

**COMBINED: LEGISLATIVE MEMORANDUM,  
CERTIFICATE OF AVAILABILITY OF FUNDS  
AND RESOLUTION COVER MEMO**

**To:** Sullivan County Legislature

**Fr:** Joseph A. Todora, Acting Commissioner, DHFS

**Re:** Request for Consideration of a Resolution: Create a Temporary Account Clerk

**Date:** November 5, 2015

**Purpose of Resolution:** [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

To offset the loss of two employees due to health leaves of undetermined lengths of time.

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**Is subject of Resolution mandated? Explain:**

No

**Does Resolution require expenditure of funds? Yes  No**

**If "Yes", provide the following information:**

**Amount to be authorized by Resolution:** \$ 29,519.00

**Are funds already budgeted? Yes  No**

**If "Yes" specify appropriation code(s):** 6010-56-10-1011/6010-56-80-8001/8005/8006/8007

**If "No", specify proposed source of funds:** \_\_\_\_\_

**Estimated Cost Breakdown by Source:**

County	\$ <u>13,284.00</u>	Grant(s)	\$ _____
State	\$ _____	Other	\$ _____
Federal Government	\$ <u>16,235.00</u>	(Specify)	_____

**Verified by Budget Office:** 

**Does Resolution request Authority to Enter into a Contract? Yes  No**

**If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.**

Request for Authority to Enter into Contract with [ \_\_\_\_\_ ] of  
[ \_\_\_\_\_ ]

Nature of Other Party to Contract: .

Other:

Duration of Contract: From \_\_\_\_\_ To \_\_\_\_\_

Is this a renewal of a prior Contract? Yes \_\_\_ No \_\_\_

If "Yes" provide the following information:

Dates of prior contract(s): From \_\_\_\_\_ To \_\_\_\_\_

Amount authorized by prior contract(s): \_\_\_\_\_

Resolutions authorizing prior contracts (Resolution #s): \_\_\_\_\_

Future Renewal Options if any:

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes \_\_\_ No \_\_\_

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): \_\_\_\_\_

Efforts made to find Less Costly alternative:

\_\_\_\_\_  
\_\_\_\_\_

Efforts made to share costs with another agency or governmental entity:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

*not applicable*  
\_\_\_\_\_

Person(s) responsible for monitoring contract (Title): \_\_\_\_\_

**Pre-Legislative Approvals:**

- A. Director of Purchasing: *Jerry Jones* Date *11/4/15*
- B. Management and Budget: *Janet My...* Date *11/4/15*
- C. Law Department: *Thomas Crowley* Date *11/4/15*
- D. County Manager: \_\_\_\_\_ Date \_\_\_\_\_
- E. Commissioner: *[Signature]* Date *11/4/15*  
*[Signature]* *11/4/15*

Vetted in \_\_\_\_\_ Committee on \_\_\_\_\_

**RESOLUTION NO. INTRODUCED BY THE PERSONNEL COMMITTEE TO  
CREATE A TEMPORARY ACCOUNT CLERK POSITION, SET THE SALARY AND  
FILL THE POSITION IN THE DEPARTMENT OF FAMILY SERVICES.**

**WHEREAS**, the County of Sullivan, Department of Family Services Child Support Enforcement Unit (CSEU) has had one Social Welfare Examiner and Account Clerk position out for an extended period of time leaving the department grossly understaffed; and

**WHEREAS**, there is a need to create a temporary Account Clerk position in the CSEU to offset the loss of two employees for an undetermined length of time.

**NOW, THEREFORE, BE IT RESOLVED**, that the Sullivan County Legislature hereby authorizes the creation of a temporary Account Clerk position in the Department of Family Services based upon Grade I of the Teamsters Local 445 salary schedule, and hereby has permission to fill;

**BE IT FURTHER RESOLVED**, that said position is to be abolished upon the return or permanent vacancy of the incumbent.

**Moved by** \_\_\_\_\_,

**Seconded by** \_\_\_\_\_,

**And adopted on motion** \_\_\_\_\_, 2015.