

**Public Safety Committee  
Sheriff's Committee Agenda  
November 20, 2017**

Committee Members: Montesi, Geraghty, Girard, Brock, Seeber, Simpson, Vanselow, Braymer and MacDonald

- I. Committee meeting called to order by Chairman
- II. Motion to approve minutes of prior committee meeting
- III. Action Agenda
  - A. Request Resolution for a New Contract with Lexis Nexis to provide mandated law library system for inmates of Warren County Correctional Facility.
  - B. Resolution Request for Transfer of Funds.
- IV. Referral / Pending Items
- V. Topics for Discussion
  - A. We currently have (1) vacancy for Correction Officer and (2) vacancies for Correction Sergeant. We have hired (3) Correction Officers since the October Committee meeting.
  - B. Corrections Overtime expenses as of 11/18/2017, we have expended \$585,886.
- VI. Motion to adjourn

Attachments:

- #1. Resolution Request Form #3, Lexis Nexis
- #2. Resolution Request Form #10, Transfer of Funds

## ***RESOLUTION REQUEST FORM NO. 3***

### ***Request for New Contract***

**DEPARTMENT NAME:** Sheriff's Office

**DATE:**

- (a) Is this a Result of a Bid or Request for Proposal? **No**
- (b) Purpose of Contract: **Provide mandated Law Library system for inmates.**
- (c) Name of Contractor: **Lexis Nexis.**
- (d) Address of Contractor: **1275 Broadway, Albany, New York 12204**
- (e) Contractor's Contact Person and Telephone Number: **Kim Shields, Client Manager: (573) 673-4230**
- (f) Has or will the Contract be provided, if so, please attach: **County Attorney has Contract**
- (g) Commencement Date of Contract: **01/01/2018**
- (h) Termination Date of Contract: **12/31/2020**
- (i) Payment Provisions:
  - i) lump sum amount **\$29,760 (annual amount 2018, 2019, 2020)**
  - ii) hourly rate amount
  - iii) total amount not to exceed **\$89,280**
  - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc. **Annually**)
- (j) Where are the Funds for this Contract? List Budget Code, Object Code, Full Title\* and Amount: **OR Capital Project OR Capital Reserve Project Number, Title, and Amount: **Warren County Sheriff's Office Commissary Account****

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

\*as listed in budget and LOGOS



**RENEW YOUR LEXISNEXIS® PRISON SOLUTION  
ORDER NOW BY SIGNING THIS LETTER AGREEMENT**

Thank you for using LexisNexis as your provider of legal research materials for correctional facilities. We are dedicated to giving you efficient and cost-effective solutions, including the *Shepard's*® Citations Service.

Currently you are using the LexisNexis services pursuant to the Prison Solution Order (the "Order") that allows you to use selected information relevant to your needs in exchange for a fixed monthly commitment. The Order offers you access to comprehensive content and ease-of-use. However, your LexisNexis service under this Order will expire soon.

By signing below, you may extend the term for the following period at the monthly commitment rate indicated below:

<b>Customer Name:</b>	Warren County Jail	<b>Account Number:</b>	0000268147 - LN Software
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Extension Period		Monthly Commitment	
Beginning	<u>1/1/2018</u> to <u>12/31/2018</u>	\$	<b>1680</b>
Beginning	<u>1/1/2019</u> to <u>12/31/2019</u>	\$	<b>1680</b>
Beginning	<u>1/1/2020</u> to <u>12/31/2020</u>	\$	<b>1680</b>

**Customer hereby certifies that they have \_\_\_\_\_ number of terminals**

This letter agreement shall also serve as your acceptance of the new General Terms & Conditions for Use of the Online Services effective September 1, 2010 set forth at [www.lexisnexis.com/terms/general](http://www.lexisnexis.com/terms/general).

These changes will be effective on 1/1/2018. Except as expressly stated above, all other terms of the Order will remain unchanged and unaffected by this letter agreement.

If you have any questions about your new rate or would like to see a comparison of other pricing options, please contact me, your account representative, at:

Kim Shields, Esq.  
Client Manager - Corrections  
Phone: 573-673-4230  
Fax: 866-960-4533

[kim.shields@lexisnexis.com](mailto:kim.shields@lexisnexis.com)

If you agree with the new monthly commitment and extended term, then please print this message, provide the information requested for the total number of terminals/licenses/locations then sign and date. Upon completion, return the signed letter agreement to me at the fax number listed above. In order for these changes to be effective on the date listed above, please sign and return this letter agreement no later than the 20th of December.

If you do not respond to this letter, please be advised that the Order will expire at the end of the current commitment period and you will no longer receive updated materials.

**Customer Name:** Warren County Jail

**Authorized Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_



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By signing below, you may extend the term for the following period at the monthly commitment rate indicated below:

<b>Customer Name:</b>	Warren County Jail	<b>Account Number:</b>	0000268147 - TST Maintenance
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Extension Period				Monthly Commitment	
<b>Beginning</b>	<u>1/1/2018</u>	<b>to</b>	<u>12/31/2018</u>	<b>\$</b>	<b>800</b>
<b>Beginning</b>	<u>1/1/2019</u>	<b>to</b>	<u>12/31/2019</u>	<b>\$</b>	<b>800</b>
<b>Beginning</b>	<u>1/1/2020</u>	<b>to</b>	<u>12/31/2020</u>	<b>\$</b>	<b>800</b>

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**Customer Name:** Warren County Jail \_\_\_\_\_

**Authorized Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**RESOLUTION REQUEST FORM NO. 10**

***Request for Transfer of Funds***

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

**DEPARTMENT NAME:** Sheriff's Office

**SIGNED:**

**DATE:** 11-20-2017

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.3110 110	Law Enforcement Salaries Regular	A.3110 120	Law Enforcement Salaries Overtime	\$60,000.00
A.3110 110	Law Enforcement Salaries Regular	A.3110 130	Law Enforcement Part-time Salaries	\$30,000.00
A.3150 110	Corrections Salaries Regular	A.3150 120	Corrections Salaries Overtime	\$50,000.00
A.3150 130	Corrections Salaries Part-time	A.3150 120	Corrections Salaries Overtime	\$50,000.00

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			

Please state reason for transfer request:

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