

OFFICE OF THE WARREN COUNTY CLERK
PAMELA J. VOGEL, COUNTY CLERK
SUEANNE S. LINEHAN, DEPUTY

**Warren County Support Services Committee: Co. Clerk/DMV
Monday ~ Nov. 27, 2017 ~ 10 a.m.**

- I. Committee Meeting Call to Order: Supervisor Edna Frasier
- II. Motion to approve minutes of prior committee meeting
- III. Action Agenda/New Business:

A. Transfer of Funds: A. 1410 130 P/T Salaries to A. 1410 120 OT: \$ 500

Due to an unanticipated and unusually high staff shortage/leave in the DMV in Sept. & Oct. 2017, additional OT was necessary in order to provide office coverage. Office leave for Nov. & Dec. (holidays) will likewise impact staffing and need for supervisory coverage.

- B. **Resolution Request:** To allow County Clerk to submit LGRMIF grant on behalf of the RSC/Archives for purposes of addressing digital conversion of long-term paper files. Model to be used can be applied to active case files in accordance with NYS approved digital requirements and industry standards. Project goal will have positive impact on RSC storage capabilities.

Rationale: Warren County has had a successful history with the LGRMIF with approximately \$ 1 million received in grant funds, most written and administered by the County Clerk 1991-2010. Applications focused on all aspects of records and archival management. Additionally, the Warren County RSC/Archives was recently recognized by the New York State Archives and Archives Partnership Trust for Excellence in Archival Program Development, Oct. 24 2017. Application submission deadline: January 16, 2018.

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

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

DEPARTMENT NAME: County Clerk

SIGNED: 

DATE: 11/17/2017

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A 1410 130	Part Time Salaries	A 1410 120	Overtime Salaries	\$ 500.00

Please state reason for transfers requested:

To balance overtime account - due to unanticipated staff leave (Sept-Oct) and upcoming holiday leave (Nov-Dec.)

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.

RESOLUTION REQUEST FORM NO. 5

Request to Apply for a Grant Application and Grant Agreement

DEPARTMENT NAME: County Clerk *Janetla Vogt*

DATE: Nov. 17, 2017

- (a) Purpose of Grant:
To allow the Warren County Clerk to submit an application to the Local Govt Records Management Fund for purposes of addressing digital conversion of long-term paper files.
- (b) Name of Grantor:
New York State Local Government Records Management Improvement Fund
- (c) Address of Contractor: **New York State Archives
CEC Rm 99B47
Albany NY 12230**
- (d) Grantor's Contact Person and Telephone Number:
Denis Meadows (518) 474-5614
- (e) Has or Will the Grant Application or Grant Agreement be provided, if so, Please Attach? **Application is in electronic format. Attachments may be in hardcopy.**
- (f) Effective Date of Grant: **Upon receipt/award (approx. Sept 2018)**
- (g) Termination Date of Grant: **June 30, 2019**
- (h) Total Dollar Amount Involved (not to exceed): **\$ 75,000**
- (i) Deadline to Submit Grant Application and/or Grant Agreement:
Jan. 16, 2018
- (j) Is a Budget amendment required? If yes, also complete and submit Form No. 7.
- (k) Are the funds to go into a Capital Project or Capital Reserve Project? **No** If yes, also complete and submit Form No. 8 or Form No. 9, as applicable.
- (i) Is a Local Share Required? **No** If Yes, Where are the Funds? List Budget Code, Object Code, Full Title* and Amount **OR** Capital Project **OR** Capital Reserve Project Number and Title and Amount:

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

*as listed in budget and LOGOS