Apalachin Library Association Annual Report For Public And Association Libraries - 2015

1. GENERAL LIBRARY INFORMATION

Part 1

Report all information in Part 1 as of December 31, 2015, <u>except</u> for questions related to the <u>current</u> library director/manager (questions 1.35 through 1.40).

unceto	Trinunager (questions 1.55 through 1.10).	
1.1	Library ID Number	2400600500
1.2	Library Name	APALACHIN LIBRARY ASSOCIATION
1.3	Name Status (State use only)	00 (for no change from previous year)
1.4	Structure Status (State use only)	00 (for no change from previous year)
1.5	Community	Apalachin
1.6	Beginning Fiscal Reporting Year	01/01/2015
1.7	Ending Fiscal Reporting Year	12/31/2015
1.8	Is the library now reporting on a different fiscal year than it reported on in the previous Annual Report?	No
1.9	If yes, please indicate the beginning date of library's new reporting year. Enter N/A if No was answered to Question 1.8.	N/A
1.10	Please indicate the ending date of library's new reporting year. Enter N/A if No was answered to Question 1.8.	N/A
1.11	Beginning Local Fiscal Year	01/01/2015
1.12	Ending Local Fiscal Year	12/31/2015
1.13	Address Status	00 (for no change from previous year)
1.14	Street Address	719 MAIN ST
1.15	City	APALACHIN
1.16	Zip Code	13732
1.17	Mailing Address	PO BOX 163
1.18	City	APALACHIN
1.19	Zip Code	13732
1.20	Telephone Number (enter 10 digits only and hit the Tab key; enter N/A if no telephone number)	(607) 625-3333
1.21	Fax Number (enter 10 digits only and hit the Tab key; enter N/A if no fax number)	(607) 625-3333
1.22	E-Mail Address to Contact the Library (Enter N/A if no e-mail address)	alibrary1@stny.rr.com
1.23	Library Home Page URL (Enter N/A if no home page URL)	www.apalachinlibrary.org
1.24	Population Chartered to Serve (per 2010 Census)	1,131
1.25	Indicate the type of library as stated in the library's charter (select one):	ASSOCIATION
1.26	Indicate the area chartered to serve as stated in the library's charter (select one):	Other
1.27	During the reporting year, has there been any change to the library's legal service area boundaries? Changes must be the result of a Regents charter action. Answer Y for Yes, N for No.	N

1.28	Indicate the type of charter the library currently holds (select one):	Absolute
1.29	Date the library was granted its absolute charter <u>or</u> the date of the provisional charter if the library does not have an absolute charter	05/20/2008
1.30	Date the library was last registered	12/16/2010
1.31	Federal Employer Identification Number	263329983
1.32	County	TIOGA
1.33	School District	Owego-Apalachin Central School District
1.34	Town/City	Owego
1.35	Library System	Finger Lakes Library System
NOTE	E: For questions 1.36 through 1.41, report all information for	r the current library director/manager.
1.36	Title of Library Director/ Manager (select one):	Mrs.
1.37	First Name of Library Director/Manager	Catherine
1.38	Last Name of Library Director/Manager	Sorber
1.39	NYS Public Librarian Certification Number	N/A
1.40	E-mail Address of the Director/Manager	alibrary1@stny.rr.com
1.41	Fax Number of the Director/Manager	(607) 625-3333
1.42	Does the library charge fees for library cards to people residing outside the system's service area?	N
Part 2		
1.43	Was all or part of the library's funding subject to a public	
	vote(s) held during Calendar Year 2015? (Please respond	V
	even if the vote was unsuccessful). Enter Y for Yes, N for No. If Yes, complete one record for the public vote	Y
	from each funding source. If no, go to question 1.44.	
1.	Name of municipality or district holding the public vote	OASD
2.	Indicate the type of municipality or district holding the	
۷.	public vote	School District
3.	Date the vote was held (mm/dd/2015)	05/21/2015
4.	Was the vote successful? Y/N	Y
5.	What type of public vote was it?	school district ballot proposition (Ed. Law
		§259(1)(a))
6a.	Most recent prior year approved appropriation from a public vote:	\$30,000
6b.	Proposed increase in appropriation as a result of the vote held on the date reported in question number 3:	\$12,444
6c.	Total proposed appropriation (sum of 6a and 6b):	\$42,444

This question should only be answered if "No" was answered in Q1.43 OR the library has votes from different municipalities/districts that were held in different years, both current and prior.

- 1.44 Did the library receive funding from an appropriation which was approved by public vote in a prior year?
 (Prior to Calendar Year 2015) Enter Y for Yes, N for No. N If Yes, complete one record for the vote from each funding source. If No, go to question 1.45.
- 1. Name of municipality or district holding the public vote
- 2. Indicate the type of municipality or district holding the public vote
- 3. Date the last successful vote was held (mm/dd/yyyy)

- 4. What type of public vote was it?
- 5. What was the total dollar amount of the appropriation from tax dollars resulting from the last successful vote?

Part 3

1.45	Does the reporting library have a contractual agreement	
	with a municipality or district to provide library services	
	to residents of an area not served by a chartered library?	N
	Enter Y for Yes, N for No. If yes, please complete one	
	record for <i>each</i> contract. If no, go to question 1.46.	

1. Name of contracting municipality or district N/A

2. Is this a written contractual agreement?

3. Population of the geographic area served by this contract N/A

4. Dollar amount of contract N/A

5. Enter the appropriate code for range of services provided (select one):

1.46 For the reporting year, has the library experienced any unusual circumstance(s) that affected the statistics reported (e.g., natural disaster, fire, closed for renovations, massive weeding of collection, etc.)? If yes, N please annotate explaining the circumstance(s) and the impact on the library using the State note; if no, please go to Part 2, Library Collection.

2. LIBRARY COLLECTION

Report holdings, additions, and subscriptions as of the end of the fiscal year reported in Part 1. Please click <u>here</u> to read general instructions before completing this section.

This section of the survey (2.1-2.22) collects data on selected types of materials.

It does not cover all materials (i.e., microform, scores, maps, and pictures) for which expenditures are reported under Print Materials Expenditures, Electronic Materials Expenditures, and Other Materials Expenditures (questions 12.6, 12.7 and 12.8). Under this category report only items that have been purchased, leased or licensed by the library, a consortium, the state library, a donor or other person or entity. Included items must only be accessible with a valid library card or at a physical library location; inclusion in the catalog is not required. Do not include items freely available without monetary exchange. Do not include items that are permanently retained by the patron; count only items that have a set circulation period where it is available for their use. Count electronic materials at the administrative entity level; do not duplicate numbers at each branch.

PRINT MATERIALS

Cataloged Books

2.1	Adult Fiction Books	6,022
2.2	Adult Non-fiction Books	1,592
2.3	Total Adult Books (Total questions 2.1 & 2.2)	7,614
2.4	Children's Fiction Books	4,503
2.5	Children's Non-fiction Books	1,104
2.6	Total Children's Books (Total questions 2.4 & 2.5)	5,607
2.7	Total Cataloged Books (Total questions 2.3 & 2.6)	13,221

Other Print Materials

2.8 Total Uncataloged Books

2.10	All Other Print Materials	0
2.11	Total Other Print Materials (Total questions 2.8 through 2.10)	45
2.12	Total Print Materials (Total questions 2.7 and 2.11)	13,266
ALL	OTHER MATERIALS	
Electi	conic Materials	
2.13	Electronic Books	7,353
2.14	Local Electronic Collections	13
2.15	NOVELNY Electronic Collections	10
2.16	Total Electronic Collections (Total questions 2.14 and 2.15)	23
2.17	Audio - Downloadable Units	3,308
2.18	Video - Downloadable Units	0
2.19	Other Electronic Materials (Include items that are not included in the above categories, such as e-serials; electronic files; collections of digital photographs; and electronic government documents, reference tools, scores and maps.)	0
2.20	Total Electronic Materials (Total questions 2.13, 2.16, 2.17, 2.18 and 2.19)	10,684
Non-I	Electronic Materials	
2.21	Audio - Physical Units	707
2.22	Video - Physical Units	660
2.23	Other Non-Electronic Materials (includes films, slides, etc.)	0
2.24	Total Other Materials Holdings (Total questions 2.21 through 2.23)	1,367
2.25	GRAND TOTAL HOLDINGS (Total questions 2.12, 2.20 and 2.24)	25,317
CURI	RENT SERIAL SUBSCRIPTIONS	
2.26	Current Print Serial Subscriptions	0
ADDI	TTIONS TO HOLDINGS - Do <u>not</u> subtract withdrawals or	discards.
2.27	Cataloged Books	874
2.28	All Other Print Materials	0
2.29	Electronic Materials	2,759
2.30	All Other Materials	138
2.31	Total Additions (Total questions 2.27 through 2.30)	3,771

3. LIBRARY PROGRAMS, POLICIES, AND SERVICES

Report all information on questions 3.1 through 3.26 as of the end of the <u>fiscal</u> year reported in Part 1; report information on questions 3.27 through 3.78 for the 2015 <u>calendar</u> year. Please click <u>here</u> to read general instructions before completing this section.

0

Please report information on LIBRARY USE as of the end of the fiscal year reported in Part 1.

LIBRARY USE

2.9

Total Print Serials

3.1	Library visits (total annual attendance)	16,239
3.2	Registered resident borrowers	1,340
3.3	Registered non-resident borrowers	534

Please report information on WRITTEN POLICIES as of 12/31/15.

WRITTEN	POLICIES	S (Answer V	for Ves	N for No)
*****		, , , , , , , , , , , , , , , , , , ,	101 165.	

3.4	Does the library have an open meeting policy?	Y
3.5	Does the library have a policy protecting the	v

confidentiality of library records?

Y Does the library have an Internet use policy? 3.6

3.7 Does the library have a disaster plan? Y 3.8

Does the library have a board-approved conflict of Y interest policy?

Does the library have a board-approved whistle blower 3.9 N policy?

Please report information on ACCESSIBILITY as of 12/31/15.

ACCESSIBILITY (Answer Y for Yes, N for No)/b>

3.10	Does the library provide service to persons who cannot	
	visit the library (homebound persons, persons in nursing	N
	homes, persons in jail, etc.)?	

3.11 Does the library have assistive devices for persons who N are deaf and hearing impaired (TTY/TDD)?

Y Does the library have large print books? 3.12

Does the library have assistive technology for the blind 3.13 N and visually impaired?

3.14 - If so, what do you have?

No screen reader, such as JAWS or Windoweyes No refreshable Braille keyboard screen magnification software, such as Zoomtext No electronic scanning and reading software, such as No OpenBook

Please report information on LIBRARY SPONSORED PROGRAMS as of the end of the fiscal year reported in Part 1.

LIBRARY SPONSORED PROGRAMS

3.15	Adult Program Sessions	78
3.16	Young Adult Program Sessions	2
3.17	Children's Program Sessions	101
3.18	All Other Program Sessions	0
3.19	Total Number of Program Sessions (Total questions 3.15 through 3.18)	181
3.20	One-on-One Program Sessions	1
3.21	Adult Program Attendance	1,393
3.22	Young Adult Program Attendance	6
3.23	Children's Program Attendance	1,601
3.24	All Other Program Attendance	0
3.25	Total Program Attendance (Total questions 3.21 through 3.24)	3,000
3.26	One-on-One Program Attendance	23

Please report information on SUMMER READING PROGRAMS for the 2015 calendar year.

SUMMER READING PROGRAM

3.27 - Indicate which of the following apply to the summer reading program(s) offered by the library during the summer of 2015 (check all that apply):

a.	Program(s) for children	Yes		
b.	Program(s) for young adults	No		
c.	Program(s) for Adults	Yes		
d.	Summer Reading at New York Libraries name and/or logo used	Yes		
e.	Collaborative Summer Library Program (CSLP Manual, provided through the New York State Library, used)	Yes		
f.	N/A	No		
3.28	Library outlets offering a summer reading program	1		
3.29	Children registered for the library's summer reading program	137		
3.30	Young adults registered for the library's summer reading program	2		
3.31	Adults registered for the library's summer reading program	67		
3.32	Total number registered for the library's summer reading program (total $3.29 + 3.30 + 3.31$)	206		
3.33	Children's program sessions - Summer 2015	22		
3.34	Young adult program sessions - Summer 2015	1		
3.35	Adult program sessions - Summer 2015	1		
3.36	Total program sessions - Summer 2015 (total $3.33 + 3.34 + 3.35$)	24		
3.37	Children's program attendance - Summer 2015	1,143		
3.38	Young adult program attendance - Summer 2015	2		
3.39	Adult program attendance - Summer 2015	21		
3.40	Total program attendance - Summer 2015 (total 3.37 + 3.38 + 3.39)	1,166		
COLLABORATORS				
3.41	Public school district(s) and/or BOCES	3		
3.42	Non-public school(s)	1		
3.43	Childcare center(s)	0		
3.44	Summer camp(s)	0		
3.45	Municipality/Municipalities	0		
3.46	Literacy provider(s)	0		
3.47	Other (describe using the State note)	0		
3.48	Total Collaborators (total 3.41 through 3.47)	4		

Please report information on EARLY LITERACY PROGRAMS for the 2015 calendar year.

EARLY LITERACY PROGRAMS

3.49	Did the library offer early literacy programs? (Enter Y for Yes, N for No)	Y
3.50 -	Indicate types of programs offered (check all that apply)	
a.	Focus on birth - school entry	Yes

b. Focus on parents & caregivers

No

c.	Combined audience	Yes
d.	N/A	No
3.51 -	Number of sessions	
a.	Focus on birth - school entry	101
b.	Focus on parents & caregivers	0
c.	Combined audience	101
d.	N/A	0
3.52	Total Sessions	202
3.53 -	Attendance at sessions	
a.	Focus on birth - school entry	1,601
b.	Focus on parents & caregivers	0
c.	Combined audience	1,601
d.	N/A	0
3.54	Total Attendance	3,202
3.55 -	Collaborators (check all that apply):	
a.	Childcare center(s)	No
b.	Public School District(s) and/or BOCES	Yes
c.	Non-Public School(s)	Yes
d.	Health care providers/agencies	No
e.	Other (describe using the State note)	No
Please report information on ADULT LITERACY for the 2015 calendar year.		

ADULT LITERACY

3.56	Did the library offer adult literacy programs?	No
3.57	Total group program sessions	N/A
3.58	Total one-on-one program sessions	6
3.59	Total group program attendance	N/A
3.60	Total one-on-one program attendance	23
3.61 -	Collaborators (check all that apply)	
a.	Literacy NY (Literacy Volunteers of America)	No
b.	Public School District(s) and/or BOCES	Yes
c.	Non-Public Schools	Yes
d.	Other (see instructions and describe using State Note)	No

Please report information on PROGRAMS FOR ENGLISH SPEAKERS OF OTHER LANGUAGES (ESOL) for the 2015 calendar year.

PROGRAMS FOR ENGLISH SPEAKERS OF OTHER LANGUAGES (ESOL)

3.62	Did the library offer programs for English Speakers of Other Languages (ESOL)? (Enter Y for Yes, N for No)	N
3.63	Children's program sessions	N/A
3.64	Young adult program sessions	N/A
3.65	Adult program sessions	N/A
3.66	One-on-one program sessions	0
3.67	Total program sessions (total $3.63 + 3.64 + 3.65$)	0
3.68	Children's program attendance	N/A
3.69	Young adult program attendance	N/A
3.70	Adult program attendance	N/A
3.71	One-on-one program attendance	0
3.72	Total program attendance (total $3.68 + 3.69 + 3.70$)	0

3.73 - Collaborators (check all that apply):			
a.	Literacy NY (Literacy Volunteers of America)	No	
b.	Public School District(s) and/or BOCES	No	
c.	Non-Public School(s)	No	
d.	Other (describe using the State note)	No	

Please report information on DIGITAL LITERACY for the 2015 calendar year.

DIGITAL LITERACY

3.74	Did the library offer digital literacy programs?	N
3.75	Total group program sessions	0
3.76	Total one-on-one program sessions	0
3.77	Total group program attendance	0
3.78	Total one-on-one program attendance	0

4. LIBRARY TRANSACTIONS

Report all transactions as of the end of the fiscal year reported in Part 1. (Please note: Internal Library usage is <u>not</u> considered part of circulation)

CATALOGED BOOK CIRCULATION

4.1	Adult Fiction Books	8,201
4.2	Adult Non-fiction Books	1,732
4.3	Total Adult Books (Total questions 4.1 & 4.2)	9,933
4.4	Children's Fiction Books	8,729
4.5	Children's Non-fiction Books	1,170
4.6	Total Children's Books (Total questions 4.4 & 4.5)	9,899
4.7	Total Cataloged Book Circulation (Total question 4.3 & 4.6)	19,832

4.7	Total Cataloged Book Circulation (Total question 4.3 & 4.6)	19,832	
CIRC	ULATION OF OTHER MATERIALS		
4.8	Circulation of Adult Other Materials	3,923	
4.9	Circulation of Children's Other Materials	482	
4.10	Circulation of Electronic Materials	9	
4.11	Total Circulation of Other Materials (Total questions 4.8, 4.9 & 4.10)	4,414	
4.12	Grand Total Circulation Transactions (Total questions 4.7 & 4.11)	24,246	
4.13	Grand Total Circulation of Children's Materials (Total questions 4.6 & 4.9)	10,381	
REFERENCE TRANSACTIONS			
4 1 4	T-t-1 D-f Tti	2 256	

4.14	Total Reference Transactions	2,356
4.15	Does the library offer virtual reference?	Y

INTERLIBRARY LOAN - MATERIALS RECEIVED (BORROWED)

4.16	TOTAL MATERIALS RECEIVED	4,611	
INTERLIBRARY LOAN - MATERIALS PROVIDED (LOANED)			
4.17	TOTAL MATERIALS PROVIDED	4,473	

5. TECHNOLOGY AND TELECOMMUNICATIONS

Report all information as of December 31, 2015.

SYSTEMS AND SERVICES

5.1	Automated circulation system?	Y
5.2	Online public access catalog (OPAC)?	Y
5.3	Electronic access to the OPAC from outside the library?	Y
5.4	Annual number of visits to the library's web site	4,009
5.5	Does the library use Internet filtering software on any computer?	N
5.6	Number of uses (sessions) of public Internet computers per year	618
5.7	Name of the person responsible for the library's Information Technology (IT) services	Cathy Sorber
5.8	IT contact's telephone number (enter 10 digits only and hit the Tab key)	(607) 625-3333
5.9	IT contact's email address	alibrary1@stny.rr.com

6. STAFF INFORMATION

Note: Report figures as of the last day of the fiscal year reported in Part 1. Include the FTE for all positions funded in the library's budget whether those positions are filled or not. This report requires conversion of part-time hours to full-time equivalents (FTE). To compute the FTE of employees in any category, take the total number of hours worked per week for all budgeted positions in that category and divide that total by the number of hours per week the library considers to be full-time. Report the FTE to two decimal places.

FTE (FULL-TIME EQUIVALENT CALCULATION)

6.1	The number of hours per workweek used to compute FTE for all paid library personnel in this section.	30
BUI	OGETED POSITIONS IN FULL-TIME EQUIVALENTS	
6.2	Library Director (certified)	0
6.3	Vacant Library Director (certified)	0
6.4	Librarian (certified)	0
6.5	Vacant Librarian (certified)	0
6.6	Library Manager (not certified)	1
6.7	Vacant Library Manager (not certified)	0
6.8	Library Specialist/Paraprofessional (not certified)	0
6.9	Vacant Library Specialist/Paraprofessional (not certified)	0
6.10	Other Staff	1.5
6.11	Vacant Other Staff	0
6.12	TOTAL PAID STAFF (Total questions 6.2, 6.4, 6.6, 6.8 & 6.10)	2.50
6.13	VACANT TOTAL PAID STAFF (Total questions 6.3, 6.5, 6.7, 6.9 & 6.11)	0.00
SAL	ARY INFORMATION	
6.14	FTE - Entry Level Librarian (certified)	0
6.15	Salary - Entry Level Librarian (certified)	\$0
6.16	FTE - Library Director (certified)	0
6.17	Salary - Library Director (certified)	\$0
6.18	FTE - Library Manager (not certified)	1
6.19	Salary - Library Manager (not certified)	\$21,720

7. MINIMUM PUBLIC LIBRARY STANDARDS

Report all information as of December 31, 2015. Please click <u>here</u> to read general instructions before completing this section.

/.I	outline the responsibilities and procedures of the library board of trustees.	Y
7.2	2. Has a board-approved written long range plan of service.	Y
7.3	3. Presents a board-approved annual report to the community on the library's progress in meeting its goals and objectives.	Y
7.4	4. Has board-approved written policies for the operation of the library.	Y
7.5	5. Presents annually to appropriate funding agencies a written board-approved budget which would enable the library to meet or exceed these standards and to carry out its long-range plan of service.	Y
7.6	6. Periodically evaluates the effectiveness of the library's collection and services in meeting community needs.	Y
7.7	7. Is open the minimum standard number of public service hours for population served. (see instructions)	Y
8. Mai	intains a facility to meet community needs, including adequ	nate:
7.8	8a. space	Y
7.9	8b. lighting	Y
7.10	8c. shelving	Y
7.11	8d. seating	Y
7.12	8e. restroom (see instructions)	Y
	vides equipment and connections to meet community needs her electronic information, including but not limited to the	
7.13	9a. telephone	Y
7.14	9b. photocopier (see instructions)	Y
7.15	9c. microcomputer or terminal	Y
7.16	9d. printer	Y
7.17	9e. Fax capability (see instructions)	Y
7.18	10. Distributes board-approved printed information listing the library's hours open, borrowing rules, services, location and phone number.	y Y
7.19	11. Employs a paid director in accordance with the provisions of Commissioner's Regulation 90.8.	Y
8. PU	BLIC SERVICE INFORMATION	
_	t all information as of the end of the fiscal year reported in ctions before completing this section.	Part 1. Please click <u>here</u> to read general
	IC SERVICE OUTLETS - Libraries reporting main librarie e Outlets Information in Part 9.	es, branches and bookmobiles should complete
8.1	Main Library	1
8.2	Branches	0
8.3	Bookmobiles	0
8.4	Other Outlets	0
8.5	TOTAL PUBLIC SERVICE OUTLETS (Total questions 8.1 - 8.4)	1

PUBLIC SERVICE HOURS - Report hours to two decimal places.

8.6 Minimum Weekly Total Hours - Main Library

38.00

8.7	Minimum Weekly Total Hours - Branch Libraries	0.00
8.8	Minimum Weekly Total Hours - Bookmobiles	0.00
8.9	Minimum Weekly Total Hours - Total Hours Open (Total questions 8.6 - 8.8)	38.00
8.10	Annual Total Hours - Main Library	1,976.00
8.11	Annual Total Hours - Branch Libraries	0.00
8.12	Annual Total Hours - Bookmobiles	0.00
8.13	Annual Hours Open - Total Hours Open (Total questions 8.10 through 8.12)	1,976.00

9. SERVICE OUTLET INFORMATION

NOTE: Libraries reporting Public Service Outlets in questions 8.1, 8.2 and 8.3 of Part 8 are required to complete this part of the Annual Report. Use this section to enter outlet information on main libraries, branches or bookmobiles. Complete one record for *each* main library, branch or bookmobile.

DOOKI	notices. Complete one record for each main notary, trainer	of bookinoone.
1.	Outlet Name	Apalachin Library Association
2.	Outlet Name Status	00 (for no change)
3.	Street Address	719 Main St
4.	Outlet Street Address Status	00 (for no change)
5.	City	Apalachin
6.	Zip Code	13732
7.	Phone (enter 10 digits only)	(607) 625-3333
8.	Fax Number (enter 10 digits only)	(607) 625-3333
9.	E-mail Address	alibrary1@stny.rr.com
10.	Outlet URL	http://www.flls.org/memberpages/apal.htm
11.	County	Tioga
12.	School District	OA
13.	Library System	Finger Lakes Library System
14.	Outlet Type Code (select one):	CE
15.	Public Service Hours Per Year for This Outlet	1,900
16.	Number of Weeks This Outlet is Open	52
17.	Does this outlet have meeting space available for public use (non-library sponsored programs, meetings and/or events)?	Y
18.	Is the meeting space available for public use even when the outlet is closed?	Y
19.	Total number of non-library sponsored programs, meetings and/or events at this outlet	1
20.	Enter the appropriate outlet code (select one):	LO
21.	Who owns this outlet building?	Library Board
22.	Who owns the land on which this outlet is built?	Library Board
23.	Indicate the year this outlet was initially constructed	1869
24.	Indicate the year this outlet underwent a major renovation costing \$25,000 or more	N/A
25.	Square footage of the outlet	1,803
26.	Total number of Internet terminals at this outlet used by the general public	7
27.	Type of connection on the outlet's public Internet computers	Cable
28.	Maximum <u>download</u> speed of connection on the outlet's public Internet computers	5 Greater than or equal to 3 mbps and less than 6 mbps

29.	Maximum <u>upload</u> speed of connection on the outlet's public Internet computers	2 Greater than 200 kbps and less than 768 kbps
30.	Internet Provider	Time Warner Cable
31.	WiFi Access	No restrictions to access
32.	Number of wireless sessions provided by the library wireless service per year	0
33.	Does the outlet have interactive videoconferencing capability for public use?	N
34.	Does the outlet have a building entrance that is physically accessible to a person in a wheelchair?	Y
35.	Is every public part of the outlet accessible to a person in a wheelchair?	Y
36.	LIBID	2400600500
37.	FSCSID	NY0795
38.	Number of Bookmobiles in the Bookmobile Outlet Record	0
39.	Outlet Structure Status	00 (for no change from previous year)

10. OFFICERS AND TRUSTEES

Report information about trustee meetings as of December 31, 2015. All public and association libraries are required by Education Law to hold at least four meetings a year.

BOARD MEETINGS

10.1	Total number of board meetings held during calendar year (January 1, 2015 to December 31, 2015)	10
10.2	Number of voting library board positions stated in the library's charter.	5-9
10.3	Number of current voting positions on library board.	7
10.4	Trustee term length	5 yrs

BOARD MEMBER SELECTION

10.5 Enter Board Member Selection Code (select one): EA - board members are elected by the library association membership

List Officers and Board Members as of February 1, 2016. Complete one record for each board member. There must be a record for each voting position, whether filled or vacant. Do not include non-voting positions.

BOARD PRESIDENT

10.6	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), or Vacant	Mr.
10.7	First Name	John
10.8	Last Name	Deopuria
10.9	Mailing Address	11 Marlboro Dr
10.10	City	Endicott
10.11	Zip Code (5 digits only)	13760
10.12	Phone (enter 10 digits only)	(607) 727-1967
10.13	E-mail Address	jdeopuria@hotmail.com
10.14	Term Begins - Month	January
10.15	Term Begins - Year (yyyy)	2012
10.16	Term Expires - Month	December
10.17	Term Expires - Year (yyyy)	2016
10.18	The date the Oath of Office was taken (mm/dd/yyyy)	N/A

county clerk (mm/dd/yyyy) 10.20 Is this a brand new trustec? No. Title of Board Member (select one): Last Name of Board Member Last Name of Board Member Strauss Mailing Address Ligry Apalachin Ligren Begins - Month Term Begins - Year (yyyy) Strik is brand new trustec? No. Title of Board Member Ligren Board Member Ligren Begins - Weard (select one): Mr. Term Begins - Weard (yyyy) Ligren Board Member Ligren Board Member Ligren Begins - Weard (yyyy) Ligren Begins - Weard (yyyy) Ligren Board Member Ligren Board Member (select one): Mr. Ligren Board Member (select one): Mailing Address City Apalachin Ligren Board Member Ligren Begins - Month Ligren Begins - Month Ligren Begins - Year (yyyy) Ligren Begins - Year (year) Ligren Begins - Year (yyyy) Ligren Begins - Year (year) Ligren Begins - Year (year) Ligren Begins - Year (year) Ligren Begins - Year (yyyy) Ligren Begins - Year (year) Ligren Begins - Year (yyyy) Ligren Begins - Year (yyyy) Ligren Begins - Year (year) Ligren Begins - Year (yyyy) Ligren Begins - Year (yyyy	10.19	The date the Oath of Office was filed with town or	N/A
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2. First Name of Board Member Frederick 3. Last Name of Board Member Strauss 4. Mailing Address 1872 Marshland Rd 5. City Apalachin 6. Zip Code (5 digits only) 13732 7. E-mail address fstrauss @openroadinfo.com 8. Office Held or Trustee Trustee 9. Term Begins - Month January 10. Term Expires - War (year) 2014 11. Term Expires - Year (year) 2018 12. Term Expires - Year (yeyy) 2018 13. The date the Oath of Office (mm/dd/yyyy) was taken N/A 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) N/A 15. Is this a brand new trustee? N 1. Title of Board Member (select one): Mr. 2. First Name of Board Member Poole 4. Mailing Address 9 Perry Dr 5. City Apalachin 13 Tred ate the Oath of Office (mm/dd/yyyy)	10.20		
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5. City Apalachin 6. Zip Code (5 digits only) 13732 7. E-mail address tqpoole@gmail.com 8. Office Held or Trustee Treasurer 9. Term Begins - Month January 10. Term Begins - Year (year) 2013 11. Term Expires December 12. Term Expires - Year (yyyy) 2017 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? N 1. Title of Board Member (select one): Mr. 2. First Name of Board Member 3. Last Name of Board Member 4. Mailing Address 56 Paige St. 5. City Owego 6. Zip Code (5 digits only) 13827 7. E-mail address Statement@stny.rr.com 8. Office Held or Trustee Trustee 9. Term Begins - Month January 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires December 12. Term Expires - Year (yyyy)	3.	Last Name of Board Member	Poole
6. Zip Code (5 digits only) 13732 7. E-mail address 10ffice Held or Trustee 11 Treasurer 12 Term Begins - Year (year) 13 The date the Oath of Office (mm/dd/yyyy) was taken 14 The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15 Is this a brand new trustee? 1 Title of Board Member (select one): 2 First Name of Board Member 3 Last Name of Board Member 4 Mailing Address 5 City 6 Zip Code (5 digits only) 7 E-mail address 8 Office Held or Trustee 9 Term Begins - Year (year) 10 Term Begins - Year (year) 11 Term Expires 12 December 13 December 14 Danuary 15 Statement@stny.rr.com 16 Trustee 17 Trustee 18 Office Held or Trustee 19 Term Begins - Month 10 Term Begins - Year (year) 11 Term Expires 12 December 12 Term Expires - Year (yyyy)	4.	Mailing Address	9 Perry Dr
7. E-mail address 8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires - Year (yyyy) 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? 1. Title of Board Member (select one): 2. First Name of Board Member 3. Last Name of Board Member 4. Mailing Address 5. City Owego 6. Zip Code (5 digits only) 7. E-mail address 8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (yyyy) 11. Term Expires 12. Term Expires 13. December 14. Danuary 15. December 16. Zip Code (5 digits only) 17. E-mail address 18. Office Held or Trustee 19. Term Begins - Year (year) 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires - Year (yyyy) 2019	5.	City	Apalachin
8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (year) 2013 11. Term Expires 12. Term Expires - Year (yyyy) 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? 1 Title of Board Member (select one): 2 First Name of Board Member 3 Last Name of Board Member 4 Mailing Address 5 Faige St. 5 City 6 Zip Code (5 digits only) 7 E-mail address 8 Office Held or Trustee 9 Term Begins - Month 10 Term Begins - Year (year) 11 Term Expires 12 Term Expires 13 December 14 Danuary 15 Statement@stny.rr.com 16 Trustee 17 Trustee 18 Office Held or Trustee 19 Term Begins - Year (year) 10 Term Expires 11 Term Expires 12 Term Expires - Year (yyyy)	6.	Zip Code (5 digits only)	13732
9. Term Begins - Month 10. Term Begins - Year (year) 2013 11. Term Expires December 12. Term Expires - Year (yyyy) 2017 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? N 1. Title of Board Member (select one): Mr. 2. First Name of Board Member 3. Last Name of Board Member 4. Mailing Address 56 Paige St. 5. City Owego 6. Zip Code (5 digits only) 7. E-mail address Statement@stny.rr.com 8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires - Year (yyyy) 2019	7.	E-mail address	tqpoole@gmail.com
10. Term Begins - Year (year) 11. Term Expires 12. Term Expires - Year (yyyy) 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? 1. Title of Board Member (select one): 2. First Name of Board Member 3. Last Name of Board Member 4. Mailing Address 56 Paige St. 5. City Owego 6. Zip Code (5 digits only) 7. E-mail address Statement@stny.rr.com 8. Office Held or Trustee 9. Term Begins - Year (year) 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires 12. Term Expires - Year (yyyy) 2019	8.	Office Held or Trustee	Treasurer
11. Term Expires 12. Term Expires - Year (yyyy) 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? 1. Title of Board Member (select one): 2. First Name of Board Member 3. Last Name of Board Member 4. Mailing Address 5. City 6. Zip Code (5 digits only) 7. E-mail address 8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires - Year (yyyy) December 12. Term Expires 12. Term Expires - Year (yyyy)	9.	Term Begins - Month	January
12. Term Expires - Year (yyyy) 13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? 1. Title of Board Member (select one): 2. First Name of Board Member 3. Last Name of Board Member 4. Mailing Address 56 Paige St. 5. City Owego 6. Zip Code (5 digits only) 7. E-mail address 8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires - Year (yyyy) 2017 2017 N/A N/A N/A 10. Term Expires 10. December 12. Term Expires - Year (yyyy)	10.	Term Begins - Year (year)	2013
13. The date the Oath of Office (mm/dd/yyyy) was taken 14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? 1. Title of Board Member (select one): 2. First Name of Board Member 3. Last Name of Board Member 4. Mailing Address 5. City 6. Zip Code (5 digits only) 7. E-mail address 8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires - Year (yyyy) NA	11.	Term Expires	December
14. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? 1. Title of Board Member (select one): 2. First Name of Board Member 3. Last Name of Board Member 4. Mailing Address 56 Paige St. 5. City 6. Zip Code (5 digits only) 7. E-mail address 8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires - Year (yyyy) N/A N/A N/A N/A N 1. N 1. Title of Board Member Rick Stilson Stilson 1. Air Com Trustee Stilson 1. Term Expires December 1. December 1. Term Expires - Year (yyyy)	12.	Term Expires - Year (yyyy)	2017
county clerk (mm/dd/yyyy) 15. Is this a brand new trustee? N Title of Board Member (select one): Mr. Last Name of Board Member Last Name of Board Member Mailing Address City Cowego City C	13.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A
1. Title of Board Member (select one): 2. First Name of Board Member 3. Last Name of Board Member 4. Mailing Address 5. City 6. Zip Code (5 digits only) 7. E-mail address 8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires - Year (yyyy) Mr. Mr. Mr. Mr. Mr. Rick Stilson Stilson Owego 13827 Towego 13827 Trustee Trustee Trustee January 2015 December 12. Term Expires - Year (yyyy)	14.		N/A
 First Name of Board Member Last Name of Board Member Mailing Address City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month Term Begins - Year (year) Term Expires December Term Expires - Year (yyyy) 	15.	Is this a brand new trustee?	N
3. Last Name of Board Member 4. Mailing Address 5. City 6. Zip Code (5 digits only) 7. E-mail address 8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires - Year (yyyy) Stilson 56 Paige St. Owego 13827 Trustee Statement@stny.rr.com Trustee 9. Trustee 9. December 2015 11. Term Expires December	1.	Title of Board Member (select one):	Mr.
4. Mailing Address 56 Paige St. 5. City Owego 6. Zip Code (5 digits only) 13827 7. E-mail address Statement@stny.rr.com 8. Office Held or Trustee Trustee 9. Term Begins - Month January 10. Term Begins - Year (year) 2015 11. Term Expires December 12. Term Expires - Year (yyyy) 2019	2.	First Name of Board Member	Rick
5. City Owego 6. Zip Code (5 digits only) 13827 7. E-mail address Statement@stny.rr.com 8. Office Held or Trustee Trustee 9. Term Begins - Month January 10. Term Begins - Year (year) 2015 11. Term Expires December 12. Term Expires - Year (yyyy) 2019	3.	Last Name of Board Member	Stilson
6. Zip Code (5 digits only) 13827 7. E-mail address Statement@stny.rr.com 8. Office Held or Trustee 9. Term Begins - Month January 10. Term Begins - Year (year) 2015 11. Term Expires December 12. Term Expires - Year (yyyy) 2019	4.	Mailing Address	56 Paige St.
7. E-mail address Statement@stny.rr.com 8. Office Held or Trustee Trustee 9. Term Begins - Month January 10. Term Begins - Year (year) 2015 11. Term Expires December 12. Term Expires - Year (yyyy) 2019	5.	City	Owego
 8. Office Held or Trustee 9. Term Begins - Month 10. Term Begins - Year (year) 11. Term Expires 12. Term Expires - Year (yyyy) 2015 15 16 17 18 19 19 	6.	Zip Code (5 digits only)	13827
9.Term Begins - MonthJanuary10.Term Begins - Year (year)201511.Term ExpiresDecember12.Term Expires - Year (yyyy)2019	7.	E-mail address	Statement@stny.rr.com
10.Term Begins - Year (year)201511.Term ExpiresDecember12.Term Expires - Year (yyyy)2019	8.	Office Held or Trustee	Trustee
11. Term Expires December 12. Term Expires - Year (yyyy) 2019	9.	Term Begins - Month	January
12. Term Expires - Year (yyyy) 2019	10.	Term Begins - Year (year)	2015
12. Term Expires - Year (yyyy) 2019	11.	Term Expires	December
	12.	•	2019
	13.		N/A

14.	The date the Oath of Office was filed with town or	N/A
15.	county clerk (mm/dd/yyyy) Is this a brand new trustee?	N
		Mr.
1.	Title of Board Member (select one):	Tom
2.	First Name of Board Member	
3.	Last Name of Board Member	Hall
4. 5	Mailing Address	44 Coventry Rd
5.	City	Endicott
6. 7	Zip Code (5 digits only)	13760
7.	E-mail address	thall11@stny.rr.com
8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2012
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2016
13.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A
14.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A
15.	Is this a brand new trustee?	N
1.	Title of Board Member (select one):	Mrs.
2.	First Name of Board Member	Judy
3.	Last Name of Board Member	Blanding
4.	Mailing Address	632 Lillie Hill Rd
5.	City	Apalachin
6.	Zip Code (5 digits only)	13732
7.	E-mail address	b4320@frontier.com
8.	Office Held or Trustee	Secretary
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2015
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2019
13.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A
14.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A
15.	Is this a brand new trustee?	N
1.	Title of Board Member (select one):	Mrs.
2.	First Name of Board Member	Nancy
3.	Last Name of Board Member	Thrash
4.	Mailing Address	750 E. Campville Rd
5.	City	Endicott
6.	Zip Code (5 digits only)	13760
7.	E-mail address	nthrash@live.com
8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2016
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2020
13.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A

14.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A
15.	Is this a brand new trustee?	N

11. OPERATING FUNDS RECEIPTS

Report financial data based on the fiscal reporting year reported in Part 1. ROUND TO THE NEAREST DOLLAR. Please click here to read general instructions before completing this section.

LOCAL PUBLIC FUNDS

Specify by name the municipalities or districts which are the source of funds.

11.1	Does the library receive any local public funds? If yes,	
	complete one record for each funding source; if no, go to	Y
	question 11.3.	

	question 11.5.	
1.	Source of Funds	County
2.	Name of funding County, Municipality or District	Tioga
3.	Amount	\$8,612
4.	Subject to public vote held in reporting year or in a previous reporting year(s).	N
5.	Written Contractual Agreement	Y
1.	Source of Funds	Town
2.	Name of funding County, Municipality or District	Owego
3.	Amount	\$1,500
4.	Subject to public vote held in reporting year or in a previous reporting year(s).	N
5.	Written Contractual Agreement	N
1.	Source of Funds	School District
2.	Name of funding County, Municipality or District	Owego Apalachin
3.	Amount	\$72,444
4.	Subject to public vote held in reporting year or in a previous reporting year(s).	Y
5.	Written Contractual Agreement	N
11.2	TOTAL LOCAL PUBLIC FUNDS	\$82,556
SYST	EM CASH GRANTS TO MEMBER LIBRARY	
11.3	Local Library Services Aid (LLSA)	\$1,473
11.4	Central Library Aid (CLDA and/or CBA)	\$0
11.5	Additional State Aid received from the System	\$0
11.6	Federal Aid received from the System	\$0
11.7	Other Cash Grants	\$0
11.8	TOTAL SYSTEM CASH GRANTS (Add Questions 11.3, 11.4, 11.5, 11.6 and 11.7)	\$1,473
OTH	ER STATE AID	
11.9	State Aid other than LLSA, Central Library Aid (CLDA and/or CBA), or other State Aid reported as system cash	\$0

and/or CBA), or other State Aid reported as system cash 30grants

FEDERAL AID FOR LIBRARY OPERATION

11.10	LSTA	\$0
11.11	Other Federal Aid	\$0
11.12	TOTAL FEDERAL AID (Add Questions 11.10 and	\$0
	11.11)	φU

11.13	CONTRACTS WITH PUBLIC LIBRARIES AND/OR PUBLIC LIBRARY SYSTEMS IN NEW YORK STATE	\$0
OTH	ER RECEIPTS	
11.14	Gifts and Endowments	\$25,692
11.15	Fund Raising	\$0
11.16	Income from Investments	\$0
11.17	Library Charges	\$1,993
11.18	Other	\$8,403
11.19	TOTAL OTHER RECEIPTS (Add Questions 11.14, 11.15, 11.16, 11.17 and 11.18)	\$36,088
11.20	TOTAL OPERATING FUND RECEIPTS (Add Questions 11.2, 11.8, 11.9, 11.12, 11.13 and 11.19)	\$120,117
11.21	BUDGET LOANS	\$0
TRAN	ISFERS	
11.22	From Capital Fund (Same as Question 14.8)	\$0
11.23	From Other Funds	\$0
11.24	TOTAL TRANSFERS (Add Questions 11.22 and 11.23)	\$0
11.25	BALANCE IN OPERATING FUND - Beginning Balance for Fiscal Year Ending 2015 (Same as Question 12.40 of previous year if fiscal year has not changed)	\$67,513
11.26	GRAND TOTAL RECEIPTS, BUDGET LOANS, TRANSFERS AND BALANCE (Add Questions 11.20, 11.21, 11.24 and 11.25; Same as Question 12.41)	\$187,630

12. OPERATING FUND DISBURSEMENTS STAFF EXPENDITURES

Salaries & Wages Paid from Library Funds

Please click <u>here</u> to read general instructions before completing this section.		
12.1	Certified Librarians	\$0
12.2	Other Staff	\$45,870
12.3	Total Salaries & Wages Expenditures (Add Questions 12.1 and 12.2)	\$45,870
12.4	Employee Benefits Expenditures	\$2,705
12.5	Total Staff Expenditures (Add Questions 12.3 and 12.4)	\$48,575
COLLECTION EXPENDITURES		
12.6	Print Materials Expenditures	\$11,936
12.7	Electronic Materials Expenditures	\$0
12.8	Other Materials Expenditures	\$538
12.9	Total Collection Expenditures (Add Questions 12.6, 12.7 and 12.8)	\$12,474
CAPITAL EXPENDITURES FROM OPERATING FUNDS		
12.10	From Local Public Funds (71PF)	\$0
12.11	From Other Funds (710F)	\$0
12.12	Total Capital Expenditures (Add Questions 12.10 and 12.11)	\$0

OPERATION AND MAINTENANCE OF BUILDINGS

Repairs to Building & Building Equipment			
12.13	From Local Public Funds (72PF)	\$0	
12.14	From Other Funds (72OF)	\$0	
12.15	Total Repairs (Add Questions 12.13 and 12.14)	\$0	
12.16	Other Disbursements for Operation & Maintenance of Buildings	\$20,224	
12.17	Total Operation & Maintenance of Buildings (Add Questions 12.15 and 12.16)	\$20,224	
MISC	ELLANEOUS EXPENSES		
12.18	Office and Library Supplies	\$2,824	
12.19	Telecommunications	\$1,946	
12.20	Binding Expenses	\$0	
12.21	Postage and Freight	\$1,136	
12.22	Professional & Consultant Fees	\$3,520	
12.23	Equipment	\$0	
12.24	Other Miscellaneous	\$3,900	
12.25	Total Miscellaneous Expenses (Add Questions 12.18,	\$13,326	
	12.19, 12.20, 12.21, 12.22, 12.23 and 12.24)	,	
12.26	CONTRACTS WITH PUBLIC LIBRARIES AND/OR PUBLIC LIBRARY SYSTEMS IN NEW	\$6,137	
DERT	YORK STATE SERVICE		
DEDI	SERVICE		
Capita	al Purposes Loans (Principal and Interest)		
12.27	From Local Public Funds (73PF)	\$0	
12.28	From Other Funds (73OF)	\$0	
12.29	Total (Add Questions 12.27 and 12.28)	\$0	
12.30	Budget Loans (Principal and Interest)	\$0	
12.31	Short-Term Loans	\$0	
12.32	Total Debt Service (Add Questions 12.29, 12.30 and 12.31)	\$0	
12.33	TOTAL OPERATING FUND DISBURSEMENTS		
	(Add Questions 12.5, 12.9, 12.12, 12.17, 12.25, 12.26 and 12.32)	\$100,736	
TRAN	ISFERS		
Trans	fers to Capital Fund		
12.34	From Local Public Funds (76PF)	\$0	
12.35	From Other Funds (76OF)	\$0	
12.36	Total Transfers to Capital Fund (Add Questions 12.34 and 12.35; same as Question 13.8)	\$0	
12.37	Transfer to Other Funds	\$0	
12.38	TOTAL TRANSFERS (Add Questions 12.36 and 12.37)	\$0	
12.39	TOTAL DISBURSEMENTS AND TRANSFERS (Add Questions 12.33 and 12.38)	\$100,736	
12.40	BALANCE IN OPERATING FUND - Ending Balance for the Fiscal Year Ending 2015	\$86,894	
	0		

12.41	GRAND TOTAL DISBURSEMENTS, TRANSFERS & BALANCE (Add Questions 12.39 and 12.40; same as Question 11.26)	\$187,630	
ASSU	RANCE		
12.42	The Library operated in accordance with all provisions of Education Law and the Regulations of the Commissioner, and assures that the "Annual Report" was reviewed and accepted by the Library Board on (date - mm/dd/yyyy).	02/16/2016	
FISCA	FISCAL AUDIT		
12 /3	Last audit parformed (mm/dd/yyyyy)	N/A	
	Last audit performed (mm/dd/yyyy)	IV/A	
12.44	Time period covered by this audit (mm/dd/yyyy) - (mm/dd/yyyy)	N/A	
12.45	Indicate type of audit (select one):	N/A	
CAPITAL FUND			
12.46	Does the library have a Capital Fund? Enter Y for Yes, N for No. If No, stop here. If Yes, complete the Capital Fund Report.	N	
13. CAPITAL FUND RECEIPTS Per out financial data based on the financial vacuum remouted in Port 1. POUND TO T.			

Report financial data based on the fiscal year reported in Part 1. ROUND TO THE NEAREST DOLLAR. Please click <u>here</u> to read general instructions before completing this section.

REVENUES FROM LOCAL SOURCES

13.1	Revenues from Local Government Sources	\$0
13.2	All Other Revenues from Local Sources	\$0
13.3	Total Revenues from Local Sources (Add Questions 13.1 and 13.2)	\$0
STAT	E AID FOR CAPITAL PROJECTS	
13.4	State Aid Received for Construction	\$0
13.5	Other State Aid	\$0
13.6	Total State Aid (Add Questions 13.4 and 13.5)	\$0
FEDE	RAL AID FOR CAPITAL PROJECTS	
13.7	TOTAL FEDERAL AID	\$0
INTE	RFUND REVENUE	
13.8	Transfer from Operating Fund (Same as Question 12.36)	\$0
13.9	TOTAL REVENUES (Add Questions 13.3, 13.6, 13.7 and 13.8)	\$0
13.10	NON-REVENUE RECEIPTS	\$0
13.11	TOTAL CASH RECEIPTS (Add Questions 13.9 and 13.10)	\$0
13.12	BALANCE IN CAPITAL FUND - Beginning Balance for Fiscal Year Ending 2015 (Same as Question 14.11 of previous year, if fiscal year has not changed)	\$0
13.13	TOTAL CASH RECEIPTS AND BALANCE (Add Questions 13.11 and 13.12; same as Question 14.12)	\$0

14. CAPITAL FUND DISBURSEMENTS PROJECT EXPENDITURES

Please click <u>here</u> to read general instructions before completing this section.

14.1	Construction	\$0
14.2	Incidental Construction	\$0
Other	Disbursements	
14.3	Purchase of Buildings	\$0
14.4	Interest	\$0
14.5	Collection Expenditures	\$0
14.6	Total Other Disbursements (Add Questions 14.3, 14.4 and 14.5)	\$0
14.7	TOTAL PROJECT EXPENDITURES (Add Questions 14.1, 14.2 and 14.6)	\$0
14.8	TRANSFER TO OPERATING FUND (Same as Question 11.22)	\$0
14.9	NON-PROJECT EXPENDITURES	\$0
14.10	TOTAL CASH DISBURSEMENTS AND TRANSFERS (Add Questions 14.7, 14.8 and 14.9)	\$0
14.11	BALANCE IN CAPITAL FUND - Ending Balance for the Fiscal Year Ending 2015	\$0
14.12	TOTAL CASH DISBURSEMENTS AND BALANCE (Add Questions 14.10 and 14.11; same as Question 13.13)	\$0

15. CENTRAL LIBRARIES

PART 15 EXISTS FOR THE CENTRAL/CO-CENTRAL LIBRARIES ONLY. PLEASE PROCEED TO SECTION 16. FEDERAL TOTALS AND CONTINUE ON WITH YOUR SURVEY

16. FEDERAL TOTALS

All questions in Part 16 are calculated, locked fields.

Note: See instructions for definitions and calculations of each of these Federal Totals.

16.1	Total ALA-MLS	0.00
16.2	Total Librarians	0.75
16.3	All Other Paid Staff	1.13
16.4	Total Paid Employees	2.63
16.5	State Government Revenue	\$1,473
16.6	Federal Government Revenue	\$0
16.7	Other Operating Revenue	\$36,088
16.8	Total Operating Revenue	\$120,117
16.9	Other Operating Expenditures	\$39,687
16.10	Total Operating Expenditures	\$100,736
16.11	Total Capital Expenditures	\$0
16.12	Print Materials	13,266
16.13	Total Registered Borrowers	1,874
16.14	Other Capital Revenue and Receipts	\$0
16.15	Total Number of Internet Terminals Used by the General Public	7

17. FOR NEW YORK STATE LIBRARY USE ONLY

17.1	LIB ID	2400600500
17.2	Interlibrary Relationship Code	ME
17.3	Legal Basis Code	NP

17.4 Administrative Structure Code
17.5 FSCS Public Library Definition
17.6 Geographic Code
17.7 FSCS ID
17.8 SED CODE
SO
OTH
NY0795
800000082803

SUGGESTED IMPROVEMENTS

Phone Number:

Library Name: APALACHIN LIBRARY ASSOCIATION

Library System: Finger Lakes Library System

Name of Person Completing Form:

Please share with us your suggestions for improving the *Annual Report*. When providing feedback, if applicable please indicate the question number each comment/suggestion refers to. Thank you!