01-15-2016
Course Location: New York State Police Academy - Building #24
Course Fee*: \$825.00

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REGISTERING PERSON'S INFORMATION (If different than student)

Registering Person's Name C. Shawn Lamouree
Phone Number: 518-743-2515
Registering Person's Email shawn.lamouree@sheriff.co.warren.ny.us
Registering Person's Title Undersheriff

Return to: Institute of Police Technology and Management/University of North Florida
12000 Alumni Drive • Jacksonville, Florida 32224-2678
Phone: (904) 620-IPTM • Fax: (904) 620-2453 • E-mail: info@iptm.org

Lamouree, C. Shawn

From: Lamouree, C. Shawn
Sent: Monday, December 21, 2015 4:25 PM
To: 'info@iptm.org'
Cc: Corsones, Lee G.; Bartlett, Ralph J.
Subject: Human Factors Albany NY
Attachments: regformLopez.pd.pdf; regformGeisler.pd.pdf

To Whom It May Concern,

I have attached the registration forms for Charles Geisler and Joshua Lopez, to attend training in Albany NY. Credit Card information has already been provided over the phone.

Best Regards,

Shawn



C. Shawn Lamouree
Undersheriff
Warren County Sheriff's Office
1400 State Route 9
Lake George NY 12845
(518) 743-2500
(518) 743-2515

Authorization To Attend Meeting or Convention

Check One:

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

The Public Safety Committee hereby authorizes PO Glenn and PO C. Howse
(committee) (name)

To attend Property / Evidence Room Management
(name of meeting or organization)

At Monroe County NY
(address)

On 12-14-2015 - 12-15-2015. Mode of Transportation to be used Sheriff's Office 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.

For Overnight Travel

- Room rate \$ _____ GSA Rate \$230
 Meal costs – GSA per diem rate \$ _____
(see www.gsa.gov)

Date: 12/3/15 Signature [Signature]
(department head)

Date: 1/7/16 Signature [Signature]
(Committee Chairman)

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 A Fleet Vehicle

Filing Instructions:

1. Original with voucher to Auditor
2. Copy to Frank Morehouse if fleet vehicle is requested
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 commissioner of Administrative and Fiscal Services if credit card will be used.

The NYS Division of Criminal Justice Services periodically provides specialized training for law enforcement. Over the past several years, property and evidence room management has increasingly attracted attention. The safe and secure storage of property and evidence should be among the major priorities for any law enforcement agency. Therefore, the Office of Public Safety will be presenting a Property/Evidence Room Management course in **Monroe County on December 14-15, 2015.**

This course is intended to provide instruction and awareness of the most essential topics for an effective and efficient system for the management and storage of property and evidence by law enforcement agencies. It is designed to enhance the knowledge of managers, law enforcement officers, as well as civilians employed by law enforcement agencies. The training provides information in several topical areas of property and evidence room management including:

- Staffing and ethics
- Access and security
- Evidence custody
- Storage of property and evidence
- Policies and procedures
- Inspections, audits and inventories
- Purging and disposition of property and evidence

There is no course fee to attend the above listed training dates. Due to the hands-on nature of the training, seats are limited. Therefore, you must receive confirmation on attendance. Please complete the course application and have it sent no later than two weeks prior to the start of the course. For your convenience it may be submitted via email by utilizing the "Submit by Email" radio button on the course application form. The application may be downloaded by clicking "[here](#)." If you are not currently connected to the internet, you may go online at a later time to any of the above listed dates on the DCJS training calendar <http://calendar.dcjs.state.ny.us/> and click on the link there. For individuals that do not have email capability, the registrations may be faxed to 518-457-0145.

Directions to the training site and additional course information will be included in your confirmation notice. If you have any questions regarding these trainings, please contact

Senior Training Technician Tim Adamczak at tim.adamczak@dcjs.ny.gov or by telephone at (518) 457-1245.

[Property Evidence Room Management Announcement October 2015.pdf](#)
[Property Evidence Room Management Application December 2015.pdf](#)

###

This message was sent by NYS Division of Criminal Justice Services criminal justice e-mail directory DCJS Contact. If you would like to update your information, enroll another user or discontinue receiving emails from DCJS Contact altogether, please [manage your preferences or unsubscribe](#).

This is a message from NYS Division of Criminal Justice Services

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Authorization To Attend Meeting or Convention

Check One:

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

The Public Safety Committee hereby authorizes James LaFarr, John Howse, Jen Smith
(committee) (name)

To attend Phase 1 and 2 basic civil school
(name of meeting or organization)

At NYS Sheriff's Assoc. Albany NY
(address)

On 4/11-15 & 5/16-20. Mode of Transportation to be used 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.

For Overnight Travel

- Room rate \$ _____ GSA Rate \$ _____
 Meal costs – GSA per diem rate \$ _____
(see www.gsa.gov)

Date: 1/15/16 Signature [Signature]
(department head)

Date: 1/25/16 Signature [Signature]
(Committee Chairman)

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 A Fleet Vehicle

Filing Instructions:

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2. Copy to Frank Morehouse if fleet vehicle is requested
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 commissioner of Administrative and Fiscal Services if credit card will be used.

Corsones, Lee G.

From: Girard, William
Sent: Thursday, January 14, 2016 12:35 PM
To: Corsones, Lee G.
Subject: FW: 2016 civil schools

From: thomas mitchell [mailto:tmitchellnyssa@gmail.com]
Sent: Thursday, January 14, 2016 12:07 PM
Subject: Fwd: 2016 civil schools

\$200 P.P. per class

Sheriffs, Undersheriffs , Civil Division Supervisors

The Sheriffs' Association Institute will again offer our Phase 1 and Phase 2 basic civil schools to all Sheriff's offices. Both schools will be conducted at our office, and students who need lodging will stay at the Albany Hilton, just a few blocks from our office. These schools fill up quickly, so please get your registrations in as soon as possible. In Phase 1, we cover the basics: intro to civil, service of process, income and property executions, and evictions. In Phase 2, we cover in detail more complicated civil matters, including civil arrests, Family Court process, real property sales, orders of seizure, orders of attachment, and bookkeeping issues. This year we will again have our top instructors participating and they will include in their presentations information on new laws and cases decided in the last few years.

Registration fees have been kept at the same amount as last year, as we know that many counties have limited training budgets. These schools will not be offered again in

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, so please consider sending your civil personnel to these programs. Registration fees include lodging (either double or single occupancy), parking at the hotel, a copy of the CPLR for each student, coffee, soda and breakfast snacks. Students are on their own for lunch and dinner. Our classroom at the Association office can accommodate 25 students comfortably (we will squeeze a few more in if needed).

You can register online for the schools at these links:

[Register with the Institute Here for Phase 1, April 11-15, 2016](#)

Register with the Institute Here for Phase 2, May 16-20, 2016

Thomas A. Mitchell
Counsel
New York State Sheriffs' Association
(518) 434-9091
(518) 441-7353 [cell]
(518) 434-9093 [fax]
tmitchellnyssa@gmail.com

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: Sheriff Payroll Dept. No.: 30.00

Title of Position: Civil LE Officer #1 Base Salary of Position: \$ 37,324.50 Grade:

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

Budget code and title: A.3110 Union Non-Union

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

Employee No: 4119 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 Changing *Paul*
to Patrol Officer Title, we will eliminate Civil LE Officer #1. *Reclassification*

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

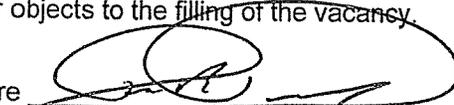
Candidate's qualifications must be approved by Personnel Officer prior to hiring.

Human Resources Director has approved this form when initialed. *1-4-16*

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

1/22/16

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 *Frank E. Thomas*

Date

1/25/16

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee *Criminal Justice & Public Safety*

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 *Walter M Wood*

Date

1/25/16