

Social Services Committee
Warren County Department of Social Services
AGENDA
January 22, 2016

Committee Members: Supervisors Sokol, Simpson, Seeber, Frasier, Strough, Vanselow, McDevitt, MacDonald and Braymer.

I. Committee meeting called to order by Chairman

II. Motion to approve minutes of prior Committee meeting

III. Action Agenda/New Business

1. Resolution Request:

Notice of Intent to Fill the Vacant Position of Senior Account Clerk #5 in the Accounting Unit, Salary \$36,233, Grade 7, Step 6, due to transfer effective January 8, 2016.

Please see Attachment #1

2. Resolution Request:

Request permission for 7 staff to attend the NYPWA 2016 Winter Conference (*Transforming Communities*) in Albany, NY from January 26 – 29, 2016.

Please see Attachment #2

Rationale: The NYPWA Conference includes essential information for Social Services Management personnel.

3. Resolution Request:

Request permission for Barbara Flores and Laura Deamelia to attend SNAP Training Institute in Albany, NY from February 2 - 5, 2016.

Please see Attachment #3

Rationale: This is a required training.

4. Resolution Request:

Request permission for Lisa Schmidt to attend Sexual Abuse Dynamics Training in Rensselaer, NY from March 2 - 4, 2016.

Please see Attachment #4

Rationale: This is a required training.

5. Resolution Request:

Request permission for Ann O'Neil to attend Domestic Violence Liaison Training in Albany, NY from April 12-14, 2016.

Please see Attachment #5

Rationale: This is a required training.

6. Temporary Personnel Issues/Appointment

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IV. Pending Item

There are no pending items.

V. Information for Discussion/Review

1. Countryside Adult Home Agenda – Deanna Park, Director
 2. Monthly Revenue & Expenditures and Overtime Report – Julie Montero, Fiscal Manager
- Please see Attachment #6**

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

VII. Motion to Adjourn

Attachments:

1. Notice of Intent to Fill Sr. Account Clerk
2. Request permission for 7 staff to attend NYPWA Winter Conference, Albany
3. Request permission for two staff to attend SNAP Training, Albany
4. Request permission for L. Schmidt to attend training, Troy
5. Request permission for A. O’Neil to attend training, Albany
6. Monthly Revenue & Expenditures and Overtime Reports

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: 40.02
Title of Position: SR. ACCOUNT CLERK #5 Base Salary of Position: \$30,959 Grade: 7
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 [] Termination [] Promotion [X] Other Transfer
Employee No.: 11729 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
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 _____

SCHEDULE "A"
AUTHORIZATION TO ATTEND MEETING OR CONVENTION

ATTACHMENT #2

Check one:

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

The Social Services Committee hereby authorizes Cynthia Schrock Seeley, Sarah Merry, Phillip Perry, Kelly Barker, Tammy Breen, Diane Coughlin, and Chris Hanchett.
(Supervisory Committee) (Employee Name)

to attend NYPWA Annual Winter Conference 2016
(Name of meeting or organization)

at Albany Marriott Hotel, 189 Wolf Rd, Albany, NY 12205
(Address)

on January 26 - 29, 2016. Mode of transportation to be used County 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 \$ _____

*www.gsa.gov

Date: _____
Department Head Signature

Date: _____
Committee Chairman Signature

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

Please check to request a fleet vehicle.

REQUEST FOR USE OF FLEET VEHICLE

Filing Instructions:

1. Original with voucher to Auditor.
2. Copy to Frank Morehouse if fleet vehicle is needed.

SCHEDULE "A"
AUTHORIZATION TO ATTEND MEETING OR CONVENTION

ATTACHMENT #3

Check one:

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

The Social Services Committee hereby authorizes Laura Deamelia and Barbara Flores

(Supervisory Committee)

(Employee Name)

to attend SNAP (Supplemental Nutrition Assistance Program) Training Institute

(Name of meeting or organization)

at Cresthill Suites 1415 Washington Ave, Albany, NY 12205

(Address)

on February 2 - 5, 206. Mode of transportation to be used County 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 \$ 51.00 GSA* Rate \$ _____

Meal costs - GSA* per diem rate \$ _____

* www.gsa.gov

Date: _____

Department Head Signature

Date: _____

Committee Chairman Signature

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

Please check to request a fleet vehicle.

REQUEST FOR USE OF FLEET VEHICLE

Filing Instructions:

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2. Copy to Frank Morehouse if fleet vehicle is needed.
3. Copy to Clerk of the Board with Resolution Request form if out-of-state travel.
4. Copy to Purchasing with Purchase Order, if required.

Cost Analysis	Training	Date(s)
Laura Deamelia	SNAP Training Institute	2/1-2/5/16
Barbara Flores		

Cost of Training/Person - \$14/day	\$	70.00
# of staff attending		<u>2</u>
	\$	140.00

Overnight		Commuting				
# of miles/1 way	<u>50</u>		<u>50</u>			
X # trips	<u>2</u>		<u>10</u>		Fleet Car - .25	
Total # of miles	100		500	X	Overnight	\$ 25.00
					Commute	\$ 125.00

Estimated Overtime

	Salary	Hr Rate	OT Rate	# of hrs	Total OT		
#1	<u>32,771</u>	15.76	23.63	<u>9</u>	212.70		
#2	<u>33,335</u>	16.03	24.04	<u>9</u>	216.36	Commuting OT	\$ 429.05

		# of hrs	Total OT		
#1		<u>1</u>	23.63		
#2		<u>1</u>	24.04	Overnight OT	\$ 47.67

Hotel	# of Staff	Rate/night	Total Hotel Expense
4 nights	2	\$ 51.00	\$ 408.00

Totals

Fleet Car + Training + Hotel + OT	\$	620.67
Fleet Car + Training + Overtime	\$	694.05

Course Outline

SNAP Training Institute

Who Should Attend?

NTA SNAP Staff

Time Frame

5 days

Maximum Enrollment

Limited to 25

Prerequisites:

None

Reimbursement:

Mileage and Hotel

Fees:

Social Services District - The training for all courses is **\$14/day** or **\$7/half-day** for each social services district trainee. The NYSDFA will collect this fee directly from social services districts through a special State Share Settlement arrangement.

Individual providers, such as foster parents and family day care providers, do not pay the training fee.

Provider agencies - **No fee applies**

Course Objective:

As a result of completing this training, trainees will have increased skills and knowledge for performing SNAP related job tasks.

Key Topics:

- Overview of SNAP
- SNAP Access and Client Rights
- Application Process, including Expedited Processing
- Household Composition, including Alien and Student Eligibility
- Verification of Application Facts
- Reporting Requirements
- Work Requirements
- Resource Eligibility Determination
- Income Eligibility and Budgeting, including Manual Budgeting, SUA, and ABEL Entries
- Recertification and Fraud Referral
- New York State Nutrition Improvement Project (NYSNIP)

Where applicable, the use of myBenefits for electronic applications and myWorkspace as a case processing tool for workers will be reviewed during the program.

SCHEDULE "A"
AUTHORIZATION TO ATTEND MEETING OR CONVENTION

ATTACHMENT #4

Check one:

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

The Social Services Committee hereby authorizes Lisa Schmidt

 (Supervisory Committee) (Employee Name)

to attend Sexual Abuse Dynamics Training

 (Name of meeting or organization)

at Rensselaer County Department of Social Services, 127 Bloomingrove Dr, Troy, NY 12180

 (Address)

on March 2 - 4, 2016. Mode of transportation to be used County 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 \$ 44.50 GSA * Rate \$ _____
- Meal costs - GSA *per diem rate \$ _____

* www.gsa.gov

Date: _____

 Department Head Signature

Date: _____

 Committee Chairman Signature

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

Please check to request a fleet vehicle.

REQUEST FOR USE OF FLEET VEHICLE

Filing Instructions:

1. Original with voucher to Auditor.
2. Copy to Frank Morehouse if fleet vehicle is needed.
3. Copy to Clerk of the Board with Resolution Request form if out-of-state travel.
4. Copy to Purchasing with Purchase Order, if required.

Cost Analysis	Training	Date(s)
Lisa Schmidt	Sexual Abuse Dynamics & Intervention Training	3/2-3/4/16

Cost of Training/Person = \$14/day
 # of staff attending 1

Overnight	Commuting			
# of miles/1 way <u>55</u>	<u>55</u>			
X # trips <u>2</u>	<u>6</u>			
Total # of miles 110	330	X	Fleet Car - .25	
			Overnight	\$ 27.50
			Commute	\$ 82.50
				\$ 42.00

Estimated Overtime

	Salary	Hr Rate	OT Rate	# of hrs	Total OT		
#1	<u>39,979</u>	19.22	28.83	<u>6</u>	172.99		
#2	<u> </u>	0.00	0.00	<u> </u>	0.00	Commuting OT	\$ 172.99
#3	<u> </u>	0.00	0.00	<u> </u>	0.00		

	# of hrs	Total OT		
#1	<u>2</u>	57.66		
#2	<u> </u>	0.00	Overnight OT	\$ 57.66
#3	<u> </u>	0.00		

Hotel		Rate/night	Total Hotel Expense
2 nights	2	\$ 44.50	\$ 89.00

Totals			
	Fleet Car + Training + Hotel + OT	\$	216.16
	Fleet Car + Training + Overtime	\$	297.49

Sexual Abuse Dynamics and Intervention Training: Email Announcement To:
joanne.collins@dfa.state.ny.us

Send Email

Course: Sexual Abuse Dynamics and Intervention Training
Class Status: Open Nomination
No. Nominated: 33
Attachments: [Form.pdf](#) [Travel Form.pdf](#) [TRVREIM.pdf](#)
Provider: Fordham University/Children&Families Ins
Date: 03/02/2016 - 03/04/2016
Time(s): Day 1: 8:30am - 4:30pm , Day 1: 8:30am - 4:30pm , Day 1: 8:30am - 4:30pm ,
Location: Rensselaer County DSS
 127 Bloomingrove Drive Troy, NY 12180 [find on map](#)
Lodging: Fairfield Inn East Greenbush 124 Troy Road East Greenbush 12061
Deadline: 02/17/2016
Not part of a Multipart Course

Course Description:

This 3 day course will provide caseworkers with an intense overview of the issues related to child sexual abuse. Caseworkers will participate in both large and small group exercise that will increase their sensitivity in working with incest families and improve skills related to their work with victims and offenders. The format will include lectures, role plays, films and group discussions and groups presentation.

Class Description:

Same as Course Description

Region: 4

Target Population:

Child protective and preventive workers with case management responsibilities whose salaries are allocated in full or part to Title IV-E, foster care, adoption caseworkers and supervisors.

Course Prerequisites:

Course Content: Casework Practices

Pre-Registration Required: yes

Reimbursement: Mileage & Hotel

Class Fees: Fees will be charged

Meets CPS Requirement: yes

Trainer(s):

Additional Information:

Directions:

From the East: Take I-90 west to exit 8 (Defreestville). Stay on the ramp straight through the first traffic light. At the second light, take a left. Take a right at Cumberland Farms onto Bloomingrove Dr. After one-half mile, there is a fork in the road. Bear left, staying on Bloomingrove Dr. Go approximately one mile to a stop sign. Go straight through the stop sign. The Rensselaer County Department of Social Services is approximately one-half mile on the right. Take a right between the orange brick pillars, proceed up the hill and bear right into the parking lot (D and E). Enter through the main doors in the front of the building. From the West: Take the NYS Thruway to exit 23. Get on 787 North to Route 378 East. Follow the directions below from Albany. From the North: Take I-87 South to exit 7 (Route 7 east toward Troy). Follow Route 7 east to 787 South. Proceed to the exit for Route 378 East. Follow the directions below from Albany. From the South: Take the NYS Thruway to exit 23. Get on 787 North to Route 378 East. Follow the directions below from Albany. From Albany: Take 787 North to Route 378 East. Go over Menands Bridge to first traffic light. Take a right up hill (Morrison Ave.) to the top where there is another traffic light. Take a right onto Route 4. Go to the fourth traffic light (car dealer on left) and take a left. Take an immediate right onto Bloomingrove Drive. Our building is 1/3 mile on the left. Go to the second set of orange brick pillars and take a left, proceed up the hill and bear right into the parking lot (D and E). The main entrance is in the front of the building.

SCHEDULE "A"
AUTHORIZATION TO ATTEND MEETING OR CONVENTION

ATTACHMENT #5

Check one:

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

The Social Services Committee hereby authorizes Ann O'Neil

(Supervisory Committee) (Employee Name)

to attend Domestic Violence Liaison Training

(Name of meeting or organization)

at University at Albany; Albany, NY 12205

(Address)

on April 12 - 14, 2016. Mode of transportation to be used County 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 \$ 57.50 GSA * Rate \$ _____
- Meal costs - GSA *per diem rate \$ _____

*www.gsa.gov

Date: _____

Department Head Signature

Date: _____

Committee Chairman Signature

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Please check to request a fleet vehicle.

REQUEST FOR USE OF FLEET VEHICLE

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4. Copy to Purchasing with Purchase Order, if required.

Additional Information

Registration Time: 8:45, day 1.

Attached please find: Course Outline; Travel and Accommodation Policies; and Registration Form for those who cannot register directly via HSLC.

For overnight trainees: the Hampton Inn provides breakfast and the Research Foundation for the SUNY provides dinner coupons for each eligible night. Lunch is provided to all trainees.

Course Description

The DVL Training Institute is required training for staff employed by or under contract with social services district agencies in New York State who are functioning as the Domestic Violence Liaison or back-up personnel. Any person responsible for recommending or granting waivers must attend this institute.

This training provides the required knowledge and skills necessary for the Domestic Violence Liaison and back-up personnel to fulfill the role of assessing client claims of domestic violence, granting waivers from TA requirements, and referring clients to needed services. The format of the training includes a combination of classroom instruction, group activities, and skill practices. These activities will provide the Domestic Violence Liaison with an in-depth understanding of Domestic Violence and Temporary Assistance program requirements, as well as a working knowledge of the waiver process.

The DVL Training Institute is provided in collaboration with the New York State Office for the Prevention of Domestic Violence. In order to fulfill the Domestic Violence Liaison (DVL) certification requirements, individuals who work with the WMS DV-Subsystem must also complete the WMS DV-Subsystem Training on TrainingSpace.org.

Training Description

Please see Course Description.

Target Population

Primary Domestic Violence Liaisons, back-up liaisons, and supervisors or any person responsible for recommending or granting waivers.

Course Content

Domestic Violence

Pre-registration Required

Yes

Reimbursement

Mileage and Hotel

Training Fees

Local District, ACS and HRA staff will be charged Training fees

Meets In-Service CPS Requirements

No

Trainer(s)

BUDGET ANALYSIS

REVENUE AND EXPENDITURES FOR 2015

ATTACHMENT #6

FUND(S): A

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

EXPENSES	2015 BUDGETED	DEC 2015 EXP	2015 YTD ACTUAL	2014 Prior Year Totals
110 Salaries - Regular	\$5,676,292.00	\$412,254.60	\$5,289,599.83	\$5,182,997.77
120 Salaries - Overtime	\$85,222.00	\$8,839.81	\$67,221.80	\$71,676.63
130 Salaries - Part Time	\$190,020.00	\$23,642.97	\$216,085.01	\$220,535.21
100's PERSONAL SERVICES Total	\$5,951,534.00	\$444,737.38	\$5,572,906.64	\$5,475,209.61
200's EQUIPMENT	\$39,018.24	\$3,034.32	\$48,208.27	\$15,611.11
400's CONTRACTUAL	\$23,516,499.00	\$1,784,511.90	\$20,702,571.18	\$23,937,879.65
800's EMPLOYEE BENEFITS	\$3,944,725.00	\$274,972.62	\$3,638,336.10	\$3,726,485.58
TOTALS	\$33,451,776.24	\$2,507,256.22	\$29,962,022.19	\$33,155,185.95

REVENUES	2015 BUDGETED	DEC 2015 REVENUE	2015 YTD ACTUAL	2014 Prior Year Totals
	\$16,151,956.00	\$1,811,512.04	\$15,451,576.81	\$15,777,219.98

Expense Budget Performance Report

Fiscal Year to Date 12/31/15

Include Rollup Account and Rollup to Account



Account Fund	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year Total
Department 6010 - Social Services										
EXPENSE										
<i>Personal Services</i>										
110	Salaries - Regular	5,027,233.00	(60,000.00)	4,967,233.00	365,177.19	.00	4,662,305.65	304,927.35	94	4,560,141.07
120	Salaries - Overtime	49,222.00	.00	49,222.00	6,561.57	.00	45,015.73	4,206.27	91	50,891.73
130	Salaries - Part Time	26,361.00	60,000.00	86,361.00	9,211.42	.00	66,075.08	20,285.92	77	65,913.34
<i>Personal Services Totals</i>		\$5,102,816.00	\$0.00	\$5,102,816.00	\$380,950.18	\$0.00	\$4,773,396.46	\$329,419.54	94%	\$4,676,946.14
<i>Equipment</i>										
210	Furniture/Furnishings	1,000.00	3,138.64	4,138.64	.00	2,666.00	1,472.64	.00	100	.00
220	Office Equipment	5,000.00	39,204.60	44,204.60	.00	836.03	39,074.49	4,294.08	90	3,333.26
230	Automotive Equipment	.00	230.00	230.00	.00	.00	229.98	.02	100	.00
<i>Equipment Totals</i>		\$6,000.00	\$42,573.24	\$48,573.24	\$0.00	\$3,502.03	\$40,777.11	\$4,294.10	91%	\$3,333.26
<i>Contractual Expense</i>										
410	Supplies	55,000.00	6,658.15	61,658.15	4,826.11	7,108.59	44,291.89	10,257.67	83	59,367.34
411	Rent-Building/Property	564,547.00	.00	564,547.00	.00	.00	564,546.94	.06	100	564,546.94
418	Ins-General Liability	45,547.00	(7,906.00)	37,641.00	.00	.00	37,640.48	.52	100	42,311.11
422	Repair/Maint-Equipment	3,000.00	(3,000.00)	.00	.00	.00	.00	.00	+++	170.00
423	Telephone	20,000.00	.00	20,000.00	1,563.18	.00	18,004.64	1,995.36	90	18,994.36
424	Postage	25,000.00	10,000.00	35,000.00	2,913.85	.00	31,142.92	3,857.08	89	33,446.97
426	Subscriptions	1,200.00	.00	1,200.00	.00	.00	406.64	793.36	34	299.00
427	Memberships & Dues	5,000.00	(39.00)	4,961.00	.00	.00	4,498.00	463.00	91	4,168.00
428	Data Processing & Internet Fees	3,600.00	225.85	3,825.85	353.00	314.00	3,511.85	.00	100	3,576.00
432	Special Project Supply	95,000.00	.00	95,000.00	.00	.00	9,645.00	85,355.00	10	95,000.00
435	Medical Fees	2,000.00	.00	2,000.00	(38.34)	.00	(1,585.91)	3,585.91	-79	(427.84)
436	Advertising Fees	1,500.00	.00	1,500.00	47.34	.00	387.14	1,112.86	26	1,335.07
437	Consulting Fees	3,000.00	(3,000.00)	.00	.00	.00	.00	.00	+++	.00
439	Misc Fees & Expenses	3,000.00	3,000.00	6,000.00	114.22	.00	4,325.34	1,674.66	72	3,951.77
440	Legal/Transcript Fees	7,000.00	2,906.00	9,906.00	.00	.00	.00	9,906.00	0	9,080.08
441	Auto-Supplies & Repair	15,215.00	(3,000.00)	12,215.00	.00	.00	4,619.69	7,595.31	38	2,338.82
442	Automotive - Gas & Oil	15,000.00	(7,000.00)	8,000.00	437.56	.00	6,039.17	1,960.83	75	10,374.91
444	Travel/Education/Conference	18,000.00	.00	18,000.00	398.25	.00	7,618.83	10,381.17	42	10,527.71
469	Other Payments/Contributions	5,000.00	.00	5,000.00	.00	200.00	800.00	4,000.00	20	3,675.00
470	Contract	380,800.00	(45,000.00)	335,800.00	17,845.59	10,744.34	225,325.79	99,729.87	70	322,007.45
<i>Contractual Expense Totals</i>		\$1,268,409.00	(\$46,155.00)	\$1,222,254.00	\$28,460.76	\$18,366.93	\$961,218.41	\$242,668.66	80%	\$1,184,742.69
<i>Employee Benefits</i>										
810	Retirement	869,315.00	.00	869,315.00	61,033.36	.00	819,378.73	49,936.27	94	879,436.31
830	Social Security	316,378.00	.00	316,378.00	22,146.85	.00	279,272.76	37,105.24	88	274,498.66
831	Medicare Contribution	73,989.00	.00	73,989.00	5,179.60	.00	65,313.69	8,675.31	88	64,197.35
860	Hospitalization	1,541,543.00	.00	1,541,543.00	114,999.05	.00	1,463,326.80	78,216.20	95	1,445,337.98
865	Dental Insurance	22,680.00	.00	22,680.00	1,826.00	.00	21,434.00	1,246.00	95	21,452.00

Expense Budget Performance Report

Fiscal Year to Date 12/31/15
Include Rollup Account and Rollup to Account

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year Total
Fund A - General										
Department 6010 - Social Services										
EXPENSE										
<i>Other Benefits</i>		\$2,823,905.00	\$0.00	\$2,823,905.00	\$205,184.86	\$0.00	\$2,648,725.98	\$175,179.02	94%	\$2,684,922.30
<i>Employee Benefits Totals</i>										
840	Workmen's Compensation	57,479.00	.00	57,479.00	.00	.00	57,478.01	.99	100	43,057.70
850	Unemployment Insurance	37,000.00	.00	37,000.00	.00	.00	2,079.20	34,920.80	6	23,298.20
855	Disability	6,000.00	.00	6,000.00	.00	.00	5,274.63	725.37	88	5,371.25
861	Retirees Hospitalization	424,160.00	.00	424,160.00	28,940.03	.00	377,594.48	46,565.52	89	394,714.99
862	EPO Co-Pay	.00	.00	.00	.00	.00	.00	.00	+++	1,140.00
<i>Other Benefits Totals</i>		\$524,639.00	\$0.00	\$524,639.00	\$28,940.03	\$0.00	\$442,426.32	\$82,212.68	84%	\$467,582.14
EXPENSE TOTALS		\$9,725,769.00	(\$3,581.76)	\$9,722,187.24	\$643,535.83	\$21,868.96	\$8,866,544.28	\$833,774.00	91%	\$9,017,526.53
Department 6010 - Social Services Totals (\$643,535.83)										
Department 6030 - Countryside Adult Home										
EXPENSE										
<i>Personal Services</i>		649,059.00	.00	649,059.00	47,077.41	.00	627,294.18	21,764.82	97	622,856.70
110	Salaries - Regular	36,000.00	.00	36,000.00	2,278.24	.00	22,206.07	13,793.93	62	20,784.90
120	Salaries - Overtime	163,659.00	.00	163,659.00	14,431.55	.00	150,009.93	13,649.07	92	154,621.87
130	Salaries - Part Time	\$848,718.00	\$0.00	\$848,718.00	\$63,787.20	\$0.00	\$799,510.18	\$49,207.82	94%	\$798,263.47
<i>Personal Services Totals</i>		6,000.00	413.00	6,413.00	3,034.32	75.00	6,281.11	56.89	99	10,132.00
210	Furniture/Furnishings	.00	.00	.00	.00	.00	.00	.00	+++	348.00
220	Office Equipment	400.00	2,777.00	3,177.00	.00	1,384.00	1,150.05	642.95	80	1,797.85
260	Other Equipment	200.00	(200.00)	.00	.00	.00	.00	.00	+++	.00
270	Lawn & Landscaping	\$6,600.00	\$2,990.00	\$9,590.00	\$3,034.32	\$1,459.00	\$7,431.16	\$699.84	93%	\$12,277.85
<i>Equipment Totals</i>		35,000.00	(1,006.00)	33,994.00	4,864.66	9,495.73	23,461.59	1,036.68	97	28,296.35
410	Supplies	40,000.00	24,000.00	64,000.00	3,626.73	8,360.84	19,943.39	35,695.77	44	30,352.21
413	Repair & Maint.-Bldg/Property	35,000.00	(5,400.00)	29,600.00	1,939.58	.00	23,887.96	5,712.04	81	24,753.46
415	Electricity	50,000.00	(20,000.00)	30,000.00	2,392.02	464.38	25,372.84	4,162.78	86	44,745.77
416	Oil & Gas-Heating	8,500.00	138.00	8,638.00	.00	.00	8,637.87	.13	100	7,879.69
418	Ins-General Liability	1,500.00	.00	1,500.00	.00	.00	1,315.46	184.54	88	21.62
422	Repair/Maint-Equipment	3,500.00	.00	3,500.00	206.04	.00	2,377.59	1,122.41	68	2,282.63
423	Telephone	440.00	.00	440.00	6.30	.00	165.75	274.25	38	672.76
424	Postage	250.00	16.00	266.00	.00	.00	265.20	.80	100	242.97
426	Subscriptions	1,250.00	.00	1,250.00	99.25	.00	1,143.81	106.19	92	1,069.52
428	Data Processing & Internet Fees	2,000.00	.00	2,000.00	15.00	.00	337.85	1,662.15	17	409.50
432	Special Project Supply	25,800.00	.00	25,800.00	1,400.00	.00	15,950.00	9,850.00	62	17,850.00
434	Allowances	3,200.00	.00	3,200.00	470.00	.00	1,976.00	1,224.00	62	3,147.67
435	Medical Fees	1,000.00	.00	1,000.00	.00	.00	.00	1,000.00	0	.00
436	Advertising Fees									

Expense Budget Performance Report

Fiscal Year to Date 12/31/15
 Include Rollup Account and Rollup to Account



Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	YTD Encumbrances	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year Total
Fund A - General										
Department 6030 - Countryside Adult Home										
EXPENSE										
<i>Contractual Expense</i>										
437	Consulting Fees	17,500.00	.00	17,500.00	1,105.04	160.00	15,768.09	1,571.91	91	11,868.99
439	Misc Fees & Expenses	4,750.00	.00	4,750.00	50.00	.00	783.80	3,966.20	17	465.00
440	Legal/Transcript Fees	2,000.00	.00	2,000.00	.00	.00	.00	2,000.00	0	1,000.00
441	Auto-Supplies & Repair	3,600.00	.00	3,600.00	645.92	.00	2,431.58	568.42	81	2,117.07
442	Automotive - Gas & Oil	3,600.00	.00	3,600.00	40.14	.00	1,311.92	2,288.08	36	2,366.14
444	Travel/Education/Conference	1,500.00	400.00	1,900.00	.00	.00	1,666.39	233.61	88	789.00
445	Foods	122,000.00	(138.00)	121,862.00	10,127.95	25,372.81	93,548.58	2,940.61	98	111,572.74
451	Medical Supply Expense	6,000.00	(1,000.00)	5,000.00	677.73	1,684.49	2,310.47	1,005.04	80	4,430.89
453	Uniforms & Clothing	100.00	.00	100.00	.00	.00	.00	100.00	0	.00
470	Contract	35,000.00	.00	35,000.00	1,832.60	4,668.85	27,523.05	2,808.10	92	30,978.65
Contractual Expense Totals		\$402,890.00	(\$2,990.00)	\$399,900.00	\$29,498.96	\$50,207.10	\$270,179.19	\$79,513.71	80%	\$327,312.63
<i>Employee Benefits</i>										
810	Retirement	121,724.00	.00	121,724.00	9,268.49	.00	126,283.33	(4,559.33)	104	140,534.03
830	Social Security	52,617.00	.00	52,617.00	3,726.00	.00	46,749.76	5,867.24	89	46,703.58
831	Medicare Contribution	12,305.00	.00	12,305.00	871.39	.00	10,933.38	1,371.62	89	10,922.57
860	Hospitalization	276,899.00	.00	276,899.00	18,125.22	.00	248,026.82	28,872.18	90	254,020.39
865	Dental Insurance	4,440.00	.00	4,440.00	280.00	.00	3,960.00	480.00	89	4,240.00
Employee Benefits Totals		\$467,985.00	\$0.00	\$467,985.00	\$32,271.10	\$0.00	\$435,953.29	\$32,031.71	93%	\$456,420.57
<i>Other Benefits</i>										
840	Workmen's Compensation	5,041.00	.00	5,041.00	.00	.00	5,040.64	.36	100	3,601.14
850	Unemployment Insurance	6,000.00	.00	6,000.00	.00	.00	.00	6,000.00	0	4,002.40
855	Disability	3,606.00	.00	3,606.00	.00	.00	143.70	3,462.30	4	2,450.57
861	Retirees Hospitalization	95,577.00	.00	95,577.00	7,504.33	.00	92,753.97	2,823.03	97	91,328.44
Other Benefits Totals		\$110,224.00	\$0.00	\$110,224.00	\$7,504.33	\$0.00	\$97,936.31	\$12,285.69	89%	\$101,382.55
EXPENSE TOTALS		\$1,836,417.00	\$0.00	\$1,836,417.00	\$136,095.91	\$51,666.10	\$1,611,012.13	\$173,738.77	91%	\$1,695,657.07
Department 6030 - Countryside Adult Home Totals		(\$1,836,417.00)	\$0.00	(\$1,836,417.00)	(\$136,095.91)	(\$51,666.10)	(\$1,611,012.13)	(\$173,738.77)	91%	(\$1,695,657.07)
Department 6050 - Public Facil. For Children										
EXPENSE										
<i>Contractual Expense</i>										
469	Other Payments/Contributions	.00	6,910.24	6,910.24	4,339.72	394.52	4,339.72	2,176.00	69	30,086.02
470	Contract	25,000.00	(6,910.24)	18,089.76	3,186.00	.00	3,186.00	14,903.76	18	.00
Contractual Expense Totals		\$25,000.00	\$0.00	\$25,000.00	\$7,525.72	\$394.52	\$7,525.72	\$17,079.76	32%	\$30,086.02
EXPENSE TOTALS		\$25,000.00	\$0.00	\$25,000.00	\$7,525.72	\$394.52	\$7,525.72	\$17,079.76	32%	\$30,086.02
Department 6050 - Public Facil. For Children Totals		(\$25,000.00)	\$0.00	(\$25,000.00)	(\$7,525.72)	(\$394.52)	(\$7,525.72)	(\$17,079.76)	32%	(\$30,086.02)

Expense Budget Performance Report

Fiscal Year to Date 12/31/15

Include Rollup Account and Rollup to Account

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	Encumbrances	YTD Transactions	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year Total
Fund A - General											
Department 6055 - Daycare											
EXPENSE											
Contractual Expense											
470	Contract	1,515,000.00	.00	1,515,000.00	107,891.98	.00	1,184,988.04	330,011.96	78	1,315,413.09	
<i>Contractual Expense Totals</i>		\$1,515,000.00	\$0.00	\$1,515,000.00	\$107,891.98	\$0.00	\$1,184,988.04	\$330,011.96	78%	\$1,315,413.09	
EXPENSE TOTALS		\$1,515,000.00	\$0.00	\$1,515,000.00	\$107,891.98	\$0.00	\$1,184,988.04	\$330,011.96	78%	\$1,315,413.09	
Department 6055 - Daycare Totals (\$1,515,000.00) (\$107,891.98)											
Department 6070 - Services for Recipients											
EXPENSE											
Contractual Expense											
470	Contract	315,000.00	.00	315,000.00	10,791.46	.00	247,141.54	67,858.46	78	323,415.12	
<i>Contractual Expense Totals</i>		\$315,000.00	\$0.00	\$315,000.00	\$10,791.46	\$0.00	\$247,141.54	\$67,858.46	78%	\$323,415.12	
EXPENSE TOTALS		\$315,000.00	\$0.00	\$315,000.00	\$10,791.46	\$0.00	\$247,141.54	\$67,858.46	78%	\$323,415.12	
Department 6070 - Services for Recipients Totals (\$315,000.00) (\$10,791.46)											
Department 6100 - Medicaid											
EXPENSE											
Contractual Expense											
470	Contract	13,001,536.00	.00	13,001,536.00	910,168.00	.00	11,787,400.00	1,214,136.00	91	13,989,058.50	
<i>Contractual Expense Totals</i>		\$13,001,536.00	\$0.00	\$13,001,536.00	\$910,168.00	\$0.00	\$11,787,400.00	\$1,214,136.00	91%	\$13,989,058.50	
EXPENSE TOTALS		\$13,001,536.00	\$0.00	\$13,001,536.00	\$910,168.00	\$0.00	\$11,787,400.00	\$1,214,136.00	91%	\$13,989,058.50	
Department 6100 - Medicaid Totals (\$13,001,536.00) (\$910,168.00)											
Department 6101 - Medical Assistance											
EXPENSE											
Contractual Expense											
470	Contract	100,000.00	(25,000.00)	75,000.00	.00	.00	3,307.76	71,692.24	4	30,382.48	
<i>Contractual Expense Totals</i>		\$100,000.00	(\$25,000.00)	\$75,000.00	\$0.00	\$0.00	\$3,307.76	\$71,692.24	4%	\$30,382.48	
EXPENSE TOTALS		\$100,000.00	(\$25,000.00)	\$75,000.00	\$0.00	\$0.00	\$3,307.76	\$71,692.24	4%	\$30,382.48	
Department 6101 - Medical Assistance Totals (\$100,000.00) (\$25,000.00) (\$75,000.00) (\$3,307.76) (\$71,692.24) (\$30,382.48)											
Department 6109 - Aid To Dependent Children											
EXPENSE											
Contractual Expense											
470	Contract	2,050,000.00	.00	2,050,000.00	176,293.46	.00	1,890,037.68	159,962.32	92	2,155,461.84	
<i>Contractual Expense Totals</i>		\$2,050,000.00	\$0.00	\$2,050,000.00	\$176,293.46	\$0.00	\$1,890,037.68	\$159,962.32	92%	\$2,155,461.84	
EXPENSE TOTALS		\$2,050,000.00	\$0.00	\$2,050,000.00	\$176,293.46	\$0.00	\$1,890,037.68	\$159,962.32	92%	\$2,155,461.84	
Department 6109 - Aid To Dependent Children Totals (\$2,050,000.00) (\$176,293.46) (\$159,962.32) (\$2,155,461.84)											

Expense Budget Performance Report

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Include Rollup Account and Rollup to Account

Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	Encumbrances	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year Total
Fund A - General										
Department 6119 - Child Care										
EXPENSE										
Contractual Expense										
470	Contract	3,600,000.00	.00	3,600,000.00	367,161.71	.00	3,117,870.30	482,129.70	87%	3,410,682.38
	<i>Contractual Expense Totals</i>	\$3,600,000.00	\$0.00	\$3,600,000.00	\$367,161.71	\$0.00	\$3,117,870.30	\$482,129.70	87%	\$3,410,682.38
	EXPENSE TOTALS	\$3,600,000.00	\$0.00	\$3,600,000.00	\$367,161.71	\$0.00	\$3,117,870.30	\$482,129.70	87%	\$3,410,682.38
	Department 6119 - Child Care Totals	(\$3,600,000.00)	\$0.00	(\$3,600,000.00)	(\$367,161.71)	\$0.00	(\$3,117,870.30)	(\$482,129.70)	87%	(\$3,410,682.38)
Department 6140 - Home Relief										
EXPENSE										
Contractual Expense										
470	Contract	1,100,000.00	20,000.00	1,120,000.00	109,661.40	.00	1,104,015.41	15,984.59	99%	1,010,674.46
	<i>Contractual Expense Totals</i>	\$1,100,000.00	\$20,000.00	\$1,120,000.00	\$109,661.40	\$0.00	\$1,104,015.41	\$15,984.59	99%	\$1,010,674.46
	EXPENSE TOTALS	\$1,100,000.00	\$20,000.00	\$1,120,000.00	\$109,661.40	\$0.00	\$1,104,015.41	\$15,984.59	99%	\$1,010,674.46
	Department 6140 - Home Relief Totals	(\$1,100,000.00)	(\$20,000.00)	(\$1,120,000.00)	(\$109,661.40)	\$0.00	(\$1,104,015.41)	(\$15,984.59)	99%	(\$1,010,674.46)
Department 6141 - Fuel Crisis Assistance										
EXPENSE										
Contractual Expense										
470	Contract	30,000.00	.00	30,000.00	.00	.00	(946.11)	30,946.11	-3%	31,068.44
	<i>Contractual Expense Totals</i>	\$30,000.00	\$0.00	\$30,000.00	\$0.00	\$0.00	(\$946.11)	\$30,946.11	-3%	\$31,068.44
	EXPENSE TOTALS	\$30,000.00	\$0.00	\$30,000.00	\$0.00	\$0.00	(\$946.11)	\$30,946.11	-3%	\$31,068.44
	Department 6141 - Fuel Crisis Assistance Totals	(\$30,000.00)	\$0.00	(\$30,000.00)	\$0.00	\$0.00	\$946.11	(\$30,946.11)	-3%	(\$31,068.44)
Department 6142 - Emergency Aid For Adults										
EXPENSE										
Contractual Expense										
470	Contract	15,000.00	35,000.00	50,000.00	.00	.00	45,712.11	4,287.89	91%	21,171.80
	<i>Contractual Expense Totals</i>	\$15,000.00	\$35,000.00	\$50,000.00	\$0.00	\$0.00	\$45,712.11	\$4,287.89	91%	\$21,171.80
	EXPENSE TOTALS	\$15,000.00	\$35,000.00	\$50,000.00	\$0.00	\$0.00	\$45,712.11	\$4,287.89	91%	\$21,171.80
	Department 6142 - Emergency Aid For Adults Totals	(\$15,000.00)	(\$35,000.00)	(\$50,000.00)	\$0.00	\$0.00	(\$45,712.11)	(\$4,287.89)	91%	(\$21,171.80)
Department 7310 - Youth Program 4-H Camp										
EXPENSE										
Contractual Expense										
470	Contract	25,000.00	.00	25,000.00	.00	12,500.00	12,500.00	.00	100%	25,000.00
	<i>Contractual Expense Totals</i>	\$25,000.00	\$0.00	\$25,000.00	\$0.00	\$12,500.00	\$12,500.00	\$0.00	100%	\$25,000.00
	EXPENSE TOTALS	\$25,000.00	\$0.00	\$25,000.00	\$0.00	\$12,500.00	\$12,500.00	\$0.00	100%	\$25,000.00
	Department 7310 - Youth Program 4-H Camp Totals	(\$25,000.00)	\$0.00	(\$25,000.00)	\$0.00	(\$12,500.00)	(\$12,500.00)	\$0.00	100%	(\$25,000.00)
Department 7311 - Youth Bureau										
EXPENSE										
Contractual Expense										
410	Supplies	100.00	.00	100.00	.00	.00	14.73	85.27	15%	254.17

Expense Budget Performance Report

Fiscal Year to Date 12/31/15
 Include Rollup Account and Rollup to Account



Account	Account Description	Adopted Budget	Budget Amendments	Amended Budget	Current Month Transactions	Encumbrances	YTD Transactions	YTD Transactions	Budget - YTD Transactions	% used/ Rec'd	Prior Year Total
Fund A - General											
Department 7311 - Youth Bureau											
EXPENSE											
Contractual Expense											
423	Telephone	200.00	.00	200.00	.00	.00	.00	.00	200.00	0	.00
424	Postage	300.00	.00	300.00	1.09	.00	139.61	160.39	160.39	47	188.33
427	Memberships & Dues	.00	.00	.00	.00	.00	.00	.00	.00	+++	50.00
444	Travel/Education/Conference	151.00	.00	151.00	.00	.00	.00	151.00	151.00	0	56.00
470	Contract	5,520.00	.00	5,520.00	391.00	.00	2,415.00	3,105.00	3,105.00	44	4,002.00
Contractual Expense Totals		\$6,271.00	\$0.00	\$6,271.00	\$392.09	\$0.00	\$2,569.34	\$3,701.66	\$3,701.66	41%	\$4,550.50
Other Benefits											
861	Retirees Hospitalization	17,972.00	.00	17,972.00	1,072.30	.00	13,292.20	4,679.80	4,679.80	74	16,178.02
Other Benefits Totals		\$17,972.00	\$0.00	\$17,972.00	\$1,072.30	\$0.00	\$13,292.20	\$4,679.80	\$4,679.80	74%	\$16,178.02
EXPENSE TOTALS		\$24,243.00	\$0.00	\$24,243.00	\$1,464.39	\$0.00	\$15,861.54	\$8,381.46	\$8,381.46	65%	\$20,728.52
Department 7311 - Youth Bureau Totals		(\$24,243.00)	\$0.00	(\$24,243.00)	(\$1,464.39)	\$0.00	(\$15,861.54)	(\$8,381.46)	(\$8,381.46)	65%	(\$20,728.52)
Department 7312 - Special Delinquency Prev. EXPENSE											
Contractual Expense											
410	Supplies	128.00	64.00	192.00	.00	.00	.00	.00	192.00	0	88.04
424	Postage	100.00	.00	100.00	1.64	.00	8.71	91.29	91.29	9	23.67
427	Memberships & Dues	200.00	26.00	226.00	.00	.00	226.00	.00	.00	100	176.00
428	Data Processing & Internet Fees	90.00	(90.00)	.00	.00	.00	.00	.00	.00	+++	.00
470	Contract	11,000.00	17,885.00	28,885.00	22,682.00	6,203.00	22,682.00	.00	.00	100	27,697.00
Contractual Expense Totals		\$11,518.00	\$17,885.00	\$29,403.00	\$22,683.64	\$6,203.00	\$22,916.71	\$283.29	\$283.29	99%	\$27,984.71
EXPENSE TOTALS		\$11,518.00	\$17,885.00	\$29,403.00	\$22,683.64	\$6,203.00	\$22,916.71	\$283.29	\$283.29	99%	\$27,984.71
Department 7312 - Special Delinquency Prev. Totals		(\$11,518.00)	(\$17,885.00)	(\$29,403.00)	(\$22,683.64)	(\$6,203.00)	(\$22,916.71)	(\$283.29)	(\$283.29)	99%	(\$27,984.71)
Department 7313 - Youth Court EXPENSE											
Contractual Expense											
470	Contract	50,875.00	.00	50,875.00	13,982.72	4,739.92	46,135.08	.00	.00	100	50,874.99
Contractual Expense Totals		\$50,875.00	\$0.00	\$50,875.00	\$13,982.72	\$4,739.92	\$46,135.08	\$0.00	\$0.00	100%	\$50,874.99
EXPENSE TOTALS		\$50,875.00	\$0.00	\$50,875.00	\$13,982.72	\$4,739.92	\$46,135.08	\$0.00	\$0.00	100%	\$50,874.99
Department 7313 - Youth Court Totals		(\$50,875.00)	\$0.00	(\$50,875.00)	(\$13,982.72)	(\$4,739.92)	(\$46,135.08)	\$0.00	\$0.00	100%	(\$50,874.99)
Fund A - General Totals		\$33,425,358.00	\$44,303.24	\$33,469,661.24	\$2,507,256.22	\$97,372.50	\$29,962,022.19	\$3,410,266.55	\$3,410,266.55		\$33,155,185.95
Grand Totals		\$33,425,358.00	\$44,303.24	\$33,469,661.24	\$2,507,256.22	\$97,372.50	\$29,962,022.19	\$3,410,266.55	\$3,410,266.55		\$33,155,185.95

WARREN COUNTY

Receipts by G/L Distribution Report - Summary

From Date: 01/01/2015 - To Date: 12/31/2015

G/L Account Number	G/L Date	Due To/From Fund	Project	Transactions	Debit Amount	Credit Amount
Fund: A - General						
Account: 400.00 - State&Federal,Social Services						
	01/13/2015			1	\$0.00	\$20.00
	01/30/2015			2	\$0.00	\$277,195.00
	02/13/2015			1	\$0.00	\$96,125.00
	02/19/2015			1	\$0.00	\$487,630.00
	02/26/2015			2	\$0.00	\$381,213.00
	02/27/2015			3	\$0.00	\$354,419.01
	03/11/2015			1	\$0.00	\$8,651.00
	03/31/2015			9	\$0.00	\$2,308,487.00
	04/30/2015			1	\$0.00	\$212,451.00
	05/08/2015			3	\$0.00	\$501,563.00
	05/19/2015			2	\$0.00	\$6,834.00
	05/20/2015			1	\$0.00	\$140,335.00
	05/21/2015			4	\$0.00	\$148,908.00
	05/28/2015			2	\$0.00	\$562,393.00
	05/29/2015			1	\$0.00	\$5,112.00
	06/16/2015			1	\$0.00	\$134,286.00
	06/23/2015			1	\$0.00	\$15,143.51
	06/30/2015			3	\$0.00	\$549,739.00
	07/15/2015			1	\$0.00	\$651.00
	07/31/2015			2	\$0.00	\$605,426.00
	08/07/2015			5	\$0.00	\$631,771.00
	08/13/2015			1	\$0.00	\$83,208.00
	08/14/2015			1	\$0.00	\$32,266.00
	08/24/2015			2	\$0.00	\$612,875.00

WARREN COUNTY
 State/Federal Revenue

Receipts by G/L Distribution Report - Summary

1/15-12/15

From Date: 01/01/2015 - To Date: 12/31/2015

G/L Account Number	G/L Date	Due To/From Fund	Project	Transactions	Debit Amount	Credit Amount
	08/26/2015			1	\$0.00	\$133,383.00
	08/31/2015			1	\$0.00	\$724,848.00
	09/15/2015			3	\$0.00	\$144,637.54
	09/24/2015			3	\$0.00	\$48,211.67
	09/28/2015			2	\$0.00	\$469,927.00
	09/29/2015			1	\$0.00	\$315,292.00
	09/30/2015			2	\$0.00	\$309,281.00
	10/27/2015			3	\$0.00	\$230,592.00
	10/30/2015			1	\$0.00	\$251,161.00
	11/04/2015			1	\$0.00	\$57.00
	11/06/2015			1	\$0.00	\$334,543.00
	11/13/2015			1	\$0.00	\$8,202.00
	11/17/2015			1	\$0.00	\$159,405.00
	11/23/2015			1	\$0.00	\$259,443.00
	11/25/2015			1	\$0.00	\$385,767.00
	12/18/2015			2	\$0.00	\$57,168.00
	12/22/2015			1	\$0.00	\$797,259.00
	12/28/2015			1	\$0.00	\$351,265.00
	12/31/2015			4	\$0.00	\$433,835.73
				82	\$0.00	\$13,570,979.46

Account Total: State&Federal,Social Services

Fund Total: General

Grand Total:

\$0.00 \$13,570,979.46
 \$0.00 \$0.00 \$13,570,979.46
1880597.35

TOTAL Revenue 15,451,576.81

WARREN COUNTY

Receipts by G/L Distribution Report - Summary

From Date: 01/01/2015 - To Date: 12/31/2015

G/L Account Number	G/L Date	Due To/From Fund	Project	Transactions	Debit Amount	Credit Amount
	10/08/2015			1	\$0.00	\$5,454.00
	10/14/2015			1	\$0.00	\$876.94
	10/20/2015			1	\$0.00	\$138.00
	10/30/2015			1	\$0.00	\$3,488.81
	11/19/2015			1	\$0.00	\$1,272.69
	11/30/2015			3	\$0.00	\$17,320.91
	12/09/2015			1	\$0.00	\$1,181.80
	12/14/2015			1	\$0.00	\$785.59
	12/22/2015			1	\$0.00	\$4,720.68
	12/23/2015			1	\$0.00	\$13,831.00
	12/31/2015			1	\$0.00	\$644.23
Account Total: Repay of Home Relief				59	\$0.00	\$211,682.68
Department Total: Home Relief					\$0.00	\$211,682.68
Department: 6141 - Fuel Crisis Assistance						
Account: 1841 - Repay of Home Energy Asst						
	03/12/2015			2	\$0.00	\$32,189.04
	03/31/2015			1	\$0.00	\$7,539.12
	05/06/2015			1	\$0.00	\$3,075.94
	05/29/2015			1	\$0.00	\$5,667.73
	07/09/2015			1	\$0.00	\$6,649.84
	08/03/2015			1	\$0.00	\$951.15
	09/01/2015			1	\$0.00	\$1,076.87
	09/30/2015			1	\$0.00	\$1,828.27
	10/30/2015			1	\$0.00	\$2,019.84

Revenue 1/15 - 12/15

WARREN COUNTY

Receipts by G/L Distribution Report - Summary

From Date: 01/01/2015 - To Date: 12/31/2015

G/L Account Number	G/L Date	Due To/From Fund	Project	Transactions	Debit Amount	Credit Amount
	11/30/2015			1	\$0.00	\$610.96
	12/31/2015			1	\$0.00	\$12,319.34
Account Total: Repay of Home Energy Asst				12	\$0.00	\$73,928.10
Department Total: Fuel Crisis Assistance					\$0.00	\$73,928.10
Fund Total: General					\$0.00	\$1,880,597.35
Grand Total:				260	\$0.00	\$1,880,597.35

Social Services - Overtime Report - Comparison 2014/2015

Week End	2014 OT	2015 OT	Reason	CPS (After Hrs/OnCall)	Foster Care	APS/CASA	Preventive	Medicaid	Chronic Care	TA/Employ	FS/HEAP	Training	CPS	Res Acctg	Fraud
01/11/15	86.79	57.00	CPS-HV,NR, safety assessment/FC-Meeting/CC - backlog	47.55	0.50				7.00				1.95		
01/25/15	126.92	32.98	CPS - HV, safety assessments	29.90									3.08		
02/08/15	142.87	67.93	CPS-HV,NR, abuse invest,court/MED-backlog/FC-HV,court	45.88	2.50			5.00					14.55		
02/22/15	73.55	47.28	CPS-NR,HV/FC-Prison visit/Training - Chronic Care workers	26.43	11.00							7.10	2.75		
03/08/15	96.82	78.99	CPS - NR,HV,Removal/FC-Backlog/Prev-Respite/TA Training	34.17	11.40		2.42					25.90	5.10		
03/22/15	72.44	105.28	CPS-NR,HV/FC-Prison visit,Backlog/Training - TA	27.18	56.10							18.40	3.60		
04/05/15	79.86	49.89	CPS-NR,Removal,SA/FC-Backlog/TA-w/Client	22.09	20.60				0.50				6.70		
04/19/15	54.42	47.75	CPS-NR,SA,HV/FC-Court,Home Study, Backlog/Prev-Emerg Placem	31.98	9.40		1.92						4.45		
05/03/15	57.53	42.37	CPS-NR,Safety Assessment/FC-2 staff - court ordered prison visit	29.17	10.90								2.30		
05/17/15	56.91	57.67	CPS - NR,HV,Notes,closing investigations	34.57								9.50	1.70		
05/31/15	69.25	66.32	CPS-HV,Court/FC-Prison Visit,Mtg/Training-New Fraud Investigator	46.72	8.50								12.00		
06/14/15	92.39	59.68	CPS - Backlog, notes	47.68									10.75		
06/28/15	55.40	48.45	CPS-Backlog,notes/FC-child to Albany Med	35.50	2.20								3.10		
07/12/15	31.09	28.04	CPS-NR,Safety Assessment, Coverage/FC-Court	23.94	1.00								2.00		
07/26/15	65.14	33.81	CPS - Safety Assessment/FC-Home Study/Preventive-Investigation	27.28	4.20		0.33						2.00		
08/09/15	46.72	49.68	CPS-NR,HV,Assessment/Preventive - Court	44.01			0.37					2.50	2.80		
08/23/15	33.22	30.34	FC-Court,Child appl,phone calls/Preventive- emergency	27.14	2.20		1.00						2.00		
09/06/15	90.95	43.40	CPS - NR, Safety Assessment, Removal	41.40									0.70		
09/20/15	97.05	31.70	CPS - Safety assessment, FC- Emergency, drug testing	26.42	1.48							3.10	19.35		
10/04/15	83.85	50.92	CPS - NR, Safety Assessment, Removal/FC-Case management	28.97	2.60								5.70		
10/18/15	52.27	37.82	CPS-NR,Assessment, Notes/FC-Court, Case management	27.82	4.3								5.18		
11/01/15	42.58	21.90	CPS-NR,Assessment, Notes, HV/FC-Court, Transport/Coverage	14.85	1.87								16.15		
11/15/15	43.56	75.57	CPS-HV,Safety Assess,Court,FC-Home Study,Foster Parent Training	39.12	20.30								9.00		
12/06/15	21.17	65.42	CPS-HV,Safe Assess, FC-Foster Parent Training,Prison Visit	32.92	17.50							6.00	23.25		
12/13/15	54.85	130.82	CPS-NR,Assess,Notes,FC-Backlog,Children xmas party,TA/MA Training	57.49	20.50		0.83					28.75	23.40		
12/27/15	36.16	81.51	CPS-NR,Assess,Removal,Notes, FC-Backlog/Transport/CC-backlog	30.74	9.52				3.00			14.85	23.40		
Totals	1763.76	1442.52		880.92	218.57	0.83	6.04	5.00	10.00	0.50	0.00	116.10	204.66	0.00	0.00