

**Human Services Committee**  
**Warren County Department of Social Services**

COMMITTEE MEETING AGENDA

November 22, 2021

**Committee Members:** Supervisors Driscoll, Frasier, Magowan, Shepler, and Smith. *Chair of the Board shall serve as an Ex-Officio member when needed in accordance with the Section C(4) of the Rules of the Board.*

I. Committee meeting called to order by Chair

II. Motion to approve minutes of prior Committee meeting

III. Action Agenda/New Business

1. **Request: Notice of Intent to Fill** (2) Caseworker positions #TBD & #TBD, Grade 16, Base Salary \$47,023 due to anticipated promotions, effective January 2022.  
**Rationale:** The positions are mandated and reimbursed.
2. **Request: Notice of Intent to Fill** the position of Caseworker #20 in the Child Protective Services Unit, Grade 16, Base Salary \$47,023(2022)/\$45,831(2021), due to resignation effective November 16, 2021.  
**Rationale:** The position is mandated and reimbursed.
3. **Request: Notice of Intent to Fill** the position of Social Welfare Examiner #12 in the Temporary Assistance unit, Grade 8 (Step 4), Base Salary \$36,957, due to promotion effective June 29, 2021.  
**Rationale:** The position is mandated and reimbursed.
4. **Request: Notice of Intent to Fill** (2) Senior Caseworker positions (#9 & #10), Grade 18, Base Salary \$50,384, due to creation (Budget), effective January 1, 2022.  
**Rationale:** Improved caseload management and supervision due to increasing caseloads and regs.
5. **Request: Notice of Intent to Fill** Legal Clerk III #1, in the Legal Unit, Grade 10, Base Salary \$40,784, due to creation (Budget), effective January 1, 2022.  
**Rationale:** This position can fulfill more complex legal work: Fair Hearings, Departmental Contracts, etc.
6. **Request: Notice of Intent to Fill** the position of Sr. Clerk #1, in the Legal Unit, Grade 4, Base Salary \$31,789, due to creation (Budget), effective January 1, 2022.  
**Rationale:** This position has evolved beyond the obsolete Keyboard Specialist position w/more responsibilities.
7. **Request Resolution:**  
-**Request Transfer of Funds**, from Salaries-Regular, to Salaries Overtime (\$100,000), Salaries-Part Time (\$25,000), and Unemployment Insurance(\$6,000).  
**Rationale:** This covers overtime and part time salaries through year-end 2021.
8. **Request Resolution:**  
-**Request to Amend the Budget**, to increase revenue and expenses to reflect the receipt of Supplemental Child Care Disaster Relief & Recovery Funds in the amount of \$11,458.  
**Rationale:** Reference: Local Commissioner's Memorandum. Qualifying disaster took place in Warren County as determined by the New York State Office of Children & Family Services.

9. **Request Resolution:**

-Request continuation of the agreement between the Department of Social Services and the Warren County Employment and Training Administration, for Temporary Assistance and SNAP Units to provide employment referrals, for the term commencing January 1,2022 and terminating December 31, 2022, for a total amount not to exceed \$98,123.30 (2021).

**Rationale:** This collaborative effort will assist and improve outcomes pertaining to job seeking efforts; thereby increasing self sufficiency for Social Services recipients.

10. **Request Resolution:**

-Request to continue contractual relationships with Agencies listed in Schedule A (Special Delinquency Prevention Programs 2021).

**Rationale:** These are renewable annually and include Alternative Sentencing, Home Based Parent Education, Youth & Family Counseling and Wait House.

IV. Information for Discussion and/or Review

Chris Hanchett, Commissioner

-Commissioner's Report of Activities & Updates; (Previously distributed by Committee Chairman Driscoll)

Julie Montero, Fiscal Manager

-Monthly Reports: Revenue, Expenditures and Overtime.

**PLEASE SEE ATTACHMENT #11**

Amy McByrne, Director, Countryside Adult Home

V. Referrals/Pending Items: None

VI. Privilege of the Floor and public comment (please allow 15 second delay on live stream meetings)

VII. Motion to Adjourn

**ATTACHMENTS:**

- 1) Notice of Intent to Fill- Caseworkers #TBD & #TBD
- 2) Notice of Intent to Fill- Caseworker#20
- 3) Notice of Intent to Fill -Social Welfare Examiner #12
- 4) Notices of Intent to Fill-2 Sr. Caseworker positions (#9, #10)
- 5) Notice of Intent to Fill Legal Clerk III #1,
- 6) Notice of Intent to Fill Sr. Clerk #1
- 7) Request to Transfer Funds (\$100,000/\$25,000/\$6,000)
- 8) Request to Amend Budget, Supp. Child Care Funds \$11,458
- 9) Renew Agreement with Employment & Training Admin, for referrals
- 10) Request continuation of contractual relationships with Agencies listed in Schedule A SDDP
- 11) Monthly Revenue and Expenditure Reports

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 #TBD (1 of 2) Base Salary of Position: \$47,023 Grade: 16
Filling at Step # (If Known):
Budget code and title: A6010 110 - Salaries - Regular Union [checked] Non-Union [ ]
This position is vacated due to: [ ] Retirement [ ] Resignation [ ] Termination [checked] Promotion [ ] Other
Employee No./Last Name: TBD Date of Vacancy: 1/3/22
Is this position mandated? [checked] Yes [ ] No Is the position reimbursable? [checked] Yes [ ] No
Source of reimbursement: [checked] Federal 50% [checked] State 25% [ ] Other %

CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

[ ] Competitive-active eligible list [checked] 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. [Signature]
Human Resources Director has approved this form when initialed. 11/18/21

COUNTY ADMINISTRATOR COMPLETES THIS SECTION

[checked] The Administrator has no objection to the filling of the vacancy.
[ ] The Administrator objects to the filling of the vacancy.
Administrator Signature [Signature] Date 11/19/21

BUDGET OFFICER COMPLETES THIS SECTION

[checked] 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 11/22/21

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Human Services
[checked] 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 12/09/21

Attachment # 1

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 #TBD (2 of 2) Base Salary of Position: \$47,023 Grade: 16
Filling at Step # (If Known):
Budget code and title: A6010 110 - Salaries - Regular Union [checked] Non-Union [ ]
This position is vacated due to: [ ] Retirement [ ] Resignation [ ] Termination [checked] Promotion [ ] Other
Employee No./Last Name: TBD Date of Vacancy: 1/3/22
Is this position mandated? [checked] Yes [ ] No Is the position reimbursable? [checked] Yes [ ] No
Source of reimbursement: [checked] Federal 50% [checked] State 25% [ ] Other %

CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

[ ] Competitive-active eligible list [checked] 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. 11/19/21
Human Resources Director has approved this form when initialed. 11/18/21

COUNTY ADMINISTRATOR COMPLETES THIS SECTION

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

Administrator Signature [Signature] Date 11/19/21

BUDGET OFFICER COMPLETES THIS SECTION

[checked] 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 11/22/21

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Human Services
[checked] 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 Bennett F. Duvall Date 12/09/21

# 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 #20 Base Salary of Position: \$45,831 Grade: 16  
Filling at Step # (If Known): \_\_\_\_\_  
Budget code and title: A6010 110 - Salaries - Regular Union  Non-Union   
This position is vacated due to:  Retirement  Resignation  Termination  Promotion  Other  
Employee No./Last Name: Tennant/13293 Date of Vacancy: 11/16/21  
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. POB 11/10/21

Human Resources Director has approved this form when initialed. AD 11/10/21

### 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 11/10/21

### 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 11/16/21

### SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Human 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 Bennet P. Dinsall Date 12/09/21

# 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: 40.02  
Title of Position: Social Welfare Examiner #12 Base Salary of Position: \$36,957 Grade: 8  
Filling at Step # (If Known): \_\_\_\_\_  
Budget code and title: A6010 110 - Salaries - Regular Union  Non-Union   
This position is vacated due to:  Retirement  Resignation  Termination  Promotion  Other  
Employee No./Last Name: Darcy/12998 Date of Vacancy: 6/29/21  
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. AS 11/10/21

### 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 11/10/21

### 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 11/13/21

### SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Human 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 Bennet P. Dwyer Date 12/09/21

# 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: 40.01  
Title of Position: Senior Caseworker #9 Base Salary of Position: \$50,384 Grade: 18  
Filling at Step # (If Known): \_\_\_\_\_  
Budget code and title: A6010 110 - Salaries - Regular Union  Non-Union   
This position is vacated due to:  Retirement  Resignation  Termination  Promotion  Other Creation  
Employee No./Last Name: \_\_\_\_\_ Date of Vacancy: 1/1/22  
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. POB 11/10/21  
Human Resources Director has approved this form when initialed. AA 11/10/21

### 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 11/19/21

### 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 11/22/21

### SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Human 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 Bennet F. Duval Date 12/09/21

# 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: 40.01  
Title of Position: Senior Caseworker #10 Base Salary of Position: \$50,384 Grade: 18  
Filling at Step # (If Known): \_\_\_\_\_  
Budget code and title: A6010 110 - Salaries - Regular Union  Non-Union   
This position is vacated due to:  Retirement  Resignation  Termination  Promotion  Other Creation  
Employee No./Last Name: \_\_\_\_\_ Date of Vacancy: 1/1/22  
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. Pay 11/10/21  
Human Resources Director has approved this form when initialed. 11/11/21

### 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 11/19/21

### 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 11/22/21

### SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Human 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 Bennett F. Dussilly Date 12/09/21

# 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: 40.02  
Title of Position: Legal Clerk III #1 Base Salary of Position: \$40,784 Grade: 10  
Filling at Step # (If Known): \_\_\_\_\_  
Budget code and title: A6010 110 - Salaries - Regular Union  Non-Union   
This position is vacated due to:  Retirement  Resignation  Termination  Promotion  Other Creation  
Employee No./Last Name: \_\_\_\_\_ Date of Vacancy: 1/1/22  
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. 11/10/21  
Human Resources Director has approved this form when initialed. 11/19/21

### 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 11/19/21

### 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 11/22/21

### SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Human 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 Bennet F. Dusselhy Date 12/09/21

# 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: 40.02  
Title of Position: Senior Clerk #1 Base Salary of Position: \$31,789 Grade: 4  
Filling at Step # (If Known): \_\_\_\_\_  
Budget code and title: A6010 110 - Salaries - Regular Union  Non-Union   
This position is vacated due to:  Retirement  Resignation  Termination  Promotion  Other Creation  
Employee No./Last Name: \_\_\_\_\_ Date of Vacancy: 1/1/22  
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. 12/10/21  
Human Resources Director has approved this form when initialed. 11/10/21

### 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 11/19/21

### 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 11/22/21

### SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Human 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 Bennett R. Dussallz Date 12/09/21

Attachment #7

**RESOLUTION REQUEST FORM NO. 10**

*Request for Transfer of Funds*

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

DEPARTMENT NAME: Social Services

SIGNED:

DATE: 11/15/2021

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.6010 110	Salaries - Regular	A.6010 120	Salaries-Overtime	\$100,000
A.6010 110	Salaries - Regular	A.6010 130	Salaries - Part time	\$25,000
A.6010 850	Unemployment Insurance	A. 6010 855	Disability	\$6,000

Please state reason for transfers requested: To cover overtime and part time salaries & disability through 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 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. 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: Social Services

DATE: 11/15/21

- (a) Purpose of Amendment: To increase expenses and revenue based on allocation received per 21-OCFS-LCM-29, money to be used for Child Care Relief.
- (b) Appropriation Code, Object Code, Full Title and Amount: A.6010 470 Contract \$11,458
- (c) Revenue Code (with title), and Amount: A.6010 3610 State Aid Admin \$11,458



## Office of Children and Family Services

Kathy Hochul  
Governor

52 WASHINGTON STREET  
RENSSELAER, NY 12144

Sheila J. Poole  
Commissioner

### Local Commissioners Memorandum

**Transmittal:** 21-OCFS-LCM-29  
**To:** Local District Commissioners  
**Issuing Division/Office:** Division of Child Care Services  
Division of Administration  
**Date:** September 23, 2021  
**Subject:** Supplemental Child Care Disaster Relief and Recovery Fund Allocations  
**Contact Person(s):** Please contact the following persons for questions regarding this LCM:

- Program Questions  
Robert Korycinski, OCFS Division of Child Care Services  
518-408-0763 [Robert.Korycinski@ocfs.ny.gov](mailto:Robert.Korycinski@ocfs.ny.gov)
- Claiming Questions
  - Regions 1-5 Lauren Horn: 518-474-7549  
[otda.sm.Field\\_Ops.I-IV@otda.ny.gov](mailto:otda.sm.Field_Ops.I-IV@otda.ny.gov)
  - Region 6 (NYC) Michael Simon: 212-961-8250  
[Michael.Simon@otda.ny.gov](mailto:Michael.Simon@otda.ny.gov)

**Attachments:** A: *New York State Child Care Supplemental Disaster Relief Fund Social Services District Allocations*  
B: *Attachment for U.S. Department of Health and Human Services Grants*

#### I. Purpose

The purpose of this Local Commissioners Memorandum (LCM) is to advise the 18 impacted local departments of social services (LDSSs) of their Supplemental Appropriations for Disaster Relief Act of 2019 allocations, made available because a qualifying disaster took place in their service area in October 2019. This LCM also provides information on which districts were impacted, the allocations to those districts, how districts may use the funds, including planning, claiming and documenting requirements.

## II. Background

Supplemental Appropriations for Disaster Relief Act of 2019 (Public Law 116-20) made \$30 million available to state, territory and tribal lead agencies administering the Child Care and Development Fund (CCDF) program for necessary expenses related to the consequences of hurricanes, typhoons, wildfires and earthquakes that occurred in calendar year 2018, and tornadoes and floods that occurred in calendar year 2019. New York State was awarded \$572,917 for necessary expenses related to severe storms, straight-line winds and flooding that occurred October 31, 2019, and led to a disaster declaration in the following counties: Chautauqua, Chenango, Cortland, Erie, Essex, Fulton, Hamilton, Herkimer, Jefferson, Lewis, Madison, Montgomery, Oneida, Oswego, Otsego, Saratoga, Tioga and Warren.

## III. Program Implications

### A. ALLOCATION INFORMATION

Attachment A provides LDSS allocations for the Child Care Supplemental Disaster Relief (CCSDR) funds. The allocation methodology is based on each impacted LDSS's proportionate share of the New York State Child Care Block Grant (NYSCCBG) allocations for SFY 2021-22.

Allowable activities for CCSDR funds include, but are not limited to the following:

- Renovating, Repairing or Rebuilding Child Care Facilities
- Materials, Supplies, Furnishing, Vehicles and Equipment
- Mental Health Consultation
- Quality Improvement Activities (including provider training)
- Direct Services to Families

The above is not an exhaustive list as these funds may also be used for other allowable CCDF activities that address the needs of the impacted communities and are directly related to the consequences of the natural disaster. These funds may be used for obligations incurred back to November 1, 2019; however, these funds are NOT available for costs that are reimbursed by the Federal Emergency Management Agency (FEMA), or under a contract for insurance or by self-insurance.

It is strongly recommended that the LDSS partner with their local Child Care Resource and Referral Agency in this effort.

### B. REIMBURSEMENT

Claims for expenditures will be reimbursed up to the amount allocated as referenced in Attachment A. There is no Maintenance of Effort requirement for these funds.

## ATTACHMENT A

NEW YORK STATE  
CHILD CARE SUPPLEMENTAL DISASTER RELIEF FUNDS  
SOCIAL SERVICES DISTRICT ALLOCATIONS

District	Allocation
Chautauqua	\$40,104
Chenango	\$5,729
Cortland	\$11,458
Erie	\$286,459
Essex	\$5,729
Fulton	\$5,729
Jefferson	\$17,190
Hamilton	\$5,729
Herkimer	\$11,458
Lewis	\$5,729
Madison	\$11,458
Montgomery	\$11,458
Oneida	\$74,479
Oswego	\$22,917
Otsego	\$11,458
Saratoga	\$22,917
Tioga	\$11,458
Warren	\$11,458
Total	\$572,917

**RESOLUTION REQUEST FORM NO. 4**

*Request for Extending, Rescinding or Amending Existing Contract*

DEPARTMENT NAME: Social Services

DATE: 11/22/21

- (a) Purpose of Contract Change:  
To continue the Memorandum of Understanding between Warren County Dept. of Social Services and Warren County Employment & Training Admin., for the Temp. Assist. and SNAP Units to provide employment referrals.
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract:  
Resolution No. 387 of 2019
- (c) Name of Contractor:  
Warren County Employment & Training Administration
- (d) Address of Contractor: 333 Glen St., Glens Falls, NY 12801
- (e) Contractor's Contact Person and Telephone Number:  
518.743-0925
- (f) Commencement Date of Extension: 1/1/22
- (g) Termination Date of Extension: 12/31/22
- (h) Payment Provisions: i) lump sum amount  
ii) hourly rate amount  
iii) total amount not to exceed 98,123.30  
iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc.
- (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:

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: SOCIAL SERVICES

DATE: 11/22/21

- (a) Purpose of Contract Change: Requesting continuation of contractual relationships with agencies listed in Schedule "A" for Special Delinquency Prevention Programs.
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: 399 of 2013; 174 of 2015; 154 OF 2017
- (c) Name of Contractor: Catholic Charities of the Diocese of Albany; Catholic Charities of the Diocese of Albany, dba Catholic Charities of Saratoga, Warren and Washington Counties; Warren Hamilton Action Committee for Economic Opportunity, Inc.
- (d) Address of Contractor: See Schedule A
- (e) Contractor's Contact Person and Telephone Number: See Schedule A
- (f) Commencement Date of Extension: January 1, 2021
- (g) Termination Date of Extension: December 31, 2021
- (h) Payment Provisions:
  - i) lump sum amount See Schedule A
  - ii) hourly rate amount
  - iii) total amount not to exceed
  - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc.
- (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:

## SCHEDULE A

### COMMUNITY/AGENCY SUBCONTRACTS

#### 2021 SPECIAL DELINQUENCY PREVENTION PROGRAMS (SDPP) (A.7312.470)

<u>Sponsoring Agency Name/Address</u>	<u>Program Title</u>	<u>Amount</u>
Warren Hamilton Counties Action Committee for Economic Opportunity, Inc. (ACEO) PO Box 968, 190 Maple St. Glens Falls, NY 12801	Alternative Sentencing	\$2,296.00
Catholic Charities of the Diocese of Albany 27 No. Main St. Albany, NY 12203	Homebased Parent Education	\$3,393.00
Catholic Charities of the Diocese Of Albany dba Catholic Charities of Saratoga, Warren and Washington Counties 142 Regent St. Saratoga Springs, NY 12866	Youth & Family Counseling	\$5,311.00
Wait House 10-12 Wait Street Glens Falls, NY 12801		\$ 5,000.00
	TOTAL AMOUNT	<u>\$16,000.00</u>

Expiration date for all contracts is **December 31, 2021**

All contracts are reimbursed 100% by NYS Office of Children & Family Services

BUDGET ANALYSIS

REVENUE AND EXPENDITURES FOR OCTOBER 2021

FUND(S): A

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

EXPENSES	2021 BUDGETED	OCT 2021 EXP	OCT 2020 EXP	2021 YTD ACTUAL	2020 Prior Year Totals
110 Salaries - Regular	\$6,830,796.00	\$520,111.50	\$483,391.88	\$5,375,053.90	\$6,398,281.74
120 Salaries - Overtime	\$75,222.00	\$20,412.72	\$11,056.80	\$107,937.22	\$115,728.69
130 Salaries - Part Time	\$212,911.00	\$14,720.55	\$14,045.88	\$125,943.88	\$137,807.23
100's PERSONAL SERVICES Total	\$7,118,929.00	\$555,244.77	\$508,494.56	\$5,608,935.00	\$6,651,817.66
200's EQUIPMENT	\$56,396.79	\$549.72	\$2.21	\$60,550.63	\$114,338.70
400's CONTRACTUAL	\$22,638,295.00	\$1,185,182.21	\$1,231,353.25	\$15,390,616.18	\$21,497,426.17
800's EMPLOYEE BENEFITS	\$3,516,199.00	\$253,594.67	\$223,220.64	\$2,706,509.63	\$3,291,221.64
<b>TOTALS</b>	<b>\$33,329,819.79</b>	<b>\$1,994,571.37</b>	<b>\$1,963,070.66</b>	<b>\$23,766,611.44</b>	<b>\$31,554,804.17</b>

REVENUES	2021 BUDGETED	OCT 2021 REVENUE	OCT 2020 REVENUE	2021 YTD ACTUAL	2020 Prior Year Totals
	\$15,415,207.00	\$980,714.09	\$1,132,133.10	\$14,731,543.57	\$14,375,930.87

ATTACHMENT #11

# Expense Budget Performance Report

Fiscal Year to Date 10/31/21

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>Personal Services</i>										
110	Salaries - Regular	6,002,306.00	.00	6,002,306.00	450,323.91	.00	4,658,217.99	1,344,088.01	78	5,561,090.20
120	Salaries - Overtime	49,222.00	.00	49,222.00	12,720.31	.00	75,316.01	(26,094.01)	153	67,954.73
130	Salaries - Part Time	59,767.00	.00	59,767.00	8,393.16	.00	42,664.13	17,102.87	71	44,716.36
<i>Personal Services Totals</i>		\$6,111,295.00	\$0.00	\$6,111,295.00	\$471,437.38	\$0.00	\$4,776,198.13	\$1,335,096.87	78%	\$5,673,761.29
<i>Equipment</i>										
210	Furniture/Furnishings	2,000.00	5,500.00	7,500.00	472.50	4,483.29	2,121.75	894.96	88	28,484.66
220										
220	Office Equipment	4,000.00	8,996.79	12,996.79	.00	6,676.93	4,713.63	1,606.23	88	9,555.26
220.1	Office Equipment - Reserve	.00	.00	.00	.00	.00	.00	.00	+++	29,864.62
<i>220 - Totals</i>		\$4,000.00	\$8,996.79	\$12,996.79	\$0.00	\$6,676.93	\$4,713.63	\$1,606.23	88%	\$39,419.88
230										
230	Automotive Equipment	.00	37,650.00	37,650.00	.00	.00	37,650.00	.00	100	17,363.00
230.1	Automotive Equipment - Reserve	.00	12,550.00	12,550.00	.00	.00	12,550.00	.00	100	5,787.00
<i>230 - Totals</i>		\$0.00	\$50,200.00	\$50,200.00	\$0.00	\$0.00	\$50,200.00	\$0.00	100%	\$23,150.00
<i>Equipment Totals</i>		\$6,000.00	\$64,696.79	\$70,696.79	\$472.50	\$11,160.22	\$57,035.38	\$2,501.19	96%	\$91,054.54
<i>Contractual Expense</i>										
410	Supplies	55,000.00	2,227.20	57,227.20	196.35	9,501.78	35,841.49	11,883.93	79	48,478.64
411	Rent-Building/Property	650,000.00	.00	650,000.00	54,166.67	.00	541,666.66	108,333.34	83	650,000.00
418	Ins-General Liability	32,858.00	1,334.80	34,192.80	.00	.00	33,524.80	668.00	98	27,844.03
422	Repair/Maint-Equipment	.00	.00	.00	.00	.00	.00	.00	+++	249.90
423	Telephone	20,000.00	.00	20,000.00	1,009.08	.00	14,922.30	5,077.70	75	18,791.01
424	Postage	27,500.00	.00	27,500.00	.00	.00	16,136.55	11,363.45	59	26,963.13
426	Subscriptions	1,000.00	.00	1,000.00	.00	.00	.00	1,000.00	0	.00
427	Memberships & Dues	5,000.00	113.00	5,113.00	.00	.00	5,113.00	.00	100	4,964.00
428	Data Processing & Internet Fees	5,000.00	.00	5,000.00	297.10	816.00	3,217.29	966.71	81	2,920.57
432	Special Project Supply	95,000.00	.00	95,000.00	.00	.00	16,958.00	78,042.00	18	129,563.00
435	Medical Fees	500.00	1,150.00	1,650.00	111.60	.00	1,480.85	169.15	90	(1,287.09)
436	Advertising Fees	250.00	.00	250.00	.00	.00	.00	250.00	0	397.98
439	Misc Fees & Expenses	7,000.00	25,000.00	32,000.00	142.04	1,007.12	25,163.18	5,829.70	82	18,549.18
440	Legal/Transcript Fees	10,000.00	.00	10,000.00	.00	.00	5,795.00	4,205.00	58	414.00
441	Auto-Supplies & Repair	6,000.00	.00	6,000.00	.00	.00	1,455.35	4,544.65	24	2,535.26
442	Automotive - Gas & Oil	7,000.00	.00	7,000.00	.00	.00	4,282.35	2,717.65	61	3,442.72
443	Auto Rental	.00	.00	.00	.00	.00	.00	.00	+++	177.28
444	Travel/Education/Conference	12,000.00	2,087.00	14,087.00	9,893.52	.00	13,819.57	267.43	98	4,911.64
469	Other Payments/Contributions	2,000.00	.00	2,000.00	.00	.00	1,000.00	1,000.00	50	3,000.00
470	Contract	424,124.00	92,400.00	516,524.00	10,936.21	151,294.34	217,729.29	147,500.37	71	457,131.62
<i>Contractual Expense Totals</i>		\$1,360,232.00	\$124,312.00	\$1,484,544.00	\$76,752.57	\$162,619.24	\$938,105.68	\$383,819.08	74%	\$1,399,046.87

# Expense Budget Performance Report

Fiscal Year to Date 10/31/21

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
<b>Fund A - General</b>										
Department 6010 - Social Services										
EXPENSE										
<i>Employee Benefits</i>										
810	Retirement	840,973.00	.00	840,973.00	66,360.73	.00	662,955.32	178,017.68	79	700,220.30
830	Social Security	378,911.00	.00	378,911.00	27,247.02	.00	276,833.37	102,077.63	73	327,036.34
831	Medicare Contribution	88,618.00	.00	88,618.00	6,372.29	.00	64,743.19	23,874.81	73	76,484.40
860	Hospitalization	1,382,096.00	.00	1,382,096.00	96,144.32	.00	1,102,554.13	279,541.87	80	1,324,589.01
865	Dental Insurance	23,496.00	.00	23,496.00	1,654.88	.00	18,542.71	4,953.29	79	19,340.44
<i>Employee Benefits Totals</i>		\$2,714,094.00	\$0.00	\$2,714,094.00	\$197,779.24	\$0.00	\$2,125,628.72	\$588,465.28	78%	\$2,447,670.49
<i>Other Benefits</i>										
840	Workmen's Compensation	30,520.00	.00	30,520.00	.00	.00	30,519.22	.78	100	39,605.51
850	Unemployment Insurance	10,000.00	.00	10,000.00	.00	.00	.00	10,000.00	0	276.00
855	Disability	6,000.00	.00	6,000.00	.00	.00	5,492.52	507.48	92	785.03
861	Retirees Hospitalization	232,477.00	.00	232,477.00	17,738.83	.00	180,121.78	52,355.22	77	261,031.62
862	Health Insurance Cost Reimbursement	4,500.00	.00	4,500.00	425.00	.00	1,962.81	2,537.19	44	3,097.29
<i>Other Benefits Totals</i>		\$283,497.00	\$0.00	\$283,497.00	\$18,163.83	\$0.00	\$218,096.33	\$65,400.67	77%	\$304,795.45
<b>EXPENSE TOTALS</b>		<b>\$10,475,118.00</b>	<b>\$189,008.79</b>	<b>\$10,664,126.79</b>	<b>\$764,605.52</b>	<b>\$173,779.46</b>	<b>\$8,115,064.24</b>	<b>\$2,375,283.09</b>	<b>78%</b>	<b>\$9,916,328.64</b>
Department 6010 - Social Services Totals		(\$10,475,118.00)	(\$189,008.79)	(\$10,664,126.79)	(\$764,605.52)	(\$173,779.46)	(\$8,115,064.24)	(\$2,375,283.09)	78%	(\$9,916,328.64)
Department 6030 - Countryside Adult Home										
EXPENSE										
<i>Personal Services</i>										
110	Salaries - Regular	828,490.00	31,644.00	860,134.00	69,787.59	.00	716,835.91	143,298.09	83	837,191.54
120	Salaries - Overtime	26,000.00	.00	26,000.00	7,692.41	.00	32,621.21	(6,621.21)	125	47,773.96
130	Salaries - Part Time	153,144.00	958.36	154,102.36	6,327.39	.00	83,279.75	70,822.61	54	93,090.87
<i>Personal Services Totals</i>		\$1,007,634.00	\$32,602.36	\$1,040,236.36	\$83,807.39	\$0.00	\$832,736.87	\$207,499.49	80%	\$978,056.37
<i>Equipment</i>										
210	Furniture/Furnishings	5,000.00	870.00	5,870.00	.00	.00	435.98	5,434.02	7	13,848.00
220	Office Equipment	.00	2,000.00	2,000.00	.00	.00	.00	2,000.00	0	1,321.90
220.1	Office Equipment - Reserve	.00	.00	.00	.00	.00	.00	.00	+++	7,530.00
<b>220 - Totals</b>		<b>\$0.00</b>	<b>\$2,000.00</b>	<b>\$2,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$2,000.00</b>	<b>0%</b>	<b>\$8,851.90</b>
230	Automotive Equipment	.00	15,000.00	15,000.00	.00	.00	.00	15,000.00	0	.00
260	Other Equipment	.00	26,530.00	26,530.00	.00	.00	4,524.83	22,005.17	17	216.51
270	Lawn & Landscaping	350.00	.00	350.00	77.22	.00	107.24	242.76	31	367.75
<i>Equipment Totals</i>		\$5,350.00	\$44,400.00	\$49,750.00	\$77.22	\$0.00	\$5,068.05	\$44,681.95	10%	\$23,284.16
<i>Contractual Expense</i>										
410	Supplies	38,000.00	6,872.62	44,872.62	591.06	14,219.35	28,899.25	1,754.02	96	35,966.17
413	Repair & Maint.-Bldg/Property	20,000.00	10,000.00	30,000.00	305.19	9,273.15	19,874.01	852.84	97	17,938.16
415	Electricity	25,000.00	(1,000.00)	24,000.00	2,493.87	.00	18,662.63	5,337.37	78	25,388.33
416	Oil & Gas-Heating	24,000.00	.00	24,000.00	543.84	.00	17,101.28	6,898.72	71	19,246.17

# Expense Budget Performance Report

Fiscal Year to Date 10/31/21

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>										
417	Water/Sewer/Taxes	9,000.00	420.00	9,420.00	2,662.71	.00	9,415.32	4.68	100	10,388.70
418	Ins-General Liability	10,149.00	56.38	10,205.38	.00	.00	10,176.38	29.00	100	8,419.51
422	Repair/Maint-Equipment	5,000.00	.00	5,000.00	.00	861.00	837.50	3,301.50	34	11,110.27
423	Telephone	3,000.00	500.00	3,500.00	534.45	.00	2,883.53	616.47	82	3,228.22
424	Postage	100.00	.00	100.00	22.00	.00	94.49	5.51	94	174.02
426	Subscriptions	400.00	75.00	475.00	.00	.00	.00	475.00	0	478.99
427	Memberships & Dues	1,400.00	.00	1,400.00	.00	.00	1,344.00	56.00	96	1,344.00
428	Data Processing & Internet Fees	2,000.00	.00	2,000.00	.00	.00	1,962.64	37.36	98	2,544.69
434	Allowances	15,000.00	.00	15,000.00	1,700.00	.00	13,550.00	1,450.00	90	18,800.00
435	Medical Fees	2,000.00	.00	2,000.00	.00	.00	574.50	1,425.50	29	4,267.00
436	Advertising Fees	.00	500.00	500.00	.00	.00	295.00	205.00	59	.00
437	Consulting Fees	8,000.00	(7,000.00)	1,000.00	.00	.00	.00	1,000.00	0	.00
439	Misc Fees & Expenses	1,000.00	.00	1,000.00	.00	.00	612.00	388.00	61	605.25
441	Auto-Supplies & Repair	2,000.00	1,500.00	3,500.00	794.49	.00	3,479.13	20.87	99	1,141.67
442	Automotive - Gas & Oil	2,000.00	.00	2,000.00	.00	.00	1,592.81	407.19	80	1,542.43
444	Travel/Education/Conference	2,000.00	.00	2,000.00	.00	.00	1,628.37	371.63	81	180.00
445	Foods	166,580.00	(5,995.00)	160,585.00	3,573.22	28,975.82	114,894.63	16,714.55	90	136,453.77
451	Medical Supply Expense	4,000.00	5,000.00	9,000.00	13.50	2,462.31	783.09	5,754.60	36	3,592.72
453	Uniforms & Clothing	200.00	.00	200.00	.00	.00	.00	200.00	0	169.95
470	Contract	48,000.00	(3,000.00)	45,000.00	397.00	8,341.06	35,382.44	1,276.50	97	34,739.30
<i>Contractual Expense Totals</i>		<b>\$388,829.00</b>	<b>\$7,929.00</b>	<b>\$396,758.00</b>	<b>\$13,631.33</b>	<b>\$64,132.69</b>	<b>\$284,043.00</b>	<b>\$48,582.31</b>	<b>88%</b>	<b>\$337,719.32</b>
<i>Employee Benefits</i>										
810	Retirement	132,450.00	4,597.02	137,047.02	11,165.17	.00	103,417.82	33,629.20	75	105,598.15
830	Social Security	62,477.00	2,021.39	64,498.39	4,939.21	.00	49,316.06	15,182.33	76	57,442.63
831	Medicare Contribution	14,610.00	472.75	15,082.75	1,155.19	.00	11,533.63	3,549.12	76	13,434.11
860	Hospitalization	182,462.00	.00	182,462.00	12,553.22	.00	142,664.05	39,797.95	78	182,323.32
865	Dental Insurance	3,192.00	.00	3,192.00	245.64	.00	2,743.59	448.41	86	2,877.71
<i>Employee Benefits Totals</i>		<b>\$395,191.00</b>	<b>\$7,091.16</b>	<b>\$402,282.16</b>	<b>\$30,058.43</b>	<b>\$0.00</b>	<b>\$309,675.15</b>	<b>\$92,607.01</b>	<b>77%</b>	<b>\$361,675.92</b>
<i>Other Benefits</i>										
840	Workmen's Compensation	14,764.00	.00	14,764.00	.00	.00	14,763.47	.53	100	18,427.03
850	Unemployment Insurance	9,000.00	.00	9,000.00	.00	.00	.00	9,000.00	0	.00
855	Disability	1,000.00	.00	1,000.00	.00	.00	.00	1,000.00	0	.00
861	Retirees Hospitalization	86,464.00	.00	86,464.00	7,098.08	.00	72,018.50	14,445.50	83	96,309.16
862	Health Insurance Cost Reimbursement	750.00	.00	750.00	.00	.00	.00	750.00	0	86.20
<i>Other Benefits Totals</i>		<b>\$111,978.00</b>	<b>\$0.00</b>	<b>\$111,978.00</b>	<b>\$7,098.08</b>	<b>\$0.00</b>	<b>\$86,781.97</b>	<b>\$25,196.03</b>	<b>77%</b>	<b>\$114,822.39</b>
<b>EXPENSE TOTALS</b>		<b>\$1,908,982.00</b>	<b>\$92,022.52</b>	<b>\$2,001,004.52</b>	<b>\$134,672.45</b>	<b>\$64,132.69</b>	<b>\$1,518,305.04</b>	<b>\$418,566.79</b>	<b>79%</b>	<b>\$1,815,558.16</b>
Department 6030 - Countryside Adult Home Totals		<b>(\$1,908,982.00)</b>	<b>(\$92,022.52)</b>	<b>(\$2,001,004.52)</b>	<b>(\$134,672.45)</b>	<b>(\$64,132.69)</b>	<b>(\$1,518,305.04)</b>	<b>(\$418,566.79)</b>	<b>79%</b>	<b>(\$1,815,558.16)</b>

# Expense Budget Performance Report

Fiscal Year to Date 10/31/21

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	6050 - Public Facil. For Children									
	EXPENSE									
	<i>Contractual Expense</i>									
469	Other Payments/Contributions	15,000.00	.00	15,000.00	.00	.00	.00	15,000.00	0	4,515.56
	<i>Contractual Expense Totals</i>	\$15,000.00	\$0.00	\$15,000.00	\$0.00	\$0.00	\$0.00	\$15,000.00	0%	\$4,515.56
	EXPENSE TOTALS	\$15,000.00	\$0.00	\$15,000.00	\$0.00	\$0.00	\$0.00	\$15,000.00	0%	\$4,515.56
	Department 6050 - Public Facil. For Children Totals	(\$15,000.00)	\$0.00	(\$15,000.00)	\$0.00	\$0.00	\$0.00	(\$15,000.00)	0%	(\$4,515.56)
Department	6055 - Daycare									
	EXPENSE									
	<i>Contractual Expense</i>									
470	Contract	1,000,000.00	.00	1,000,000.00	36,511.57	.00	313,813.07	686,186.93	31	475,051.83
	<i>Contractual Expense Totals</i>	\$1,000,000.00	\$0.00	\$1,000,000.00	\$36,511.57	\$0.00	\$313,813.07	\$686,186.93	31%	\$475,051.83
	EXPENSE TOTALS	\$1,000,000.00	\$0.00	\$1,000,000.00	\$36,511.57	\$0.00	\$313,813.07	\$686,186.93	31%	\$475,051.83
	Department 6055 - Daycare Totals	(\$1,000,000.00)	\$0.00	(\$1,000,000.00)	(\$36,511.57)	\$0.00	(\$313,813.07)	(\$686,186.93)	31%	(\$475,051.83)
Department	6070 - Services for Recipients									
	EXPENSE									
	<i>Contractual Expense</i>									
470	Contract	350,000.00	.00	350,000.00	6,176.09	.00	185,933.07	164,066.93	53	347,176.58
	<i>Contractual Expense Totals</i>	\$350,000.00	\$0.00	\$350,000.00	\$6,176.09	\$0.00	\$185,933.07	\$164,066.93	53%	\$347,176.58
	EXPENSE TOTALS	\$350,000.00	\$0.00	\$350,000.00	\$6,176.09	\$0.00	\$185,933.07	\$164,066.93	53%	\$347,176.58
	Department 6070 - Services for Recipients Totals	(\$350,000.00)	\$0.00	(\$350,000.00)	(\$6,176.09)	\$0.00	(\$185,933.07)	(\$164,066.93)	53%	(\$347,176.58)
Department	6100 - Medicaid									
	EXPENSE									
	<i>Contractual Expense</i>									
470	Contract	11,423,165.00	(15,000.00)	11,408,165.00	633,945.00	.00	8,148,207.00	3,259,958.00	71	11,038,795.00
	<i>Contractual Expense Totals</i>	\$11,423,165.00	(\$15,000.00)	\$11,408,165.00	\$633,945.00	\$0.00	\$8,148,207.00	\$3,259,958.00	71%	\$11,038,795.00
	EXPENSE TOTALS	\$11,423,165.00	(\$15,000.00)	\$11,408,165.00	\$633,945.00	\$0.00	\$8,148,207.00	\$3,259,958.00	71%	\$11,038,795.00
	Department 6100 - Medicaid Totals	(\$11,423,165.00)	\$15,000.00	(\$11,408,165.00)	(\$633,945.00)	\$0.00	(\$8,148,207.00)	(\$3,259,958.00)	71%	(\$11,038,795.00)
Department	6101 - Medical Assistance									
	EXPENSE									
	<i>Contractual Expense</i>									
470	Contract	1,000.00	.00	1,000.00	.00	.00	.00	1,000.00	0	1,704.99
	<i>Contractual Expense Totals</i>	\$1,000.00	\$0.00	\$1,000.00	\$0.00	\$0.00	\$0.00	\$1,000.00	0%	\$1,704.99
	EXPENSE TOTALS	\$1,000.00	\$0.00	\$1,000.00	\$0.00	\$0.00	\$0.00	\$1,000.00	0%	\$1,704.99
	Department 6101 - Medical Assistance Totals	(\$1,000.00)	\$0.00	(\$1,000.00)	\$0.00	\$0.00	\$0.00	(\$1,000.00)	0%	(\$1,704.99)
Department	6109 - Aid To Dependent Children									
	EXPENSE									
	<i>Contractual Expense</i>									
470	Contract	1,700,000.00	.00	1,700,000.00	72,475.48	.00	1,260,363.95	439,636.05	74	1,429,973.60

# Expense Budget Performance Report

Fiscal Year to Date 10/31/21

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
<b>Fund A - General</b>										
Department 6109	Aid To Dependent Children									
	EXPENSE									
	<i>Contractual Expense Totals</i>	\$1,700,000.00	\$0.00	\$1,700,000.00	\$72,475.48	\$0.00	\$1,260,363.95	\$439,636.05	74%	\$1,429,973.60
	EXPENSE TOTALS	\$1,700,000.00	\$0.00	\$1,700,000.00	\$72,475.48	\$0.00	\$1,260,363.95	\$439,636.05	74%	\$1,429,973.60
	Department 6109 - Aid To Dependent Children Totals	(\$1,700,000.00)	\$0.00	(\$1,700,000.00)	(\$72,475.48)	\$0.00	(\$1,260,363.95)	(\$439,636.05)	74%	(\$1,429,973.60)
Department 6119	Child Care									
	EXPENSE									
	<i>Contractual Expense</i>									
470	Contract	4,500,000.00	.00	4,500,000.00	263,253.22	.00	3,343,856.39	1,156,143.61	74	4,479,010.37
	<i>Contractual Expense Totals</i>	\$4,500,000.00	\$0.00	\$4,500,000.00	\$263,253.22	\$0.00	\$3,343,856.39	\$1,156,143.61	74%	\$4,479,010.37
	EXPENSE TOTALS	\$4,500,000.00	\$0.00	\$4,500,000.00	\$263,253.22	\$0.00	\$3,343,856.39	\$1,156,143.61	74%	\$4,479,010.37
	Department 6119 - Child Care Totals	(\$4,500,000.00)	\$0.00	(\$4,500,000.00)	(\$263,253.22)	\$0.00	(\$3,343,856.39)	(\$1,156,143.61)	74%	(\$4,479,010.37)
Department 6123	Juvenile Delinquent Care									
	EXPENSE									
	<i>Contractual Expense</i>									
470	Contract	.00	15,000.00	15,000.00	.00	.00	3,176.53	11,823.47	21	80,473.79
	<i>Contractual Expense Totals</i>	\$0.00	\$15,000.00	\$15,000.00	\$0.00	\$0.00	\$3,176.53	\$11,823.47	21%	\$80,473.79
	EXPENSE TOTALS	\$0.00	\$15,000.00	\$15,000.00	\$0.00	\$0.00	\$3,176.53	\$11,823.47	21%	\$80,473.79
	Department 6123 - Juvenile Delinquent Care Totals	\$0.00	(\$15,000.00)	(\$15,000.00)	\$0.00	\$0.00	(\$3,176.53)	(\$11,823.47)	21%	(\$80,473.79)
Department 6129	State Training School									
	EXPENSE									
	<i>Contractual Expense</i>									
470	Contract	125,000.00	.00	125,000.00	.00	.00	.00	125,000.00	0	351,492.00
	<i>Contractual Expense Totals</i>	\$125,000.00	\$0.00	\$125,000.00	\$0.00	\$0.00	\$0.00	\$125,000.00	0%	\$351,492.00
	EXPENSE TOTALS	\$125,000.00	\$0.00	\$125,000.00	\$0.00	\$0.00	\$0.00	\$125,000.00	0%	\$351,492.00
	Department 6129 - State Training School Totals	(\$125,000.00)	\$0.00	(\$125,000.00)	\$0.00	\$0.00	\$0.00	(\$125,000.00)	0%	(\$351,492.00)
Department 6140	Home Relief									
	EXPENSE									
	<i>Contractual Expense</i>									
470	Contract	1,500,000.00	.00	1,500,000.00	81,853.25	.00	796,599.63	703,400.37	53	1,460,401.03
	<i>Contractual Expense Totals</i>	\$1,500,000.00	\$0.00	\$1,500,000.00	\$81,853.25	\$0.00	\$796,599.63	\$703,400.37	53%	\$1,460,401.03
	EXPENSE TOTALS	\$1,500,000.00	\$0.00	\$1,500,000.00	\$81,853.25	\$0.00	\$796,599.63	\$703,400.37	53%	\$1,460,401.03
	Department 6140 - Home Relief Totals	(\$1,500,000.00)	\$0.00	(\$1,500,000.00)	(\$81,853.25)	\$0.00	(\$796,599.63)	(\$703,400.37)	53%	(\$1,460,401.03)
Department 6141	Fuel Crisis Assistance									
	EXPENSE									
	<i>Contractual Expense</i>									
470	Contract	30,000.00	.00	30,000.00	.00	.00	26,134.96	3,865.04	87	16,846.77
	<i>Contractual Expense Totals</i>	\$30,000.00	\$0.00	\$30,000.00	\$0.00	\$0.00	\$26,134.96	\$3,865.04	87%	\$16,846.77
	EXPENSE TOTALS	\$30,000.00	\$0.00	\$30,000.00	\$0.00	\$0.00	\$26,134.96	\$3,865.04	87%	\$16,846.77

# Expense Budget Performance Report

Fiscal Year to Date 10/31/21

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 6141 - Fuel Crisis Assistance Totals	(\$30,000.00)	\$0.00	(\$30,000.00)	\$0.00	\$0.00	(\$26,134.96)	(\$3,865.04)	87%	(\$16,846.77)
	Department 6142 - Emergency Aid For Adults EXPENSE									
	Contractual Expense									
470	Contract	35,000.00	.00	35,000.00	.00	.00	.00	35,000.00	0	4,073.95
	Contractual Expense Totals	\$35,000.00	\$0.00	\$35,000.00	\$0.00	\$0.00	\$0.00	\$35,000.00	0%	\$4,073.95
	EXPENSE TOTALS	\$35,000.00	\$0.00	\$35,000.00	\$0.00	\$0.00	\$0.00	\$35,000.00	0%	\$4,073.95
	Department 6142 - Emergency Aid For Adults Totals	(\$35,000.00)	\$0.00	(\$35,000.00)	\$0.00	\$0.00	\$0.00	(\$35,000.00)	0%	(\$4,073.95)
	Department 7310 - Youth Program 4-H Camp EXPENSE									
	Contractual Expense									
470	Contract	25,000.00	.00	25,000.00	.00	13,930.00	11,070.00	.00	100	.00
	Contractual Expense Totals	\$25,000.00	\$0.00	\$25,000.00	\$0.00	\$13,930.00	\$11,070.00	\$0.00	100%	\$0.00
	EXPENSE TOTALS	\$25,000.00	\$0.00	\$25,000.00	\$0.00	\$13,930.00	\$11,070.00	\$0.00	100%	\$0.00
	Department 7310 - Youth Program 4-H Camp Totals	(\$25,000.00)	\$0.00	(\$25,000.00)	\$0.00	(\$13,930.00)	(\$11,070.00)	\$0.00	100%	\$0.00
	Department 7311 - Youth Bureau EXPENSE									
	Contractual Expense									
410	Supplies	187.00	.00	187.00	.00	.00	.00	187.00	0	.00
424	Postage	.00	.00	.00	.00	.00	.00	.00	+++	4.65
470	Contract	2,000.00	.00	2,000.00	.00	.00	.00	2,000.00	0	928.00
	Contractual Expense Totals	\$2,187.00	\$0.00	\$2,187.00	\$0.00	\$0.00	\$0.00	\$2,187.00	0%	\$932.65
	Other Benefits									
861	Retirees Hospitalization	11,439.00	.00	11,439.00	495.09	.00	8,157.81	3,281.19	71	12,458.64
	Other Benefits Totals	\$11,439.00	\$0.00	\$11,439.00	\$495.09	\$0.00	\$8,157.81	\$3,281.19	71%	\$12,458.64
	EXPENSE TOTALS	\$13,626.00	\$0.00	\$13,626.00	\$495.09	\$0.00	\$8,157.81	\$5,468.19	60%	\$13,391.29
	Department 7311 - Youth Bureau Totals	(\$13,626.00)	\$0.00	(\$13,626.00)	(\$495.09)	\$0.00	(\$8,157.81)	(\$5,468.19)	60%	(\$13,391.29)
	Department 7312 - Special Delinquency Prev. EXPENSE									
	Contractual Expense									
410	Supplies	900.00	.00	900.00	.00	.00	.00	900.00	0	103.72
424	Postage	40.00	.00	40.00	.00	.00	10.07	29.93	25	4.89
427	Memberships & Dues	275.00	.00	275.00	.00	.00	175.00	100.00	64	175.00
444	Travel/Education/Conference	500.00	.00	500.00	.00	.00	.00	500.00	0	.00
470	Contract	33,070.00	.00	33,070.00	.00	.00	.00	33,070.00	0	59,727.00
	Contractual Expense Totals	\$34,785.00	\$0.00	\$34,785.00	\$0.00	\$0.00	\$185.07	\$34,599.93	1%	\$60,010.61
	EXPENSE TOTALS	\$34,785.00	\$0.00	\$34,785.00	\$0.00	\$0.00	\$185.07	\$34,599.93	1%	\$60,010.61
	Department 7312 - Special Delinquency Prev. Totals	(\$34,785.00)	\$0.00	(\$34,785.00)	\$0.00	\$0.00	(\$185.07)	(\$34,599.93)	1%	(\$60,010.61)

# Expense Budget Performance Report

Fiscal Year to Date 10/31/21

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
<b>Fund A - General</b>										
Department 7313 - Youth Court										
EXPENSE										
<i>Contractual Expense</i>										
470	Contract	60,000.00	.00	60,000.00	.00	.00	.00	60,000.00	0	60,000.00
<i>Contractual Expense Totals</i>		\$60,000.00	\$0.00	\$60,000.00	\$0.00	\$0.00	\$0.00	\$60,000.00	0%	\$60,000.00
EXPENSE TOTALS		\$60,000.00	\$0.00	\$60,000.00	\$0.00	\$0.00	\$0.00	\$60,000.00	0%	\$60,000.00
Department 7313 - Youth Court Totals		(\$60,000.00)	\$0.00	(\$60,000.00)	\$0.00	\$0.00	\$0.00	(\$60,000.00)	0%	(\$60,000.00)
Department 9785 - Installment Purchase Debt										
EXPENSE										
<i>Indebtedness</i>										
610	Principal-Indebtedness	290,017.00	.00	290,017.00	.00	.00	29,985.35	260,031.65	10	270,259.23
710	Interest-Indebtedness	20,723.00	.00	20,723.00	.00	.00	753.29	19,969.71	4	30,479.41
<i>Indebtedness Totals</i>		\$310,740.00	\$0.00	\$310,740.00	\$0.00	\$0.00	\$30,738.64	\$280,001.36	10%	\$300,738.64
EXPENSE TOTALS		\$310,740.00	\$0.00	\$310,740.00	\$0.00	\$0.00	\$30,738.64	\$280,001.36	10%	\$300,738.64
Department 9785 - Installment Purchase Debt Totals		(\$310,740.00)	\$0.00	(\$310,740.00)	\$0.00	\$0.00	(\$30,738.64)	(\$280,001.36)	10%	(\$300,738.64)
Fund A - General Totals		\$33,507,416.00	\$281,031.31	\$33,788,447.31	\$1,993,987.67	\$251,842.15	\$23,761,605.40	\$9,774,999.76		\$31,855,542.81
<b>Fund TE - Expendable Trust</b>										
Department 6010 - Social Services										
EXPENSE										
<i>Personal Services</i>										
110	Salaries - Regular	.00	18,525.00	18,525.00	.00	.00	.00	18,525.00	0	.00
130	Salaries - Part Time	17,494.00	(17,494.00)	.00	542.22	.00	4,397.66	(4,397.66)	+++	4,980.95
<i>Personal Services Totals</i>		\$17,494.00	\$1,031.00	\$18,525.00	\$542.22	\$0.00	\$4,397.66	\$14,127.34	24%	\$4,980.95
<i>Contractual Expense</i>										
470	Contract	.00	.00	.00	.00	.00	.00	.00	+++	625.00
<i>Contractual Expense Totals</i>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	+++	\$625.00
<i>Employee Benefits</i>										
830	Social Security	1,085.00	121.00	1,206.00	33.62	.00	272.66	933.34	23	308.82
831	Medicare Contribution	254.00	15.00	269.00	7.86	.00	63.76	205.24	24	72.22
<i>Employee Benefits Totals</i>		\$1,339.00	\$136.00	\$1,475.00	\$41.48	\$0.00	\$336.42	\$1,138.58	23%	\$381.04
EXPENSE TOTALS		\$18,833.00	\$1,167.00	\$20,000.00	\$583.70	\$0.00	\$4,734.08	\$15,265.92	24%	\$5,986.99
Department 6010 - Social Services Totals		(\$18,833.00)	(\$1,167.00)	(\$20,000.00)	(\$583.70)	\$0.00	(\$4,734.08)	(\$15,265.92)	24%	(\$5,986.99)
Department 6030 - Countryside Adult Home										
EXPENSE										
<i>Equipment</i>										
260	Other Equipment	.00	925.00	925.00	.00	.00	271.96	653.04	29	.00
<i>Equipment Totals</i>		\$0.00	\$925.00	\$925.00	\$0.00	\$0.00	\$271.96	\$653.04	29%	\$0.00
EXPENSE TOTALS		\$0.00	\$925.00	\$925.00	\$0.00	\$0.00	\$271.96	\$653.04	29%	\$0.00
Department 6030 - Countryside Adult Home Totals		\$0.00	(\$925.00)	(\$925.00)	\$0.00	\$0.00	(\$271.96)	(\$653.04)	29%	\$0.00
Fund TE - Expendable Trust Totals		\$18,833.00	\$2,092.00	\$20,925.00	\$583.70	\$0.00	\$5,006.04	\$15,918.96		\$5,986.99

# Expense Budget Performance Report

Fiscal Year to Date 10/31/21

Include Rollup Account and Rollup to Account

Grand Totals	\$33,526,249.00	\$283,123.31	\$33,809,372.31	\$1,994,571.37	\$251,842.15	\$23,766,611.44	\$9,790,918.72	\$31,861,529.80
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## WARREN COUNTY Receipts by G/L Distribution Report - Summary

From Date: 10/01/2021 - To Date: 10/31/2021

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					
	10/05/2021		2	\$0.00	\$115,475.00
	10/15/2021		1	\$0.00	\$37,179.00
	10/19/2021		2	\$0.00	\$72,446.00
	10/26/2021		3	\$0.00	\$69,597.00
	10/28/2021		2	\$0.00	\$485,967.00
	10/31/2021		1	\$0.00	\$100,799.00
Account Total: State&Federal,Social Services			11	\$0.00	\$881,463.00
Fund Total: General				\$0.00	\$881,463.00
Grand Total:			11	\$0.00	\$881,463.00

*Fed / state*

*local*

*99,251.09*

*TOTAL REVENUE = 980,714.09*

*10/21*

## WARREN COUNTY Receipts by G/L Distribution Report - Summary

From Date: 10/01/2021 - To Date: 10/31/2021

G/L Account Number	G/L Date	Due To/From Fund Project	Transactions	Debit Amount	Credit Amount
Fund: A - General					
Department: 6010 - Social Services					
Account: 1810 - Administration					
	10/27/2021		2	\$0.00	\$792.36
Account Total: Administration			2	\$0.00	\$792.36
Account: 1811 - Medical Incentive Earning					
	10/07/2021		1	\$0.00	\$76.23
	10/27/2021		1	\$0.00	\$3,723.00
Account Total: Medical Incentive Earning			2	\$0.00	\$3,799.23
Department Total: Social Services				\$0.00	\$4,591.59
Department: 6030 - Countryside Adult Home					
Account: 1830 - Repay - Adult Care, Pub Inst					
	10/28/2021		2	\$0.00	\$61,108.12
Account Total: Repay - Adult Care, Pub Inst			2	\$0.00	\$61,108.12
Department Total: Countryside Adult Home				\$0.00	\$61,108.12
Department: 6101 - Medical Assistance					
Account: 1801 - Repay of Medical Assist					
	10/27/2021		1	\$0.00	\$4,847.19
	10/28/2021		1	\$0.00	\$250.00
Account Total: Repay of Medical Assist			2	\$0.00	\$5,097.19
Department Total: Medical Assistance				\$0.00	\$5,097.19
Department: 6109 - Aid To Dependent Children					
Account: 1809 - Repay of Aid to A.D.C.					
	10/27/2021		2	\$0.00	\$18,736.72
	10/28/2021		1	\$0.00	\$102.05
Account Total: Repay of Aid to A.D.C.			3	\$0.00	\$18,838.77
Department Total: Aid To Dependent Children				\$0.00	\$18,838.77
Department: 6119 - Child Care					
Account: 1819 - Repay of Child Care					
	10/27/2021		1	\$0.00	\$2,974.21
Account Total: Repay of Child Care			1	\$0.00	\$2,974.21
Department Total: Child Care				\$0.00	\$2,974.21
Department: 6140 - Home Relief					
Account: 1840 - Repay of Home Relief					
	10/05/2021		1	\$0.00	\$1,592.00
	10/27/2021		1	\$0.00	\$334.62
	10/28/2021		1	\$0.00	\$4,714.59

Account Total: Repay of Home Relief	3	\$0.00	\$6,641.21
Department Total: Home Relief		<u>\$0.00</u>	<u>\$6,641.21</u>
Fund Total: General		<u>\$0.00</u>	<u>\$99,251.09</u>
Grand Total:	15	\$0.00	\$99,251.09

