

# FINANCE, PERSONNEL AND HIGHER EDUCATION COMMITTEE

## AGENDA

**JUNE 3, 2016**

***DRAFT AGENDA - SUBJECT TO CHANGE***

***Committee Members: Conover, Seeber, Sokol, Simpson, Merlino, Dickinson, Girard, Frasier, Beaty, McDevitt and Braymer.***

- I. Committee meeting called to order by Chairman.
- II. Motion to approve minutes of prior Committee meetings.
- III. Privilege of the floor
  
- IV. **Action Agenda**
  - 1) **Privilege of the floor to any SUNY Adirondack representatives wishing to address the Committee.**
  - 2) **Request for transfers of funds as attached for Committee approval.**
  - 3) **Items to be Discussed by the Human Resources Director:**
    - A) Review of report on tracking of vacancies filled.
    - B) Discussion on RFP for Health Insurance Broker services.
  - 4) **Request from the County Treasurer:**  
To establish a reserve account for Westmount legacy costs.
  - 5) **Referrals from the County Facilities Committee:**  
***Airport -***
    - A) Request to authorize the County Treasurer to close Capital Project H242, *Rehab Fisher House*, and return estimated the estimated cash balance of \$15,000 to the General Fund.
    - B) Request to authorize the County Treasurer to close Capital Project H337, *Edge Light Installation*, and return the estimated cash balance of \$1,250 to A.892.00, *Airport Reserve*.
    - C) Request to amend the 2016 County Budget in the total amount of \$15,000 and transfer funds from the closing of Capital Project H242, *Rehab Fisher House*, to Budget Code A.1325 5031, *Interfund Transfers*, to be used for Capital Project H348, *Airport Equipment Building Repairs*.
    - D) Request to increase Capital Project H348, *Airport Equipment Building Repairs*, in the amount of \$15,000.
  - 6) **Referrals from the Criminal Justice & Public Safety Committee:**  
***Office of Emergency Services -***
    - A) Request to amend the County Budget in the amount of \$60,000 to reflect the receipt of FY16 State Homeland Security Program grant funds.  
***Sheriff's Office -***
    - B) Request to amend the County Budget in the amount of \$20,000 to reflect the receipt of 2016 SLETPP (*State Law Enforcement Terrorism Prevention Program*) grant funds.
    - C) Request to close Capital Project H317, *Sheriff Vehicle Purchase Fund*, and return the estimated remaining funds of \$3,734.50 to the Debt Service Fund.
  - 7) **Referrals from the Economic Growth & Development Committee:**  
***Planning & Community Development -***
    - A) Request to create and fill the position of Office Specialist (Temporary) effective June 17, 2016 which will be used for one week to train a new staff member before the current staff leaves for a new position with the Sheriff's Office.
    - B) Request to create and fill the new position of Senior Planner, *Grade 18, Annual Base Salary \$42,837*, effective July 1, 2016. A source of funding is needed to cover the 2016 costs of this position as it is not included in the current budget; it has been noted that State funds may provide up to 50% reimbursement for the position.

***Continued***

8) **Referrals from the Health, Human & Social Services Committee:**

***Countryside Adult Home -***

A) Request for a Contingent Fund transfer in the amount of \$28,391 to fund the purchase and installation of a new boiler for Countryside Adult Home.

***Employment & Training -***

B) Request to amend the 2016 County Budget in the amount of \$632,849 to reflect the receipt of Federal Workforce Investment and Opportunity Act funds for the 2016 Program year.

C) Request to amend the 2016 County Budget in the amount of \$85,703 to reflect the receipt of State TANF (*Temporary Assistance for Needy Families*) funding for the Summer Youth Program.

D) Request to amend the 2016 County Budget in the amount of \$11,517 to reflect the receipt of Federal Trade Adjustment Act Funding as reimbursement for costs associated with the training of four dislocated workers.

***Mental Health -***

E) Request to amend the 2016 County Budget in the amount of \$4,486 to reflect the receipt of State funding to cover the increasing cost of health and workers' compensation insurance.

***Public Health -***

F) Request to amend the Table of Organization and Salary Schedule to indicate that the Long Term Care Coordinator Supervisor Nurse position and its association salary are 100% funded within the Certified Home Health Agency Program. *Please note - this item was not reviewed and approved by the Health Services Committee as the Public Health division did not meet - the item was added to the agenda with authorization by Health, Human & Social Services Committee Chairman Sokol.*

***Veterans' Services -***

G) Request to approve payout to the Director of Veterans' Services to compensate for 31.5 hours of unused vacation time accrued in 2015.

9) **Referrals from Park Operations & Management Committee:**

A) Request to appropriate funding in the amount of \$315 from Budget Code A691.07, *Deferred Revenue Gaslight Village Parking Fees*, to Budget Code A.1625 470, *Gaslight Village Property*, to reimburse the Village of Lake George for various maintenance expenses at the Charles R. Wood Park Festival Space.

B) Request from Mayor Blais to authorize refund to Dave Ehmann the \$500 deposit submitted for an event scheduled for the Festival Commons which was subsequently cancelled.

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

***DPW -***

Request to amend the Table of Organization and Salary Schedule to increase the salary of the Assistant to the Superintendent of Public Works from \$40,251.75 to \$42,751.75 effective June 17, 2016 in order to include the stipend traditionally given to the Administrative Deputy of Superintendent of Public Works as per the direction of the County Attorney and Personnel Officer.

11) **Referrals from the Support Services Committee:**

***County Clerk/DMV-***

A) Request to amend the Table of Organization and Salary Schedule to reclassify the position of Sr. Account Clerk, *Grade 7, Annual Base Salary \$40,232*, to Principle Account Clerk, *Grade 10, Annual Base Salary \$44,451*, due to a change in the duties and responsibilities.

***Information Technology -***

B) Request to appropriate \$38,160 from the Computer Reserve Fund, *Budget Code A.895*, for the purchase of computers for Public Health, Planning and the Sheriff's Office.

12) **Referral from the Tourism & Occupancy Tax Coordination Committee:**

***Tourism -***

Request to authorize appropriation of funds from the Occupancy Tax Reserve, A.881, to Budget Code A.6417 470, *Tourism-Occupancy, Contract*, for maintenance of the Festival Commons website. This item is currently under review by the County Attorney who will provide an update.

13) **Requests/Items to be Discussed by the County Administrator staff:**

- A) Journal Report of transfers approved by County Administrator staff since the last meeting.
- B) Request to close Capital Project H315, *Abatement and Demolition Co Annex*, and return remaining funds in the amount of \$29,548.24 to the Debt Services Fund.

V. **Pending Items:**

***Finance -***

- 1) Referral from Support Services Committee requesting the Finance Committee to consider taking action early in 2016 to restore \$65,000 in requested funding removed from the Board of Elections 2016 Budget. (12.02.15) **Update: Committee decided to delay further discussion on this matter until after the Primary Elections in June. (02.29.16)**

***Personnel -***

- 1) Proposed Resolution No. 146 of 2016, *concerning salary adjustments for Deputy Department Heads when filling in for a Department Head vacancy*, was tabled at the March 18<sup>th</sup> Board Meeting and referred back to the Finance, Personnel & Higher Education Committee for review and revision.

***Higher Education -***

No items this month.

VI. **Vacancies Approved for Filling by Oversight Committee:**

***County Clerk - Recording Clerk PT, Grade 7, Annual Base Salary \$30,959 (pro-rated to 1,000 hours at \$14.88 per hour), due to resignation.***

***Planning - Office Specialist, Grade 7, Annual Base Salary \$30,959, due to resignation***

***Sheriff - Senior Account Clerk #4, Annual Base Salary \$36,151.09 due to retirement***

***Social Services - Caseworker #27, Grade 16, Annual Base Salary \$39,979, due to resignation***

***Caseworker #29, Grade 16, Annual Base Salary \$39,979, due to termination***

***Social Welfare Examiner #39, Grade 8, Annual Base Salary \$32,238, due to resignation***

***Intake Clerk (HEAP), Grade 4, Annual Base Salary, \$27,027, due to retirement***

***Resource Clerk #3, Grade 4, Annual Base Salary \$27,027, due to retirement***

**RESOLUTION REQUEST FORM NO. 10**

***Request for Transfer of Funds***

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

DEPARTMENT NAME: County Auditor

SIGNED: *Carla Steves*

DATE: 6/2/2016

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1320 130	County Auditor - Salaries, Part Time	A.1320 860	County Auditor - Hospitalization	\$292.00
A.1320 130	County Auditor - Salaries, Part Time	A. 1320 865	County Auditor - Dental	\$218.00

**Please state reason for transfers requested:**

Codes were budgeted based on prior Department Head's usage.

**CONTINGENT FUND TRANSFER REQUESTS**

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Account- Other Payments/Contributions			

**Please state reason for transfer request:**

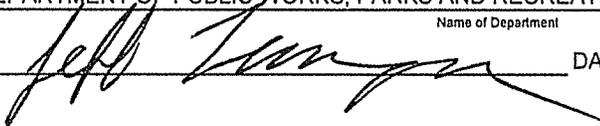
**Please file original request with Clerk of the Board and retain copy for your records.**

REQUEST FOR TRANSFER OF FUNDS

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

FROM: DEPARTMENT OF PUBLIC WORKS, PARKS AND RECREATION

Name of Department

SIGNED:  DATE 6/1/2016

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1626 470	General, Westbrook Parking Lot, Contract	A.7110 470	General, Parks & Recreation, Contract	\$11,000.00

Please state reason for transfers requested: To Cover Cost of Asbestos Removal & Disposal at the Warren County Fairgrounds

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 439	Contingent Fund			

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: Amanda Allen, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

SIGNED: Patricia [Signature]

DATE: June 3, 2016

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.4016.110	Long Term Care-Full Time Salary	A.4010.110	Health Services-Full Time Salary	\$4,410.00
A.4016.810	Long Term Care-Retirement Expense	A.4010.810	Health Services-Retirement Expense	\$938.00
A.4016.830	Long Term Care-Social Security Expense	A.4010.830	Health Services-Social Security Expense	\$304.00
A.4016.831	Long Term Care-Medicare Expense	A.4010.831	Health Services -Medicare Expense	\$71.00
A.4016.860	Long Term Care-Health Insurance Expense	A.4010.860	Health Services-Health Insurance Expense	\$1,024.00
A.4016.865	Long Term Care-Dental Insurance Expense	A.4010.865	Health Services-Dental Insurance Expense	\$10.00

**Total Transfers** **\$6,757.00**

- To transfer funds, to cover Salary and Frings for LTC Coordinator, to the CHHA program. Currently is allocated at 20% to LTC program, however program is no longer and has no remaining path. Therefore, transfer remaining funds for this Coordinator from LTC to CHHA effective 6/27/16 to year end.

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 Fund			

Please state reason for transfer request:

Total

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



NEWLY CREATED POSITIONS										
Effective Date	Department	Position Title	Salary Approved	Date Filled	Hire	Salary Hired	Position Deleted?	Incumbent	Incumbent Salary	Created v. Deleted
2/24/2016	County Attorney	Secretary to the County Attorney (1130)	\$ 42,500.00	5/2/2016	Sady	\$ 42,500.00	Legal Assistant #1	McGarr	\$ 42,866.00	\$ (366.00)
4/18/2016	DSS	Intake Clerk #7 (2406)	\$ 27,027.00	5/16/2016	Costine	\$ 24,027.00	SWE #34	Woodell	\$ 32,771.00	\$ (5,744.00)
4/18/2016	DSS	Caseworker #34 (2407)	\$ 39,979.00	5/9/2016	Beaudette	\$ 39,979.00				
4/18/2016	DSS	Caseworker #35 (2408)	\$ 39,979.00	5/9/2016	Farnsworth	\$ 41,211.00				
4/22/2016	Public Health	Supervising PHN - temporary (2253)	\$ 68,973.00	4/22/2016	Andre	\$ 66,000.00				
6/1/2016	OFA	Services Specialist - Office for the Aging (2409)	\$ 34,675.00	vacant						

**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: Treasurer

DATE: May 31, 2016

- (a) Purpose of Request: **To establish Reserve for Westmount Legacy Costs**
- (b) Details: **Upon the sale of Westmount, \$4,477,509.38 was transferred to the General Fund which represents the net amount of assets and liabilities that were on Westmount's books as of December 31, 2015. This amount should be set aside in a reserve to fund future Westmount legacy costs which will be primarily made up of retiree health insurance. The postemployment benefit for future Westmount retiree health insurance was actuarially determined to be \$6.1 million as of December 31, 2015.**
- (c) Previous Resolution Number: **N/A**
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title\* and Amount: **A 909.00 - Fund Balance**

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

\* as listed in budget and LOGOS

**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: Airport**

**DATE: 05/23/2016**

- (a) Purpose of Request: To authorize closure of the following capital projects and return any remaining funds to funding sources.

Project	Estimated Funds	Funding Source
H242- Rehabilitate Fisher House	15,000.00	General Fund
H337 - Edge Light Installation	1,250.00	Airport Reserve A892.00

- (b) Details: A separate budget amendment request will be submitted to move the remaining cash balance from H242 into H348, Airport Equipment Building Repairs.

- (c) Previous Resolution Number:

- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title\* and Amount:

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

\* as listed in budget and LOGOS

**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: DPW - Airport**

**DATE: 5/23/2016**

(a) Purpose of Amendment: **Move \$15,000 in funds from closing H242  
Rehabilitate Fisher House to H348 Airport Equipment Building Repairs**

(b) Appropriation Code, Object Code, Full Title and Amount:  
**Increase - A.9950 910 Interfund Transfers - \$15,000**

(c) Revenue Code (with title), and Amount: **Increase - A.1325 5031 Interfund  
Transfers - \$15,000**

**RESOLUTION REQUEST FORM NO. 9*****Request to Increase or Decrease or Amend Existing Capital Project or  
Capital Reserve Project\****

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

DEPARTMENT NAME: DPW - Airport

DATE: 5/23/2016

- (a) Exact Title and Number of Project\*: **H348 Airport Equipment Building Repairs**
- (b) Is this a Capital Project? **Yes**
- (c) Is this a Capital Reserve Project? **No**
- (d) Amount of Increase (if applicable): **\$15,000**
- (e) Amount of Decrease (if applicable):
- (f) Source of Funding (if Increase) (including name & title of codes, etc.): **H242**
- (g) Changes in Funding (if Amendment):
- (h) Purpose of Increase or Decrease or Amendment: **This project involves numerous repairs to the airport equipment storage building that houses the main electrical feed for the entire airport. Additional construction materials are needed to complete exterior repairs with rental of a boom lift, electrical repairs and upgrades, energy efficient lighting, and paint and miscellaneous hardware is needed to make the necessary repairs.**

**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:** Office of Emergency Services

**DATE:** June 1, 2016

(a) **Purpose of Amendment:** Increase both sides of the budget to accommodate grant funds.

(b) Appropriation Code, Object Code, Full Title and Amount:

A.3645.4018 220 – FY16 State Homeland Security Program – Office Equipment \$ 3,500.00

A.3645.4018 250 – FY16 State Homeland Security Program – Technical Equipment \$ 56,500.00

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

A.3645.4018 4380 – FY16 State Homeland Security Program –  
State Homeland Security Program

\$ 60,000.00

**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:** May 31, 2016

- (a) **Purpose of Amendment:** Amend the County Budget to increase revenue to reflect monies to be received from 2016 SLETPP grant.
- (b) **Appropriation Code, Object Code, Full Title and Amount:**
- |                 |                                 |             |
|-----------------|---------------------------------|-------------|
| A.3110.4032 260 | Law Enforcement Other Equipment | \$20,000.00 |
|-----------------|---------------------------------|-------------|
- (c) **Revenue Code (with title), and Amount:**
- |                  |                                       |             |
|------------------|---------------------------------------|-------------|
| A.3110.4032 4381 | NY State Terrorism Prevention Program | \$20,000.00 |
|------------------|---------------------------------------|-------------|

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

**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: Sheriff's Office**

**DATE: 05/25/2016**

- (a) Purpose of Request: **Close Capital Project H317-2011 Sheriff Vehicle Purchase**
- (b) Details: **Return estimated \$3,734.50, remaining cash in the project to Debt Service Fund**
- (c) Previous Resolution Number: **135 of 2011**
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title\* and Amount: **NOT APPLICABLE**

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

\* as listed in budget and LOGOS

**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:** Planning and Community Development

**DATE:** 1 June 2016

- (a) Purpose of Request: Create temporary Office Specialist position
  
- (b) Details: Request that new staff person start on Friday 17 June and continue in temp position through 24 June.
  
- (c) Previous Resolution Number:
  
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title\* and Amount: A.8021 110 Planning (and Comm. Dev.), Salaries-Regular

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

\* as listed in budget and LOGOS

**RESOLUTION REQUEST FORM NO. 11**

***Request to Create New Position***

**DEPARTMENT NAME:**

**DATE:**

- (a) Title of Requested Position: Senior Planner
- (b) Annual **Base** Salary (and Grade if Applicable): Grade 18, \$42,837
- (c) Effective Date for New Position:\* 1 July 2016  
\*Please do not backdate unless the purpose is to correct an error.
- (d) List Any Position in the Department's Table of Organization Being Deleted as a Result of this Request: (Include annual salary and grade if applicable):  
none
- (e) Where are Funds in the Budget for this Position? List Budget Code, Object Code, Full Title and Amount:  
Funding needs to be added to the 8021 budget
- (f) Has Personnel Officer Reviewed and Approved of the New Position Title?  
(This is necessary **BEFORE** bringing the request to committees.)  
Yes
- (g) Is this a mandated position? If so, please explain:  
No
- (h) Is there expected revenue from this position? If so, please explain:  
yes, state funds may provide up to 50% reimbursement

RESOLUTION REQUEST FORM NO. 12

ITEM 7B

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: Planning and Community Development Payroll Dept. No:
Title of Position: Senior Planner Base Salary of Position: 42,837 Grade: 18
Filling at Step # (If Known): Request to Backfill Due to Promotion: Yes No
Budget code and title: A8021.110 Salary Union Non-Union
This position is vacated due to: Retirement Resignation Termination Promotion Other New position
Employee No.: Is this position mandated? Yes No Is the position reimbursable? Yes No
Source of reimbursement: Federal % State 33 % 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

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

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

DEPARTMENT NAME: COUNTRYSIDE ADULT HOME

SIGNED:

DATE: 5/31/16

<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.6030.413	REPAIR/MAINTENANCE TO BUILDING	\$28,391.00

Please state reason for transfer request: TO PURCHASE A REPLACEMENT BOILER FOR COUNTRYSIDE ADULT HOME, WHICH HEATS THE BUILDING.

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

***RESOLUTION REQUEST FORM NO. 7***

***Request to Amend County Budget\****

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

**DEPARTMENT NAME: Employment and Training Administration**

**DATE: June 1, 2016**

- (a) Purpose of Amendment: Amend county budget to add annual allocation of federal Workforce Investment and Opportunity Act Funds for program year 2016 – WIOA Title I Program.
  
- (b) Appropriation Code, Object Code, Full Title and Amount: See attached detail sheet
  
- (c) Revenue Code (with title), and Amount: See attached detail sheet

RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget – Attachment

1-Jun-16

REVENUES			Totals
40.6293.0300 4791	Program Year 2016 WIOA Title I Program - Adult	\$202,906	
40.6293.0305 4791	Program Year 2016 WIOA Title I Program - Dislocated Worker	\$155,205	
40.6293.0310 4791	Program Year 2016 WIOA Title I Program - Youth	\$211,269	
40.6293.0313 4791	Program Year 2016 WIOA Title I Program - Admin	\$63,469	
APPROPRIATIONS			
	Program Year 2016 WIOA Title I Program - Adult		\$202,906
40.6293.0300 110	Salaries – Regular	\$83,000	
40.6293.0300 220	Office Equipment	\$1,500	
40.6293.0300 410	Office Supplies	\$16,656	
40.6293.0300 411	Rent - Building/Property	\$21,900	
40.6293.0300 433	Training - Client	\$32,000	
40.6293.0300 810	Retirement	\$12,200	
40.6293.0300 830	Social Security	\$5,150	
40.6293.0300 831	Medicare Contribution	\$1,200	
40.6293.0300 860	Hospitalization	\$22,600	
40.6293.0300 861	Retirees Hospitalization	\$6,700	
	Program Year 2016 WIOA Title I Program - Dislocated Worker		\$155,205
40.6293.0305 110	Salaries – Regular	\$67,000	
40.6293.0305 220	Office Equipment	\$1,200	
40.6293.0305 410	Office Supplies	\$11,175	
40.6293.0305 411	Rent - Building/Property	\$16,100	
40.6293.0305 433	Training - Client	\$18,000	
40.6293.0305 810	Retirement	\$11,800	
40.6293.0305 830	Social Security	\$4,150	
40.6293.0305 831	Medicare Contribution	\$980	
40.6293.0305 860	Hospitalization	\$19,000	
40.6293.0305 861	Retirees Hospitalization	\$5,800	
	Program Year 2016 WIOA Title I Program - Youth		\$211,269
40.6293.0310 110	Salaries - Regular	\$58,000	
40.6293.0310 130	Salaries - Part Time	\$64,000	
40.6293.0310 220	Office Equipment	\$1,500	
40.6293.0310 410	Office Supplies	\$19,569	
40.6293.0310 411	Rent - Building/Property	\$12,000	
40.6293.0310 433	Training - Client	\$8,000	
40.6293.0310 470	Contract	\$14,800	
40.6293.0310 810	Retirement	\$11,800	
40.6293.0310 830	Social Security	\$7,600	
40.6293.0310 831	Medicare Contribution	\$1,800	
40.6293.0310 860	Hospitalization	\$7,100	
40.6293.0310 861	Retirees Hospitalization	\$5,100	
	Program Year 2016 WIOA Title I Program - Admin		\$63,469
40.6293.0313 110	Salaries - Regular	\$32,000	
40.6293.0313 220	Office Equipment	\$1,100	
40.6293.0313 410	Office Supplies	\$3,819	
40.6293.0313 411	Rent - Building/Property	\$7,800	
40.6293.0313 810	Retirement	\$6,300	
40.6293.0313 830	Social Security	\$1,950	
40.6293.0313 831	Medicare Contribution	\$500	
40.6293.0313 860	Hospitalization	\$7,200	
40.6293.0313 861	Retirees Hospitalization	\$2,800	

**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:** Employment and Training

**DATE:** June 1, 2016

(a) Purpose of Amendment: add state grant funds to county budget to administer Summer Youth Employment Program

(b) Appropriation Code, Object Code, Full Title and Amount: 40.6326 110 - TANF Summer, Salaries - Regular - \$12,500; 40.6326 130 - TANF Summer, Salaries - Part Time - \$47,760; 40.6326 410 TANF Summer, Supplies - \$303; 40.6326 470 - TANF Summer, Contract - \$16,500; 40.6326 TANF Summer, Retirement - \$2,325; 40.6326 830 - TANF Summer, Social Security - \$3,740; 40.6326 831 - TANF, Medicare - \$875; 40.6326 860 - TANF Summer, Hospitalization - \$1,700.

(c) Revenue Code (with title), and Amount: 40.6326 4786- TANF Summer - \$85,703.

**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: Employment and Training**

**DATE: June 1, 2016**

(a) Purpose of Amendment: add federal funds to county budget to reimburse training for four dislocated workers through the Trade Adjustment Act

(b) Appropriation Code, Object Code, Full Title and Amount: 41.6293.0305 433 - WIOA Dislocated Worker (Training-Client) \$11,517.

(c) Revenue Code (with title), and Amount: 41.6293.0305 4791 - WIOA Dislocated Worker - \$11,517.

**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: Mental Health/Office of Community Services**

**DATE: 6/1/16**

- (a) Purpose of Amendment: **To amend the 2016 budget to accept funds (100% State Aid - NYS Office of Alcoholism and Substance Abuse Services) in the amount of \$4,486 to cover increased health and Worker's Compensation Insurance costs.**
- (b) Appropriation Code, Object Code, Full Title and Amount:  
**A.4320.0010.470 - (Mental Health Programs-Alcohol Prevention Education Program), increase by \$4,486.**
- (c) Revenue Code (with title), and Amount: **A.4320.0010.4490 (Federal Salary Sharing -Mental Health), increase by \$4,486.**

## 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: Health Services

DATE: 05/27/2016

- (a) Purpose of Request: To amend the Department Table of Organization to reflect the Long Term Care Coordinator Supervisor nurse position and salary to be 100% in Certified Home Health Agency Program.
- (b) Details: All patients in Long Term Home Health Care program have been transitioned to other programs.
- (c) Previous Resolution Number: Not applicable.

**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: Veterans' Services**

**DATE: 05/17/2016**

- (a) Purpose of Request: **To be paid out 31.5 hours of remaining 2015 vacation.**
- (b) Details: **See attached 2015 vacation ending balance and 2015 vacation carryover balance.**
- (c) Previous Resolution Number:
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title\* and Amount:

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

\* as listed in budget and LOGOS

1 of 2

WARREN COUNTY

Accrual - Balance Report.ACC

Report Date: 05/17/2016

Primary Sort By: Dept(G1);Sub-Dept(G2)

Report Time: 1:23:06 PM

Date:12/31/2015

Employee	Paycode	Last Post Date	Accrual Code	Last Post Type	Available Hours
Dept: VETERANS SERVICE [Veterans Service]					
Sub-Dept: 100 [DEFAULT - UNASSIGNED]					
10928 [DIRESTA, DENISE]	2[VACA]	09/04/2015	VAC7	T	* 66.50
	3[SICK]	12/14/2015	SICK7	T	607.00
	4[FHOL]	08/31/2015	FH7	T	0.00
	5[PERS]	12/31/2015	PER8	T	0.00
	8[CSCR]	12/17/2015	CSCR	T	0.50
	86[VCAR]	06/01/2015	VC7	.	0.00
	903[COMP]	01/01/2015	COMP	.	0.00

END OF REPORT

Accrual - Balance Report.ACC

WARREN COUNTY  
 Report Date: 05/17/2016  
 Report Time: 1:33:45 PM

Accrual - Balance Report.ACC

Primary Sort By: Dept(G1);Sub-Dept(G2)

Date:01/01/2016

2 of 2

Employee	Paycode	Last Post Date	Accrual Code	Last Post Type	Available Hours
Dept: VETERANS SERVICE [Veterans Service]					
Sub-Dept: 100 (DEFAULT - UNASSIGNED)					
10928 [DIRESTA, DENISE]	2[VACA]	01/01/2016	VAC7	S	133.00
	3[SICK]	01/01/2016	SICK7	S	614.00
	4[FHOL]	01/01/2016	FH7	S	7.00
	5[PERS]	01/01/2016	PER8	S	21.00
	8[CSCR]	01/01/2016	CSCR	S	4.00
	86[VCAR]	01/01/2016	VC7	U	* 35.00
	903[COMP]	01/01/2015	COMP	.	0.00

END OF REPORT

Accrual - Balance Report.ACC

Request for PAYOUT

66.50 - 2015 VACATION ENDING BALANCE  
 - 35.00 - 2015 VACATION CARRYOVER  


---

 31.50 - 2015 VACATION REMAINING

**Employee Accrual Pay Out Calculation**

Employee Name: DiResta, Denise

Hourly Rate: \$ 25.2198

Leave Type	Hours Available	Amount to be paid
Vacation	31.5	\$ 794.42
TOTAL		\$ 794.42

12/31/15 Vacation Balance	66.5
1/1/16 Vacation	35
Hours Forfeited	31.5

**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: Department of Public Works, Park O & M**

**DATE: 05/23/2016**

- (a) Purpose of Request: To Reimburse Village of Lake George for Property Maintenance costs on Gaslight Village Property
  
- (b) Details: Appropriation Code is A.691.07 Deferred Revenue Gaslight Village to A.1625 413 Gaslight Village Property, Repair and Maintenance, \$350.00 Turf Management Fertilizer.
  
- (c) Previous Resolution Number:
  
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title\* and Amount:

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

\* as listed in budget and LOGOS

**RESOLUTION REQUEST FORM NO. 13*****Request to Increase or Decrease Salary of Non-Union Position***

DEPARTMENT NAME: DPW

DATE: 6/1/16

- (a) Employee Name, Title and Employee No.: M. Tlokinska-Scroggins, Confidential Assistant to the Superintendent of Public Works
- (b) Current Annual **Base** Salary (and Grade if Applicable): \$42,751.75
- (c) Former Annual **Base** Salary (and Grade if Applicable): \$40,251.75
- (d) Effective Date for Salary Change:\* 6/17/16  
\*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:  
A1490.110 - Public Works Admin DPW - Salaries, \$42,751.75
- (f) Justification of Request: This position has historically been paid an addition stipend of \$2,500-\$3,000 for additional Deputy duties/responsibilities. Request is to eliminate the separate stipend for Deputy for Administration (\$2,500) and add same amount to base salary per recommendation of the Personnel Officer and amendment to the job duty description. Funds are budgeted.

**RESOLUTION REQUEST FORM NO. 14*****Request to Reclassify Position*****DEPARTMENT NAME:** Warren County Clerk-DMV**DATE:** 5/18/2016

- (a) Title of Reclassified Position: **Principal Account Clerk (Gr. 10)**
- (b) Annual Salary of Reclassified Position (and Grade if Applicable):\* **\$ 44,451**  
\*(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.
- (c) Title and Employee Number of Position to be Deleted:  
**Sr. Account Clerk (Gr. 7) # 7810 (26 year employee)**
- (d) Annual Salary of Position to be Deleted (and Grade if Applicable):\* **\$ 40,232 (Gr 7).**  
\*(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.
- (e) Effective Date:\* **June 17, 2016 (upon approval)**  
\*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 1410 110 -unexp funds:vacancy (2/1-3/21/2016) \$4642. & Dept change: \$1242**
- (g) Has Personnel Officer Reviewed and Approved of the New Position Title?:\*  
\*This is necessary **BEFORE** bringing the request to committees.

**Yes. See attached letter.**

Warren County  
Civil Service Administration

1340 State Route 9  
Lake George, New York 12845  
[civilservice@warrencountyny.gov](mailto:civilservice@warrencountyny.gov)

Patricia C. Nenninger  
Personnel Officer

Telephone: 518-761-6440  
Fax: 518-761-6509

Date: May 6, 2016  
Re: Reclassification of Senior Account Clerk Position  
Dept: County Clerk

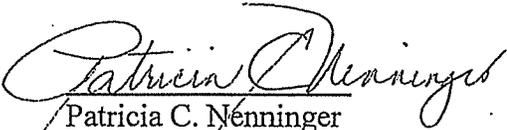
In accordance with Section 22 of the Civil Service Law, the County Clerk is seeking a reclassification of the position of Senior Account Clerk. Mrs. Vogel has submitted a Job Classification Questionnaire relating to the Senior Account Clerk position (handling both DMV and County Clerk office duties), which set forth the current duties and responsibilities of the position.

As Personnel Officer, I undertook a review and determined that the position has changed from Senior Account Clerk duties in a material and permanent way and that reclassification would be appropriate. The appropriate title for this reclassification is Principal Account Clerk, which is a competitive class position under Warren County Civil Service Rules.

The position is currently encumbered. Sandy Smith holds the position of Senior Account Clerk on a permanent basis. Upon reclassification and Board approval, Ms. Smith will be appointed provisionally to the position of Principal Account Clerk in the Office of the Warren County Clerk, pending Civil Service examination requirements.

Both Sandy Smith and Pam Vogel have been notified of this proposed reclassification and each has indicated in writing that they agree with the reclassification.

Accordingly, I determine that the Senior Account Clerk position under the supervision of the County Clerk in the Office of the Warren County Clerk has changed in a material and permanent way and reclassification to the title of Principal Account Clerk is appropriate.



Patricia C. Nenninger  
Personnel Officer

**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:

- (a) Purpose of Request: **To appropriate funds from the Computer Reserve Fund to departmental budgets to purchase computers and related equipment and software.**
- (b) Details: **A.4010.220.1 Office Equipment Reserve \$22,860** *A.8022 220.1* **Office Equipment Reserve \$6,000, A.3110.220.1 Office Equipment Reserve \$9,300**
- (c) Previous Resolution Number: **N/A**
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title\* and Amount: **A.895.00 Computer Reserve Rund**

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

\* as listed in budget and LOGOS

**WARREN COUNTY**  
**Journal Report - April 2016**

G/L Date	G/L Account Number	Account Description	Description	Increase Amount	Decrease Amount
Admn.Fiscal Srv - Administrative Fiscal Services					
4/14/2016	A.4530 440	Legal/Transcript Fees	Out of code transfer from A.4530 850	\$ 2,000.00	
4/14/2016	A.4530 850	Unemployment Insurance	Out of code transfer to A.4530 440		\$ 2,000.00
4/15/2016	A.4530 470	Contract	Out of code transfer from A.4530 850	\$ 24,000.00	
4/15/2016	A.4530 850	Unemployment Insurance	Out of code transfer to A.4530 470		\$ 24,000.00
4/22/2016	A.4530 435	Medical Fees	Out of code transfer From A. 4530 850	\$ 100.00	
4/22/2016	A.4530 850	Unemployment Insurance	Out of code transfer to A.4530 435		\$ 100.00
Building & Fire - Building & Fire Code					
4/28/2016	A.3620 426	Subscriptions	Budget Transfer Within Object Code from A.3620 442	\$ 53.00	
4/28/2016	A.3620 442	Automotive - Gas & Oil	Budget Transfer Within Object Code to A.3620 426		\$ 53.00
DPW_DPW Admin - DPW,DPW Administration					
4/11/2016	A.7111 415	Electricity	Transfer Within Budget Code to A.7111 424		\$ 5.00
4/11/2016	A.7111 424	Postage	Transfer Within Budget Code from A.7111 415	\$ 5.00	
OFA - Office for the Aging					
4/4/2016	A.6773 413	Repair & Maint.-Bldg/Property	within object code transfer from A6773415	\$ 4,620.00	
4/4/2016	A.6773 415	Electricity	within object code transfer to A6773413		\$ 4,620.00
OFA - Office for the Aging					
4/15/2016	A.6785 444	Travel/Education/Conference	within object code transfer from A6785470	\$ 95.00	
4/15/2016	A.6785 470	Contract	within object code transfer to A6785444		\$ 95.00
Office of EMS - Office of Emergency Services					
4/25/2016	A.3645.4010 250	Technical Equipment	Budget transfer within object code to A.3645.4010 260		\$ 2,627.01
4/25/2016	A.3645.4010 260	Other Equipment	Budget transfer within object code from A.3645.4010 250	\$ 2,627.01	
4/25/2016	A.3645.4010 423	Telephone	Budget transfer within object code to A.3645.4010 455		\$ 2,655.00
4/25/2016	A.3645.4010 428	Data Processing & Internet Fees	Budget transfer within object code to A.3645.4010 455		\$ 715.00
4/25/2016	A.3645.4010 455	Safety Equipment	Budget transfer within object code from A.3645.4010 423	\$ 2,655.00	

**WARREN COUNTY**  
**Journal Report - April 2016**

G/L Date	G/L Account Number	Account Description	Description	Increase Amount	Decrease Amount
4/25/2016	A.3645.4010 455	Safety Equipment	Budget transfer within object code from A.3645.4010 428	\$ 715.00	
Office of EMS - Office of Emergency Services					
4/25/2016	A.3645.4010 250	Technical Equipment	Out of code transfer to A.3645.4010 455		\$ 615.00
4/25/2016	A.3645.4010 455	Safety Equipment	Out of code transfer from A.3645.4010 250	\$ 615.00	
Office of EMS - Office of Emergency Services					
4/27/2016	A.3410 410	Supplies	Budget transfer within object code from A.3410 455	\$ 300.00	
4/27/2016	A.3410 455	Safety Equipment	Budget transfer within object code to A.3410 410		\$ 300.00
Public Health_Health Services - Public Health,Health Services					
4/14/2016	A.4018.0030 435	Medical Fees	Budget Transfer Disease toA.4018.0030.444 fm A.4018.0030.435		\$ 1,500.00
4/14/2016	A.4018.0030 444	Travel/Education/Conference	Budget Transfer Disease toA.4018.0030.444 fm A.4018.0030.435	\$ 1,500.00	
Public Health_Health Services - Public Health,Health Services					
4/18/2016	A.4010 428	Data Processing & Internet Fees	Budget transfer Chha from A4010.442	\$ 2,544.00	
4/18/2016	A.4010 442	Automotive - Gas & Oil	Budget transfer Chha to A4010.428		\$ 2,544.00
Public Health_Health Services - Public Health,Health Services					
4/18/2016	A.4010 410	Supplies	Chha budget transfer to A4010.453		\$ 15.99
4/18/2016	A.4010 453	Uniforms & Clothing	Chha budget transfer from A4010.410	\$ 15.99	
Social Services - Social Services					
4/20/2016	A.6010 210	Furniture/Furnishings	Out of Budget Code Transfer from A.6010 418	\$ 454.00	
4/20/2016	A.6010 418	Ins-General Liability	Out of Budget Code Transfer to A.6010 210		\$ 454.00
Tourism - Tourism					
4/19/2016	A.6417 470	Contract	Transfer from A.6417 481	\$ 520.00	
4/19/2016	A.6417 481	Tourism Promotion	Transfer to A.6417 470		\$ 520.00

**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: Office of the County Administrator**

**DATE: 6/3/2016**

- (a) Purpose of Request: To close Capital Project H315 9550 280 Abatement and Demolition Co Annex and transfer remaining \$29,548.24 to Debt Service Fund.
- (b) Details: BAN has been paid off and the project is no longer needed.
- (c) Previous Resolution Number: 259 of 2010
- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title\* and Amount:

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

\* as listed in budget and LOGOS

# Warren County Board of Supervisors

## RESOLUTION NO. 146 OF 2016

Resolution introduced by Supervisors Conover, Seeber, Sokol, Simpson, Merlino, Dickinson, Girard, Frasier, Beaty, McDevitt, and Braymer

**AMENDING THE WARREN COUNTY, NEW YORK PLANS AND  
POLICIES TO ADD A PROVISION CONCERNING A SALARY ADJUSTMENT FOR  
DEPUTY DEPARTMENT HEAD SERVICE WHEN DEPARTMENT HEAD POSITION  
IS VACANT OR THE DEPARTMENT HEAD IS ABSENT OR UNABLE TO SERVE**

### RESOLUTION TABLED

WHEREAS, the Finance, Personnel & Higher Education Committee of the Warren County Board of Supervisors has recommended adding a new subparagraph (D) to Section VI.045 of the Warren County, New York Plans and Policies concerning the payment of a salary adjustment for Deputy Department Head service when a Department Head position is vacant or the Department Head is absent or unable to serve, now, therefore, be it

RESOLVED, that Section VI.045 of the Warren County, New York Plans and Policies is hereby amended to add a new subparagraph (D) concerning the payment of a salary adjustment for Deputy Department Head service when a Department Head position is vacant or the Department Head is absent or unable to serve to read as follows:

- (D) A Deputy Department Head who acts on the part of the Department Head during a time when the position is vacant or when the Department Head is absent or unable to act shall receive the same salary budgeted and set forth in the Salary and Wage Schedule of the County for the Department Head provided that the deputy serves during 1) a time of a vacancy or 2) a time period commencing the 31<sup>st</sup> consecutive day of a Department Head's absence or inability to act and continuing until Department Head returns to work.

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: County Clerk Payroll Dept. No: 22
Title of Position: Recording Clerk PT Base Salary of Position: 30,959 yr/14,888 PT Grade: 7
Filling at Step # (If Known): (2214) Request to Backfill Due to Promotion: Yes No
Budget code and title: A1665 130 Union Non-Union
This position is vacated due to: Retirement Resignation Termination Promotion Other
Employee No.: 11870 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.

Current List Expires 6/04/16
Pending from
New List Will Be Established
RCA

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 [Signature] Date 5/24/16

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 [Signature] Date 5/24/16

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Support Services
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 [Signature] Date 6/1/16

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: Planning and Community Development Payroll Dept. No:
Title of Position: Office Specialist Base Salary of Position: 30,959 Grade: 7
Filling at Step # (If Known): Request to Backfill Due to Promotion: [ ] Yes [x] No
Budget code and title: A8021.110 Salary Union [x] Non-Union [ ]
This position is vacated due to: [ ] Retirement [x] Resignation [ ] Termination [ ] Promotion [ ] Other
Employee No.: 9979 Is this position mandated? [ ] Yes [x] No Is the position reimbursable? [x] Yes [ ] No
Source of reimbursement: [ ] Federal % [x] State 33 % [ ] Other %

CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

[x] Competitive-active eligible list [ ] Competitive-no list (hiring would be provisional) [ ] Non-Competitive [ ] Other PCW
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. 5-3-16

COUNTY ADMINISTRATOR COMPLETES THIS SECTION

[x] The Administrator has no objection to the filling of the vacancy.
[ ] The Administrator objects to the filling of the vacancy.
Administrator Signature [Signature] Date 5/5/16

BUDGET OFFICER COMPLETES THIS SECTION

[x] 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 [Signature] Date 5/13/16

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Economic Growth + Development
[x] 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 [Signature] Date 6/1/16

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: Senior Account Clerk #4 Base Salary of Position: \$36,151.09 Grade:

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

Budget code and title: A.3110 Union [X] Non-Union [ ]

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

Employee No: 6035 Is this position mandated? [ ] Yes [X] No Is the position reimbursable? [ ] Yes [X] No

Source of reimbursement: [ ] Federal % [ ] State % [ ] Other %

CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

[X] 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 Criminal Justice & Public Safety

[X] 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 Evelyn M Wood Date 6/1/16

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: SOCIAL SERVICES Payroll Dept. No: 40.01
Title of Position: CASEWORKER #27 Base Salary of Position: \$39,979 Grade: 16
Filling at Step # (If Known): 0 Request to Backfill Due to Promotion: [X] Yes [ ] No
Budget code and title: A.6010 110 - Salaries Regular Union [X] Non-Union [ ]
This position is vacated due to: [ ] Retirement [X] Resignation [X] Termination [ ] Promotion [ ] Other
Employee No.: 12289 Is this position mandated? [X] Yes [ ] No Is the position reimbursable? [X] Yes [ ] No
Source of reimbursement: [X] Federal 50% [X] State 25% [ ] Other %

CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

[X] Competitive-active eligible list [ ] Competitive-no list (hiring would be provisional) [ ] Non-Competitive [ ] Other POW

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. [Signature] 5-31-16

COUNTY ADMINISTRATOR COMPLETES THIS SECTION

- [X] The Administrator has no objection to the filling of the vacancy.
[ ] The Administrator objects to the filling of the vacancy.

Administrator Signature [Signature] Date 6/1/16

BUDGET OFFICER COMPLETES THIS SECTION

- [X] 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 [Signature] Date 6/1/16

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee [Signature] Human & Social Services

- [X] 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 [Signature] Date June 1, 2016

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: SOCIAL SERVICES Payroll Dept. No: 40.01
Title of Position: CASEWORKER #29 Base Salary of Position: \$39,979 Grade: 16'
Filling at Step # (If Known): 0 Request to Backfill Due to Promotion: [X] Yes [ ] No
Budget code and title: A.6010 110 - Salaries Regular Union [X] Non-Union [ ]
This position is vacated due to: [ ] Retirement [ ] Resignation [X] Termination [ ] Promotion [ ] Other
Employee No.: 12774 (A-20-10) Is this position mandated? [X] Yes [ ] No Is the position reimbursable? [X] Yes [ ] No
Source of reimbursement: [X] Federal 50% [X] State 25% [ ] Other %

CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

[X] Competitive-active eligible list [ ] Competitive-no list (hiring would be provisional) [ ] Non-Competitive [ ] Other POW
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. [Signature] 5-16-16

COUNTY ADMINISTRATOR COMPLETES THIS SECTION

[X] The Administrator has no objection to the filling of the vacancy.
[ ] The Administrator objects to the filling of the vacancy.

Administrator Signature [Signature] Date 5/17/16

BUDGET OFFICER COMPLETES THIS SECTION

[X] 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 [Signature] Date 5/17/16

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee: Human Resources + Social Services
[X] 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 [Signature] Date June 1, 2014

RESOLUTION REQUEST FORM NO. 12

Schedule "A"

NOTICE OF INTENT TO FILL VACANT POSITION

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DEPARTMENT HEAD COMPLETES THIS SECTION

Department: SOCIAL SERVICES Payroll Dept. No: 40.03
Title of Position: SOC WELF EXAMNR #39 Base Salary of Position: \$32,238 Grade: 8
Filling at Step # (If Known): 0 Request to Backfill Due to Promotion: Yes No
Budget code and title: A.6010 110 - Salaries Regular Union Non-Union
This position is vacated due to: Retirement Resignation Termination Promotion Other
Employee No.: 12083 (430-16) Is this position mandated? Yes No Is the position reimbursable? Yes No
Source of reimbursement: Federal 50% State 25% 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. 5-10-16

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 [Signature] Date 5/17/16

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 [Signature] Date 5/17/16

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Health Human & Social Services
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 [Signature] Date June 1, 2016

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: SOCIAL SERVICES Payroll Dept. No: 40.12
Title of Position: INTAKE CLERK Base Salary of Position: \$27,027 Grade: 4
Filling at Step # (If Known): 0 Request to Backfill Due to Promotion: Yes No
Budget code and title: A.6010 110 - Salaries Regular Union Non-Union
This position is vacated due to: Retirement Resignation Termination Promotion Other
Employee No.: 11374 Is this position mandated? Yes No Is the position reimbursable? Yes No
Source of reimbursement: Federal 50% State 25% Other %

CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

Competitive-active eligible list Competitive-no list 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. 5-16-16

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 [Signature] Date 5/17/16

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 [Signature] Date 5/17/16

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Health, Human & Social Services
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 [Signature] Date June 1, 2016

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: **SOCIAL SERVICES** Payroll Dept. No: **40.00**  
 Title of Position: **RESOURCE CLERK #3** Base Salary of Position: **\$27,027/** Grade: **04/**  
 Filling at Step # (If Known): **0** Request to Backfill Due to Promotion:  Yes  No  
 Budget code and title: **A.6010 110 - Salaries Regular** Union  Non-Union   
 This position is vacated due to:  Retirement  Resignation  Termination  Promotion  Other  
 Employee No.: **10923 (U-30-16)** Is this position mandated?  Yes  No Is the position reimbursable?  Yes  No  
 Source of reimbursement:  Federal 50%  State 25%  Other %

**CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL**

Competitive-active eligible list  Competitive-no list (*hiring would be provisional*)  Non-Competitive  Other POD  
 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. AP 5-16-16

**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 W. B. Angles Date 5/17/16

**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 5/17/16

**SUPERVISORY COMMITTEE COMPLETES THIS SECTION**

Name of Committee Health, Human & Social Services  
 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 [Signature] Date JUNE 1, 2016