

Criminal Justice  
Warren County Assigned Counsel  
AGENDA  
March 22, 2021

Committee Members: SHEPLER, Strough, Leggett, Diamond and Driscoll

- I. Committee meeting called to order by Chairman
- II. Motion to approve minutes of prior committee meeting
- III. Action Agenda/New Business
  1. **Request: Renew LASNNY Family Court Conflict Defender Contract for an additional two years.**
  2. **Request: Enter into a contract for LASNNY Grant Contract #800052, Distribution #8;**
  3. **Request: Enter into a contract for LASNNY Grant Contract #100052, Distribution #10; and**

**Rationale 1-3:** To have same approved by Committee to allow smooth and timely pay outs and County reimbursements on the Conflict Defender contract and the LASNNY OILS grants as listed here: C#800052 runs from January 1, 2018 until grant funds are exhausted and C#100052 runs from January 1, 2020 until grant funds are exhausted.
  4. **Request: Add to the Supervising Attorney Contract:** The reimbursement of Attorney Secure Pass, Notary Fees and Professional Organization Dues as a matter of course for the duration of the contract and until grant funds are exhausted.

**Rationale:** Grant funds are specifically allotted for these fees and are fully reimbursable to the county.
- IV. Referral/Pending Items:
- V. Information for Discussion/Review:
- VI. Privilege of the floor and public comment (please allow for 15 second delay on live stream meetings)
- VII. Motion to adjourn

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**Attachments**

- #1 Resolution Request Form #3 (x2)
- #2 Resolution Request Form #4 (x2)

## *RESOLUTION REQUEST FORM NO. 4*

### *Request for Extending, Rescinding or Amending Existing Contract*

DEPARTMENT NAME: ASSIGNED COUNSEL

DATE: March 22, 2021

- (a) Purpose of Contract Change: To extend the current contract with LAASNY for two years to continue legal representation of indigents in Family Court Conflict matters. The total contract amount for a period of two years is \$290,800.00, per year is \$145,400.00 and \$12,116.66 per month from 5/1/21 to 4/30/23.
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: Past resolutions - 99 of 2006 (as amended by 391); 265 of 2008; 274 of 2009; 270 of 2010, 343 of 2011; 230 of 2012; 272 of 2013; 251 of 2014; 198 of 2015; 330 of 2017 and 186 of 2019.
- (c) Name of Contractor: Legal Aid Society of Northeastern New York
- (d) Address of Contractor: 55 Colvin Ave Albany, NY 12206
- (e) Contractor's Contact Person and Telephone Number: Lillian Moy, 587-5188
- (f) Commencement Date of Extension: May 1, 2021
- (g) Termination Date of Extension: April 30, 2023
- (h) Payment Provisions:
  - i) lump sum amount
  - ii) hourly rate amount
  - iii) total amount not to exceed \$145,400.00 per year.
  - iv) how will payments be made (monthly, upon completion of the legal matters.) \$12,116.66 monthly
- (i) Where are the Funds for this Contract? List Budget Code, Object Code, Full Title\* and Amount: OR Capital Project OR Capital Reserve Project Number, and Title, and Amount: A. 11170 470, Legal Defense-Indigents, Contracts.

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

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

**DEPARTMENT NAME:** Assigned Counsel

**DATE:** 3/22/2021

- (a) Is this a Result of a Bid or Request for Proposal? **No**
- (b) Purpose of Contract: **To authorize an agreement with Legal Aid Society of Northeastern New York, Inc. for paralegal/case management support services for indigent persons in the Warren County Family Court with funding from the Office of Indigent Legal Services (OILS) grant (Contract #C800052)**
- (c) Name of Contractor: **Legal Aid Society of Northeastern New York, Inc**
- (d) Address of Contractor: **55 Colvin Avenue, Albany, NY 12206**
- (e) Contractor's Contact Person and Telephone Number: **Lillian Moy**
- (f) Has or will the Contract be provided, if so, please attach:
- (g) Commencement Date of Contract: **1/1/2018**
- (h) Termination Date of Contract: **Upon termination of grant funds from NYS**
- (i) Payment Provisions:
  - i) lump sum amount
  - ii) hourly rate amount
  - iii) total amount not to exceed **\$54,514.00**
  - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc.
- (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: **A.1170 470 Legal Defense - Indigents, Contract****

**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

## *RESOLUTION REQUEST FORM NO. 3*

### *Request for New Contract*

DEPARTMENT NAME: Assigned Counsel

DATE: 3/22/2021

- (a) Is this a Result of a Bid or Request for Proposal? **No**
  
- (b) Purpose of Contract: **To authorize an agreement with Legal Aid Society of Northeastern New York, Inc. for paralegal/case management support services for indigent persons in the Warren County Family Court with funding from the Office of Indigent Legal Services (OILS) grant (Contract #C100052)**
  
- (c) Name of Contractor: **Legal Aid Society of Northeastern New York, Inc**
  
- (d) Address of Contractor: **55 Colvin Avenue, Albany, NY 12206**
  
- (e) Contractor's Contact Person and Telephone Number: **Lillian Moy**
  
- (f) Has or will the Contract be provided, if so, please attach:
  
- (g) Commencement Date of Contract: **1/1/2020**
  
- (h) Termination Date of Contract: **Upon termination of grant funds from NYS**
  
- (i) Payment Provisions:
  - i) lump sum amount
  - ii) hourly rate amount
  - iii) total amount not to exceed **\$45,000.00**
  - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc.
  
- (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: **A.1170 470 Legal Defense - Indigents, Contract****

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

## ***RESOLUTION REQUEST FORM NO. 4***

### ***Request for Extending, Rescinding or Amending Existing Contract***

**DEPARTMENT NAME:** Assigned Counsel

**DATE:** March 22, 2021

- (a) Purpose of Contract Change: Add the following language to the amended contract relative to the reimbursement of expenses as same pertains to Attorney Secure Pass, Notary Fees and Professional Organization Dues: "The County, at its sole option, may make available for use by the Supervising Attorney grant funds for the reimbursement of expenses as same pertains to Attorney Secure Pass, Notary Fees and Professional Organization Dues relating solely to services to be performed under the agreement in accordance with procedures established by the Assigned Counsel Administrator. Same expires when grant funds are exhausted.
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: **Resolution 419 of 2019 and Resolution 494 of 2019.**
- (c) Name of Contractor: **Robert Gregor, Esq.**
- (d) Address of Contractor: **3 Lake Avenue, Lake George, NY 12845**
- (e) Contractor's Contact Person and Telephone Number: **Same, 518-796-7044**
- (f) Commencement Date of Extension: **April 1, 2021**
- (g) Termination Date of Extension: **Upon exhaustion of grant funds.**
- (h) Payment Provisions:
  - i) lump sum amount
  - ii) hourly rate amount
  - iii) total amount not to exceed **Available grant funds**
  - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc. **as needed**)
- (i) Where are the Funds for this Contract? List Budget Code, Object Code, Full Title\* and Amount: **OR Capital Project OR Capital Reserve Project Number, and Title, and Amount: A.1170 470, Legal Defense Indigents, CSTWIDEHH49. Caseload Relief.**

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